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| **BHARATI SAHAKARI BANK LTD., PUNE-30** | **Application Form for Fund Transfer Through Real Time Gross Settlement (RTGS)/ National Electronic Fund Transfer (NEFT)** |

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| Branch Code / Name |  |  | **Limit for transactions** | |
| Date |  |  | NEFT | 1 to No Limit |
| Time |  |  | RTGS | 2.00 lakh to No Limit |

You are requested to remit the proceeds as per details below through RTGS / NEFT (Tick the Pappropriate Box)

Attaching Cheque No  FOR **Rs.** /-(For RTGS draw cheque favouring “Bharati Sahakari Bank Ltd. - RTGS” and for NEFT draw cheque favouring “Bharati Sahakari Bank Ltd.- NEFT”)

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| **Beneficiary Details** | |
| Beneficiary Name |  |
| Beneficiary Account Number |  |
| Beneficiary Address |  |
| Beneficiary Bank Name & Branch |  |
| Beneficiary Bank IFS Code | Account Type : Resident □ |
| Amount (in figures) to be credited | R**s.** |
| Amount (in Words) to be credited |  |

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| **Remitter Details** | |
| Remitter (Applicant) Name | **B. V. D. U. Medical College, Pune** |
| Remitter Account Number (15 digits) | **005002300005656** |
| Remitter PAN | **AAATB 1836D** |
| Mobile/ Phone Number of Remitter (Mandatory) |  |
| Remarks/ Purpose | **MBBS – Admission Cancel Fee Refund-2025-26** |

**Terms & Conditions**

1. I / We hereby authorize Bharati Sahakari Bank Ltd., to carry out the RTGS / NEFT transaction as per details mentioned above.
2. I / We hereby agree that the aforesaid details including the IFS code and the beneficiary account are correct.
3. I / We further acknowledge that Bharati Sahakari Bank accepts no liability for any consequences arising out of erroneous details provided by me/ us.
4. I / We agree that the credit will be affected solely on the beneficiary account number information, beneficiary name particulars will not be used for the same.
5. I / We authorize the bank to debit my/ our account with remittance amount plus charges plus taxes as applicable for this transaction.
6. I / We agree that requests submitted after the cut off time will be sent in next batch or next working day as applicable.
7. I / We hereby agree & understand that the RTGS/ NEFT request is subject to the RBI regulations and guidelines governing the same and also the policy of the Bank.
8. I / We also understand that the remitting Bank shall not be liable for any loss of damage arising or resulting from delay in transmission delivery or non-delivery of Electronic message or any mistake, omission or error in transmission or delivery thereof or in deciphering the message from any cause whatsoever or from its misinterpretation received or the action of the destination Bank or any act or link down at any point or even beyond control.
9. I/ We agree that once the request is initiated by the branch cannot be stopped by me/ us.
10. In case RTGS and NEFT option is not ticked by me/us, I/We authorize you to execute the transaction **equal or more than Rupees Two Lakh through RTGS** and debit the charges as applicable.

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| **Signature of Authorized Signator**y | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1st Signatory | | 2nd Signatory | | 3rd Signatory | |
| *Please affix stamp wherever applicable* | | | | | |
| **Branch Use Only** | | | | | | |
| KYC complied - Yes No | | | | | | **Branch Stamp & Date** |
| Transaction Entered by | | Employee Code | | Signature | |