

MICR code 99490300

TRANSACTION DETAILS

Sasfin FX Trade ID	<input type="text"/>	Value date	<input type="text"/>
Currency code	<input type="text"/>	CCY Amount	<input type="text"/>
		ZAR Amount	<input type="text"/>

BENEFICIARY DETAILS (party receiving the funds)

Sasfin account no.

Full name and surname of individual / entity

Contact name (if an entity)

Telephone no (including dialling code)

E-mail address

Physical / Business address (not PO Box) City

Country Postal code

RSA resident Yes No **If 'No':** Non-res STA Emigrant

Entity registration no. / Individual ID no. / Passport no.

Temporary resident permit no.

Tax no. VAT no.

REMITTER DETAILS

(details of offshore party sending the funds to South Africa)

Bank name SWIFT address

Full name and surname of individual / entity

Physical / Business address (not PO Box)

City Postal code

RSA resident Yes No **If 'No':** Country

Country code

RESERVE BANK REPORTING

(Refer to SARB Category Codes: www.sasfinforex.co.za/SARBCodes/BOPInwardcodes.html)

CCN no. BoP Category Code * Sub Category *

For Exports (Code 101; 103) please supply UCR numbers:

UCR

SARB Reference Number (incl. Loan) Dated

* mandatory field

DECLARATION

I/We declare that I/we have read this document and know and understand the contents thereof; I/we declare that the information in this form is true, complete and correct. I/We hereby agree and acknowledge that SASFIN BANK will not be liable for any errors, omissions or delays in transmitting any funds which may arise as a result of SASFIN BANK actin on the information contained in this form or as a result of incorrect information having been provided to SASFIN BANK by me/us or our agent or as a result of circumstances beyond the control of SASFIN BANK. I/We acknowledge that SASFIN BANK will use the information contained in this form to report the outflow of funds to the SARB and accordingly. I/we indemnify SASFIN BANK against any claims, penalties and/or fees which SASFIN BANK might incur as a result of the information contained in this form being incorrect.

I/We hereby acknowledge and agree that SASFIN BANK will sell the foreign currency at the exchange rate which is applicable at the time of trading unless I/we give instructions to SASFIN BANK otherwise. I/We indemnify SASFIN BANK and hold SASFIN BANK harmless against any costs, losses, claims, penalties and/or fees which I/we may incur as result of any exchange rate fluctuations.

I/we declare that the documentation presented in support of this application is in all respects authentic; that I/we have been informed of the limit applicable to the above transaction and confirm that this limit will not be exceeded as a result of this transaction; and I/we consent to this information being provided to the South African Revenue Service and/or the Financial Intelligence Centre and/or Financial Services Board.

As required by the Financial Surveillance Department of the South African Reserve Bank, purchases and settlers of foreign exchange must retain the documentary evidence relating to trade and other transaction for a period of five (5) years for inspection purposes.

Note: Applicant's signature must be in accordance with specimens and/or mandate held by the bank.

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For and behalf of (name of entity or individual and surname)

Signature / Authorised signatory (whom warrants that he/she is duly authorised)

