

APPLICATION FORM FOR CUSTOMER

**PNB INSTA REMIT (RTGS)
Application Form FOR Customers**

ANNEXURE-C

Date _____

Time of Request: _____ AM/PM

REQUEST OPTION :

A (execution within 2 hours)

B ((execution within 4 hours)

The Manager
Punjab National Bank

Please transfer Rs. _____ (in words _____) under RTGS and debit the amount with your charges to my Savings/Current/CC/OD Account No. _____. The details of remittance are as under: -

1. Name of Beneficiary :

2. Name of Beneficiary's Bank:

3. Name of Branch of Beneficiary's Bank and Account No.

3.a) Name of Branch:

3.b) Beneficiary's Bank Account No.:

4. IFSC Code of Beneficiary Branch (To be filled by our Bank) :

5. Amount of remittance

Rs.

6. Commission (To be filled by our Bank)

Rs.

7. Total Amount to be Debited/Received from Customer

Rs.

8. Total Amount to be Debited/Received from Customer (In words)

Rs.

I agree that the credit to the beneficiary account shall be accorded on the next day if the beneficiary bank and beneficiary branch is closed on account of holiday. I hereby agree that the Bank will not be held responsible in any way for unexecuted RTGS Request for the reasons beyond the control of Punjab National Bank or Reserve Bank of India , or both.

(Applicant 's Signature)

Applicant Name :

Applicant's Account No.

at B/O:

Telephone No.: Landline :

Mobile :

(Address of the Non – Customer Applicants must be recorded in this form against the name of the beneficiary at col.No.1)

UTR No.(for office use)

**ACKNOWLEDGMENT FOR CUSTOMER (To be cut from this perforated line
and deliver to applicant)**

.....
Received from

Rs._____

In words:_____

**for execution of RTGS request as per details mentioned in the application form). Date of
receipt : _____ Time of Receipt : _____ Request Option : A / B**

AUTHORISED SIGNATORY