Full name of bank or financial institution - Mandatory

Branch Name & complete branch address - Mandatory

Beneficiary Bank Identification Code (Swift BIC) -
full 11 character BIC required - if 8 characters last 3 = XXX - Mandatory

Please provide the mandatory CCI number (20 Digits)
This should not be the same as their internal account number which is the bene account number

Beneficiary Account number -
maximum 34 digits allowed (numeric only), no hyphen '-' or slash '/' or space allowed - Mandatory*

Name of account holder (maximum 35 characters Alphabetic including spaces) - Mandatory

Beneficiary Address: (maximum 46 characters Alphanumeric including spaces) - Optional

City, State and Area Zip Code (maximum 24 characters Alphanumeric including spaces) - Optional

Account type :(Tick one ✓) Optional

- [ ] Current Account
- [ ] Savings Account

Currency the account is held in (If left blank local currency will be used)

I wish the payment to be paid by direct deposit to the account noted above.

CAE/IPI Number _____ Date _____

Name _____ Signature _____