

APPLICATION FOR TRANSFER OF FUNDS/ FORMULAIRE DE TRANSFERT DE FONDS

Bank of India, Paris shall effect the remittance through one of its branches/ correspondents to facilitate the transfer of funds. However, it takes no responsibility for delays occurring in receipt of funds by ultimate beneficiary due to communication breakdowns or delays at the particular branch or the correspondent bank. In the event of any fake notes detected by the bank in the cash remittance, the customer undertakes to compensate the loss to the bank.

APPLICANT/DONNEUR D'ORDRE	BENEFICIARY/BENEFICIAIRE
Name /Nom et Prénom :	Name/Nom : Date of Birth :
Address /Adresse : _____ _____ _____	Complete Address of Beneficiary :
Nº de Telephone : _____ Email :	Name of the Bank : _____ Name of the Branch : _____ Full account no : _____ IFSC Code(Other Banks) : _____ IFSC CODE : _____
For Account Holder Please debit by account no. With Bank of India Paris Branch to effect the remittance.	Amount /Montant : EUR _____ Amount in words /Montant en lettres : _____
ID Card/Carte d'identité/carte de séjour : _____	Purpose of remittance/Motif du transfert :

Declaration of the Remitter :
I declare that this remittance is made out of my bonafide legal sources not Involving any unlawful activities and I shall provide proof of income whenever required. The beneficiary of this remittance is personally known to me and the proceeds of this remittance will not be used for any unlawful activity. Remittance made by me for past 12Months is within the limit Euro 3000.00 with respect to Euro 1000.00 a month by cash.

Signature:

DETAILS OF CASH REMITTANCE/DETAILS DU VERSEMENT	DETAILS OF CHEQUE DEPOSITED																														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">NOS</th> <th style="width:35%;">BILLETS</th> <th style="width:50%;">MONTANT</th> </tr> </thead> <tbody> <tr><td> </td><td>X €500</td><td> </td></tr> <tr><td> </td><td>X €200</td><td> </td></tr> <tr><td> </td><td>X €100</td><td> </td></tr> <tr><td> </td><td>X € 50</td><td> </td></tr> <tr><td> </td><td>X € 20</td><td> </td></tr> <tr><td> </td><td>X € 10</td><td> </td></tr> <tr><td> </td><td>X € 5</td><td> </td></tr> <tr><td>COINS</td><td> </td><td> </td></tr> <tr><td>TOTAL</td><td> </td><td> </td></tr> </tbody> </table>	NOS	BILLETS	MONTANT		X €500			X €200			X €100			X € 50			X € 20			X € 10			X € 5		COINS			TOTAL			Bank : Cheque Number : Cheque Amount : Date : Date of Clearance :
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FOR BANK USE/ CADRE RESERVE A LA BANQUE

Rate of exchange/Taux de change :	AMT (INR).....
Equivalent Euro / Valeur en euro	€
Our Charges / Notre Frais :	€
Already Sent :	_____
Now :	€ _____
Total :	TOTAL _____
(Not to exceed 3000.00 for 12 Months)	
Signature of Cashier	Signature of the checking officer

REMITTANCE MODE	MT:	WT:	DD:
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