



NCHL-IPS Fund Transfer Form

Fund Transfer Details			Date:												
<input type="checkbox"/> General Transfer (CUST)	<input type="checkbox"/> Remittance (REMI)	<input type="checkbox"/> Fee (FEEO)	<input type="checkbox"/> Insurance (INSU)												
<input type="checkbox"/> Installment (INSM)	<input type="checkbox"/> Credit Card (CCRD)	<input type="checkbox"/> Salary Corporate (SALC)	<input type="checkbox"/> Salary (SALA)												
Amount (In Figures)		(In Words)													
Details for Beneficiary															

Credit account Information (Beneficiary Details)																				
Creditor Name																				
Creditor Bank Name												Branch								
Creditor Account No.																				

Debit account Information (Applicant Details)																				
Debtor Name																				
Debtor Account No.																				

Terms and Conditions:

1. The Applicant shall be responsible for any loss/liability occurred due to inconsistencies or incompleteness of the information provided.
2. Jebil's Finance Ltd. will deduct will applicable fee from applicants above mentioned account. Receiving financial institution also may charge fees.
3. Credit to Beneficiaries account timing rely on availability of NCHL-IPS sessions.

Applicant's Signature

For Official Purpose														
Transaction No.														
<div style="display: flex; justify-content: space-between;"> <div> <p>Processed by</p> <p>Date:</p> </div> <div> <p>Approved by</p> <p>Date:</p> </div> </div>														



IPS Fund Transfer Receipt																				
Creditor Name																				
Creditor Bank Name												Branch								
Creditor Account No.																				
Amount (In Figures)		(In Words)																		
Debtor Name																				
Debtor Account No.																				