

To,
Date

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 Branch Head

 Branch

Axis Bank Limited

Customer and Instrument Details

Customer Name

Account Number

(in which proceeds are to be credited)
Name, Address & Country of

Remitter/Payer

Currency / Amount

Cheque Details
No: _____ **Date:** _____

Purpose of Remittance

Please send the instrument for collection for **Direct Collection** as per the extant guidelines of your bank. I/We confirm that the details of the Scheme, including the charges and indicative time for credit in the account, have been explained to me.

I/We agree that the arrangement will be subject to the following terms and conditions:

- The instrument is to be lodged for Direct Collection under which Instruments are directly sent to the Drawee Bank for Collection
- Based on the above information, I understand and undertake the following responsibilities:
 - Minimum amount of the instrument collected under the scheme is of at least 200 units of the instrument currency.
 - All charges in addition to Axis Bank charges are to be borne by the beneficiary and are to be adjusted from the beneficiary's realized amount
 - Axis Bank will not be responsible for the delay in receiving Nostro credit by the Drawee Bank
 - Acceptance of the Instrument is subject to its return in 15 days, if the Drawee Bank does not have centralized collection hub where such instruments are to be send for collection.
- The Bank nor its Correspondent Bank/Agent(s) will be responsible for any loss or damage due to the loss or miscarriage of the cheques/drafts or for any delay in collection, transmission or otherwise of any remittance howsoever caused
- I/We understand that for the cheques sent for Direct Collection to the drawee bank, Axis Bank nor its agents cannot confirm, predict, limit or in any way influence the charges debited by the drawee bank and/or time taken for collection of the instrument

 Signature of Customer/Power of Attorney holder

For Branch Use Only

Rate: _____ Margin: _____ Branch to report to Treasury: Y / N

Fwd Contract No: _____ Fwd Contract Rate: _____

 Signature of Authorized Signatory

Acknowledgment To Customer

Received Cheque/DD No. dated for amount of drawn on
 from under Direct Collection

Date: _____ Seal: _____

 Signature of Authorized Signatory