



# OUTWARD/CROSS BORDER/INTERNATIONAL PAYMENT REQUEST

**NEDBANK**

For any assistance please call the Nedbank Contact Centre on 0860 797 797

## MY (SENDER) DETAILS

### Contact information

Date of application (ddmmyyyy)

20

<input type="checkbox"/> Entity	Entity name																	
	Trading name																	
	Company registration number											VAT number						

<input type="checkbox"/> Individual	First name																
	Surname																

	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of birth (ddmmyyyy)												
	ID/Temporary permit /Passport number											Tax number				

	Country where passport was issued																
--	-----------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Complete for both entity and individual		Is the postal the same as the physical address?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Residential status	<input type="checkbox"/> Resident	<input type="checkbox"/> Non-resident
---	--	---	------------------------------	-----------------------------	--------------------	-----------------------------------	---------------------------------------

Physical address line 1																
Physical address line 2																
Physical address line 3																

Suburb											City						
Province											Post code						
Country																	

Postal address line																	
Suburb											City						
Province											Post code						
Country																	

Sender's contact person	First name																	
	Surname											Contact number						

Email address																
---------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Are you/Is the entity the account holder?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	if 'NO', complete <b>Appendix A.</b>	Is it a joint account?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If more than one account must be debited for settlement of the payment, complete <b>Appendix C.</b>
---	------------------------------	-----------------------------	--------------------------------------	------------------------	------------------------------	-----------------------------	---

Nedbank account name											Nedbank account no						
----------------------	--	--	--	--	--	--	--	--	--	--	--------------------	--	--	--	--	--	--

Are you an international head-quartered company (IHC)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	if 'YES', complete <b>Appendix A.</b>	Is there a third party involved?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	if 'YES', complete <b>Appendix B.</b>
--	------------------------------	-----------------------------	---------------------------------------	----------------------------------	------------------------------	-----------------------------	---------------------------------------

<b>Payment information</b>	<input type="checkbox"/> Obtain forward exchange contract (FEC) rate on my behalf	<input type="checkbox"/> Contact me before converting	FEC number													
----------------------------	---	---	------------	--	--	--	--	--	--	--	--	--	--	--	--	--

Currency			Country of origin (country from which goods and services originate)													
----------	--	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--

Rand amount											OR Foreign amount						
-------------	--	--	--	--	--	--	--	--	--	--	-------------------	--	--	--	--	--	--

Amount in words																
-----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(if the foreign currency equivalent of a rand amount is to be paid, provide the rand amount and also clearly indicate the foreign currency to be used for the payment.)

South African Reserve Bank (SARB) authority number (if applicable)											Date authority granted (ddmmyyyy)						
--	--	--	--	--	--	--	--	--	--	--	-----------------------------------	--	--	--	--	--	--

Name of bank where authority is held																
--------------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Payment value date (ddmmyyyy)

20

## 32A BENEFICIARY (RECEIVER) DETAILS

59 <input type="checkbox"/> Entity	Entity name																
<input type="checkbox"/> Individual	First name																
	Surname											Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female			

Physical address line 1																
Physical address line 2																
Physical address line 3																

Suburb											City						
Province											Post code						
Country																	

Account number/International bank account number (IBAN)											(continued on next page)	Initial here						
---	--	--	--	--	--	--	--	--	--	--	--------------------------	--------------	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Beneficiary bank

57 Name of bank

Name of branch

Physical address

Country

Clearing code type

Clearing code

SWIFT address

56A Intermediary/Correspondent bank of the beneficiary (optional - for routing payment to beneficiary bank)  Yes  No

Name of bank

Name of branch

Physical address

Country

Clearing code type

Clearing code

SWIFT address

70 Full reason for payment

71  All local and overseas charges to be borne by beneficiary (BEN)  All local and overseas charges to be borne by remitter (OUR)  Local charges borne by remitter and overseas charges by beneficiary (SHA)

Please complete the account to be debited details if 'OUR' or 'SHA' is applicable Account to be debited

72 Bank-to-bank information (BANK USE ONLY)

**BALANCE OF PAYMENT (BoP) REPORTING CATEGORIES – OUTWARD PAYMENTS NOTES:**

- Specify the relevant BoP categories and additional mandatory information for this transaction
- For outward BoP category codes contact your nearest forex branch or transactional manager or go to: [https://www.nedbank.co.za/content/dam/nedbank/Forms/Application%20Forms/Personal/Forex/BOP\\_Category\\_Guide.pdf](https://www.nedbank.co.za/content/dam/nedbank/Forms/Application%20Forms/Personal/Forex/BOP_Category_Guide.pdf).

BoP category code	Amount	Client customer number (CCN) <small>(mandatory for BoP categories 100, 101, 102, 103, 104, 105, 106, 109)</small>	INV/Movement reference number (MRN) <small>(mandatory for BoP categories 101, 103, 105, 106)</small>	Transport document number <small>(mandatory for BoP category 103)</small>	Vessel name <small>(mandatory for BoP category 103)</small>	Loan reference number <small>(mandatory for BoP categories 309 (4-7) 106, 801, 802, 803, 804)</small>	Original reference number <small>(mandatory for BoP categories 100, 200, 300, 400, 500, 600, 700, 800)</small>

Import permit declaration if 'YES', complete this section with the import permit details

Is import permit required?  Yes  No I/We confirm that I/we hold import permit number

dated (ddmmyyyy) expiring on (ddmmyyyy)

**ACKNOWLEDGEMENT AND INDEMNITY:** I/We acknowledge the following:

- The SARB authorities require that the Sender and the accountholder (if they are separate persons/entities) keeps the related documentary evidence of this transaction available for inspection for a period of 5 (five) years.
- Any quotation, indication, communication or notification in any form by Nedbank of the exchanges rate is merely indicative of such rate at that point in time and is subject to change without notice and shall not be binding on Nedbank, unless confirmed by Nedbank in writing. I/We acknowledge and agree further that delays may be experienced due to SARB procedures and Nedbank shall not be liable for losses occasioned by any delays arising therefrom.
- Nedbank shall not be liable in any way whatsoever for errors or delays in transmission, non-arrival as a result of telecommunication errors, misinterpretation on receipt of instructions and/or failure to identify the stated beneficiary. Nedbank shall not be liable for any loss or damage from whatever cause arising from the aforesaid.
- I/We acknowledge that there may be delays in the processing of my/our payment instructions from time to time due to currency holidays or any settlement procedures and accordingly I/We hereby indemnify Nedbank against and hold it harmless from any claim, liability, losses or damages of whatsoever nature that I/We may incur, whether directly or indirectly and howsoever arising, as a consequence of such delays.
- Certain payments may, through the operation of:
  - International law;
  - the laws and regulations of other jurisdictions, and/or
  - International or governmental practice, whether or not having the force of law, be prohibited, confiscated, embargoed, withheld or otherwise prevented from being made before such payments have reached the intended recipient(s). Nedbank undertakes to notify me/us if any payment is so prohibited, confiscated, embargoed, withheld or otherwise prevented from being made as soon as Nedbank becomes aware thereof.
- Nedbank shall utilise any information that it may receive in relation to this transaction (which may not be limited to information appearing herein), and shall utilise any mechanism that it deems appropriate in order to satisfy applicable international legal requirements.
- Accordingly, I/We indemnify Nedbank against and hold it harmless from any loss of damage whatsoever that I/we may suffer or incur, directly or indirectly as a consequence of any of the aforesaid.

**DECLARATION:** I/We hereby declare that:

- the information furnished above is true and correct in all respects;
- the currency applied for will be used only for the specific purpose stated;
- any documentation required in terms of the SARB Currency and Exchanges Manual for Authorised Dealers and presented in support of this transaction is authentic in all respects;
- the conclusion of this transaction in itself or in conjunction with such other transactions of this type will not result in the overall limit imposed by the SARB rulings and Regulations being exceeded;
- I/We am/are aware that the information relating to this transaction will be furnished to SARB, the South African Revenue Service, the Financial Intelligence Centre and the Financial Sector Conduct Authority, and
- the content hereof is known and understood by me/us.

Signed at (place) on (ddmmyyyy)

Authorised signature of sender

For and behalf of (full company name)

**BANK USE ONLY – FOR USE BY THE AUTHORISED DEALER (AD)**

Exchange provided in terms of section of the SARS Currency and Exchanges Manual for Authorised Dealers

AD internal authorisation

OR SARB authority number

Date of SARB reply (ddmmyyyy)

Submitted by

Date of authorisation (ddmmyyyy)

Date and bank stamp of authorised dealer

**APPENDIX A: ACCOUNTHOLDER AUTHORISATION** - Please complete this section if you are not the accountholder and/or you are an IHC

<input type="checkbox"/> Entity	Entity name																
	Trading name																
<input type="checkbox"/> Individual	IHQ number					Company registration number											
	VAT number (mandatory for imports)					Tax number (mandatory for imports)											
<input type="checkbox"/> Individual	First name																
	Surname																
<input type="checkbox"/> Male <input type="checkbox"/> Female	Gender					Date of birth (ddmmyyyy)					Tax no						
	ID/Temporary permit /Passport number					Country where passport was issued											
Complete for both entity and individual		Is the postal the same as the physical address?				<input type="checkbox"/> Yes <input type="checkbox"/> No	Residential status				<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident						
Physical address line 1																	
Physical address line 2																	
Suburb						City											
Province						Post code											
Country																	
Postal address line																	
Suburb						City											
Province						Post code											
Country																	

**APPENDIX B: THIRD PARTY AUTHORISATION** - Please complete this section if a third party is involved.

<input type="checkbox"/> Entity	Entity name																
	Trading name																
<input type="checkbox"/> Individual	Company registration number					VAT number (mandatory for imports)					Tax number (mandatory for imports)						
	First name																
<input type="checkbox"/> Male <input type="checkbox"/> Female	Gender					Date of birth (ddmmyyyy)					Tax no						
	ID/Temporary permit /Passport number					Country where passport was issued											
Complete for both entity and individual		Is the postal the same as the physical address?				<input type="checkbox"/> Yes <input type="checkbox"/> No	Residential status				<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident						
Physical address line 1																	
Physical address line 2																	
Suburb						City											
Province						Post code											
Country																	
Postal address line																	
Suburb						City											
Province						Post code											
Country																	
Signed at (place)						on (ddmmyyyy)					<b>2 0</b>						
Authorised signature of accountholder						Authorised signature of accountholder											
For and behalf of (full company name)																	

**APPENDIX C: MULTI-FUNDING** - Complete this section if more than one account must be debited for settlement of the payment: Savings (SA), current CA), Client Foreign Currency (CFC), cheque (CH), General Ledger (GL)  Obtain FEC rate on my behalf  Contact me before converting

Type of account	Account number	Currency	Amount	Existing FEC number booked