

CHEQUE PRE-CONFIRMATION REQUEST FORM

CONFIDENTIAL

lease fill in BLOCK LETTERS e.g. (ABC-Z)

Please III III BLOCK LETTERS e.g. (ADC-2
Request Date
Account Type Current FirstSaving Plus Corporate Others
Account Number Branch
Service Request Single Cheque Multiple Cheques
Please accept this as my instruction to confirm payment for the cheque detailed below or cheques in the attached schedule. (The format in the schedule should contain all details below)
Instrument Number Instrument Security Number (This is the first eight digit numbers below the cheque leaflet) (This is the ten alpha-numeric at the top of the cheque leaflet)
Instrument Date
Amount in words
Beneficiary Name Mode of Identification
Instrument Number Instrument Security Number
(This is the first eight digit numbers below the cheque leaflet) (This is the ten alpha-numeric at the top of the cheque leaflet)
Instrument Date Amount Opened Cheque Closed Cheque
Amount in words
Beneficiary Name Mode of Identification
Instrument Number Instrument Security Number
(This is the first eight digit numbers below the cheque leaflet) (This is the ten alpha-numeric at the top of the cheque leaflet)
Instrument Date Amount Opened Cheque Closed Cheque
Amount in words
Beneficiary Name Mode of Identification
DISCLAIMER The Bank shall not be held liable for any loss or liability that may arise from reliance on this document upon provided the signature(s) below reasonably appear(s) regular. I/We further declare the I/We shall fully indemnify the Bank for any loss or liability it may sustain in giving effect to this request.
Authorised Signatories
Name Signature
Name Signature
For Official Use only
Verified by: Name Designation Signature Date Date

Designation

Signature

Date

Authorised by: Name