



Full name of bank or financial institution – Mandatory

Branch Name & complete branch address – Mandatory

Beneficiary bank and branch clearing code - 8 digits (numeric only), no hyphen '-' or slash '/' or space allowed and should be padded with leading zeros if less than 8 digits- - Mandatory

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Name of account holder (maximum 35 characters Alphanumeric including spaces ) – Mandatory

Beneficiary Account number - 10 digits (numeric only), no hyphen '-' or slash '/' or space allowed should be padded with leading zeros if less than 10 digits- Mandatory

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

CAE/IPI Number \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_