

To :

**BANK OF INDIA**  
**NEW YORK BRANCH**

**ADDITIONAL INFORMATION FOR REMITTANCES AS REQUIRED UNDER  
BANKER'S SECRECY ACT REGULATIONS**

1) Name .....  
(Last) (First) (Middle initial)

2) Address .....  
.....  
.....  
Phone(work) (Residence)

3) Social Security number .....  
**or**  
Tax ID No. for Corporate Customer : .....

4) Bank account no. ....  
Bank and Branch .....

5) Source of Funds : .....

6) Purpose of Remittance : .....

7) Details of Identification (one of the two) PLEASE ATTACH A PHOTOCOPY.

Driving License Passport

- a) Number
- b) Date of issue
- c) Date of expiry
- d) Place of issue
- e) Issuing Authority

8) Details of Payee  
Name .....  
Address .....  
.....  
.....  
Bank account no. Bank Branch

SIGNATURE OF THE APPLICANT

Instructions received for remittances without the above form duly filled in and signed will NOT be accepted and the amount will be returned back after deducting our charges for the return of the payment.