



MAB

MT940 Application Form

Date:        /        /

All information is required unless stated.

A/C Holder Information

|               |  |
|---------------|--|
| A/C Name :    |  |
| A/C Address : |  |

Account Numbers & Currencies

|              |  |            |                                                                                                                     |
|--------------|--|------------|---------------------------------------------------------------------------------------------------------------------|
| Account No.1 |  | Currency : | <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/> SGD <input type="checkbox"/> MMK |
| Account No.2 |  | Currency : | <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/> SGD <input type="checkbox"/> MMK |
| Account No.3 |  | Currency : | <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/> SGD <input type="checkbox"/> MMK |
| Account No.4 |  | Currency : | <input type="checkbox"/> USD <input type="checkbox"/> EUR <input type="checkbox"/> SGD <input type="checkbox"/> MMK |

Sending Bank

|        |  |             |  |
|--------|--|-------------|--|
| Name : |  | SWIFT BIC : |  |
|--------|--|-------------|--|

Receiving

|                                                                                                            |          |             |          |
|------------------------------------------------------------------------------------------------------------|----------|-------------|----------|
| Name :                                                                                                     |          | SWIFT BIC : |          |
| <input type="checkbox"/> Frequency <input type="checkbox"/> Daily <input type="checkbox"/> Transaction Day |          |             |          |
| Start Date :                                                                                               | /      / | End Date :  | /      / |
| <input type="checkbox"/> One-month prior notice to stop this Service                                       |          |             |          |

I/We agree that monthly charge of \_\_\_\_\_ per FCY A/C , \_\_\_\_\_ per LCY A/C and Initial set-up fee (one time) of \_\_\_\_\_ for this Service.

|                                                                              |          |               |              |
|------------------------------------------------------------------------------|----------|---------------|--------------|
| Authorized person's contact details for MT940 communications with the banks. |          |               |              |
| Name                                                                         | Position | Email Address | Phone Number |
|                                                                              |          |               |              |
|                                                                              |          |               |              |

We hereby authorize MAB to debit the above mentioned        A/C ☐ No: respectively (or) ☐ A/C Number \_\_\_\_\_ for related fees per month for using this service without prior consent.

By signing below,I/we hereby acknowledge that the information provided herein is accurate, correct and complete,and shall be deemed to have accepted the Bank's terms and conditions.

Account Signatory(s)

|           |           |               |
|-----------|-----------|---------------|
| Name :    | Name :    | Company Stamp |
|           |           |               |
| Signature | Signature |               |

|                                                  |  |           |             |
|--------------------------------------------------|--|-----------|-------------|
| ဘဏ်အတွင်းအသုံးပြုရန် အတွက်သာ / For BANK USE ONLY |  |           |             |
|                                                  |  | Signature | Verified By |
|                                                  |  |           |             |