

## **Application for Balance Certificate**

				Date:/
Branch:				
Dear Sir/Madam,				
· · · · · · · · · · · · · · · · · · ·		ssue a Balance Confirme following information		f my/our account maintained at
Account Number				
Account Name				
Full Address				
Equivalent Foreign Currency				
Purpose of Balance Certificate				
per the Bank's St	andard Tariff	•	reby request you to	ve for the necessary charges as provide Balance Confirmation
Signature (s) Stamp if applicable			Specimen Signature of A/c Holder's Agent Name:	
I have received the	e Balance Cor	nfirmation Certificate a	s requested above.	
	•••••			
Receiver's Signat	ture			
		For Bank's u	ise only	
Applicable Charge	e amount:		Tran ID:	
Applied Forex Rate:			Date:	/
Certificate Issued By:		Certificate Verified By:		