



**बैंक ऑफ़ बड़ौदा**  
**Bank of Baroda**

**APPLICATION FORM FOR TELEGRAPHIC TRANSFERS ( SWIFT)**

Branch	<input type="text"/>	Date	<input type="text"/>
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<b>For Bank Use Only</b>	
Nostro Bank	<input type="text"/> SWIFT TRANSFER/DRAFT
Nostro A/c No.	<input type="text"/> TT/DD REF NO.

**Branch to ensure that :**  
**(Please tick appropriate box)**

Remittance are done as per RBF exchange Control guidelines and all documents are kept in branch records.

Dow Jones are carried out for the applicant and beneficiary and kept in branch record.

Permission is obtained for remittance for High Risk Countries from Branch Head/Territory Office

Currency	Rate	Fiji Dollars
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RBF Code/Purpose of remittance :	Commission
RBF Permit No :	TOTAL FJD

Payment Mode : CASH	CHEQUE NO.	DEBIT A/C NO.
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**Applicant Details : (50K)**

Account No:

Name/Company name:

Residential/Street Address :

Postal Address : Telephone No.

Intermediary Bank (56)	Swift Code:
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**Beneficiary Banker Details (57)**

Name of Bank :

Branch Address:

BSB No.	SWIFT Code :
A/c No.	Routing/Fedwire/IBAN/IFSC:

**Beneficiary Details (59)**

Account Number :

Name/Company name:

Residential/Street Address :

**Remittance Information (70)**

**Details of charges (71)** **Sender to Receiver (Bank to Bank information) (72)**

**OUR / SHA**

**Terms and Conditions**

I/We the Applicant agree to the following terms and conditions : **Bank of Baroda is hereinafter referred to as "The Bank"**

- I/We agree that the remittance is made at my/our risk and on my/our responsibility and on the distinct understanding that no liability whatsoever is to attach to The Bank for any loss or damage incurred to me/us as a result of the Bank accepting my/our request arising or resulting from incorrect information, delay in transmission, delivery or non-delivery of payment or for errors and omissions
- The Bank may utilise the services of another Bank for giving effect to my/our instructions.
- I/We agree that unless stipulated otherwise, all charges in the country of payment are for beneficiary's account.
- Where required by law the Bank shall give any information referred to in this application to regulatory authorities and other entities.
- In the event of beneficiary claiming non-receipt of funds, The Bank will only under obligation, verify the claim once to ascertain the reason for non-payment and I/we agree to pay the cost of any further follow ups and/or enquiries related to this payment.
- I/We agree to indemnify and continue to hold The Bank indemnified for any loss or damage arising as a result of The Bank accepting my/our application.

<b>Prepared by:</b> Name:..... Signature:.....	<b>Checked by:</b> Name:..... Signature:.....	<b>Branch Head/Accountant:</b> Name:..... Signature:.....	<b>Applicant's Signature</b>
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