

FOREIGN EXCHANGE FORM FOR INWARD PAYMENTS

Bank and Payment Details

Name of Branch _____ Submitted Date _____

Account Number _____

Payment By

TT – Cross border payment Cash passport Foreign notes Bank draft Money Transfer Platform

Customer Details (Recipient)

Full Name _____

Address _____

Telephone Number _____ Email Address _____

Date of Birth _____ Identity1 _____

Gender _____ Residential Status Resident Non-resident

Malawian citizens to produce National Identification card

Sender

First name* _____

Address _____

Monetary Details

Currency Code _____ Foreign Value _____

MKW Equivalent _____ Remitting Country _____

Transaction Description _____

Customs Details

TPIN _____ VAT Number _____

Invoice Number _____ Form 12 Number _____

Transaction Codes

Industrial Sector _____ Institutional Sector _____

Foreign Exchange Form for Inward Payments

Customer Declarations

I/we, the undersigned, hereby declare that:

- have read this document and know and understand the contents thereof;
- the information furnished above is in all respects both true and correct;
- the currency applied for will only be used for the specific purpose stated herein;
- the documentation presented in support of this application is in all respects authentic;
- have been informed of the limit applicable to the above transaction and confirm that this limit will not be exceeded as a result of the conclusion of this transaction; and

I/we consent that this information can also be provided to the Malawi Revenue Authority, the Financial Intelligence Authority and other regulatory agencies.

Signed At _____

Date _____

Customer Signature _____

For Bank Use Only

Transaction BOP Code _____ Description of BOP _____

Code _____

Processed By: _____ Signature: _____

Checked By: _____ Signature: _____

Authorised By: _____ Signature: _____