



"BULUS CENTER" (17th floor, west side), Plot-CWS(A)1, Road No-34  
 Gulshan Avenue, Gulshan, Dhaka-1212  
 Phone:(+880 2) 58810909 , 9558448

## FUND WITHDRAWAL APPLICATION FORM

Please fill in all necessary information carefully on your fund withdrawal request:

<b>Application Date</b>	
<b>Code Number</b>	
<b>Name of Account Holder (s)</b>	
<b>Contact No.</b>	
<b>Amount (Taka)</b>	
<b>Taka in Word</b>	

**Deceleration:** I/We do hereby declare that no purchase will be made against the amount requested for withdrawal as well as the proportionate loan amount.

Please fill in all necessary information carefully if you want to receive the above amount through BEFTN:

**Bank A/c No.:**

**Bank Name:**

**Branch Name:**

**A/C Type:**Savings/Current/ SND/

**Routing No.:**

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Signature of the Account Holder(s)

### AUTHORIZATION FOR CHEQUE COLLECTION

I/We hereby authorize Mr./Ms.....

to collect a cheque of Tk.=.....(In word).....

on my/our favor. Signature of the authorized person is attested below:

Specimen signature of Mr./Ms..... Signature.....

Attested (A/c Holder) Mr./Mrs..... Signature.....

**Office Use Only:**

Trader	Prepared By	Checked By	Approved By	
Dealer	Accounts	Finance	COO	CEO