## FUND TRANSFER FORM (APPLICABLE FOR EXISTING CUSTOMERS)



Please fill the form in Black Ink and in CAPITAL LETTERS Date D D PLEASE ARRANGE TO DEBIT MY ACCOUNT AS PER THE INSTRUCTIONS GIVEN BELOW Type of Transfer RTGS Demand Draft Issuance NEFT Account to Account Transfer \*Applicable for NEFT/RTGS Details of IDFC FIRST Bank Account Holder (Applicant) Details of Recipient (Beneficiary) Name of Beneficiary Account Name Account Number IDFC FIRST Account Number Re-confirm Account Number Branch Current Account Savings Account \*Account Type Cheque No. (Cheque should be in favour of IDFC FIRST Bank Account, transaction type and Name of Beneficiary) \*Bank Name \*IFSC Code Cheque Date Branch Address & City D D \*Sender to receiver information (if any) Location to be drawn on (for Demand Draft only) \_\_\_\_\_ Amount in Words ₹\_ Amount in Figures ₹ \_\_\_ I/We, the undersigned, have read, understood and agree to absolutely and unconditionally abide by and be bound by Terms and Conditions displayed on website www.idfcfirstbank.com as revised from time to time by IDFC FIRST Bank Limited, in relation to all of my/our account, for present and future, maintained/opened/to be maintained/to be opened with IDFC FIRST Bank Limited. For RTGS, NEFT and Account to account transfers, credit will be effected based solely on the beneficiary account number information and the beneficiary name particulars will not be used therefore. Name Signature (as per account rule) First Holder/Authorised Signatory Second Holder/Authorised Signatory (Affix stamp for Firm/Company Account) Authorisation to bearer by A/C Holder (For collection of draft or bank's acknowledgement of receipt of customer instruction for execution of Fund Transfer) Bearer's Signature \_ \_\_\_\_\_ Signature Attested by me/our Authorised Signatories (with co. stamp) \_\_\_ FOR BANK USE ONLY Demand Draft No. \_\_\_\_\_ Bearer Name \_\_\_\_ \_\_\_ Bearer Signature \_\_\_\_ Demand Draft Collected by \_\_\_\_\_ Customer Name \_\_\_\_\_ \_\_\_\_ Customer Signature \_\_\_\_\_ Service Request No. \_\_\_\_\_ Employee ID \_\_\_\_\_\_ Name of the Branch Official \_\_\_\_\_ Sourcing Branch Code \_\_\_\_\_ \_\_\_\_\_ Signature of the Branch Official \_\_\_\_\_