

IMPS MONEY TRANS	FER APPLICATION FORM
Please remit an amount of Rupees	(in words)
	biting my / our account for amount of remittance and Bank
charges Rs	
Remittance Details (if any):	
Amount RsCharges RsTotal Rs	
DETAILS OF APPLICANT (REMITTER)	DETAILS OF BENEFICIARY
Account Number:	Account Number / Mobile Number:
Name / Title of Account:	IFS
Name / Title of Account:	CODE/MMID:
Branch	
Type of A/c:	
Address:	Name:
	Bank: A/c Type:
Mobile No:	Branch:
	Location:
Terms and Conditions:	
1. Bank will not be liable for non transfer of funds due to inco	rrect / incomplete beneficiary account details.
2. Bank will not be liable for the delay / non transfer of funds transfer under IMPS due to any technical reasons.	
3. Applicant/s is / are agreeable to all terms and conditions applicable to IMPS transactionissued by RBI / Bank from time to	
time available for reference in the bank's Head office / Branches.	
I / We declare that I / We are residents in India I / W	a agree to shide by the Pank's rules relating to the account(s) and I
I / We declare that I / We are residents in India. I / We agree to abide by the Bank's rules relating to theaccount(s) and I / We have read, understood and hereby agree to all the terms & conditions mentioned above.	
Place:	
Date:	Signature of applicant/s (with Seal if applicable)
OFF	ICE USE
Customer ID:	
Transaction reference number: Entered By:	
Account debitedAmount	
	Verified by Branch Manager
CUSTOMER COPY	
Amount RsCharges RsTotal Rs	
Details of applicant (sender)	Details of beneficiary(receiver)
Account Number:	

Branch: Date:

Name:
Bank: A/c Type:
Branch: