



Habib Bank AG Zurich

Date [] [] []
day month year

The Manager,
Branch,
United Arab Emirates.

CUSTOMER REFERENCE

Customer account number [02] - []
Account title []

Dear Sir/Madam,

I/We hereby request you to kindly process the following cheque(s) and credit the net proceeds of the same to my/our Account number specified above.

Table with 6 columns: CHEQUE DATE, CHEQUE NUMBER, CURRENCY, AMOUNT, DRAWN ON BANK, DRAWN IN COUNTRY. Includes sub-headers for day, month, year, and Bank's name.

I/We understand that these cheques are drawn on banks located outside UAE and will be processed under the local rules of the jurisdiction where the drawee bank is located. I/We also understand that in some jurisdiction banks reserve the right to return cheques after as much as seven weeks/three years from the date of credit if it is found to be fraudulently altered, a counterfeit instrument, bears an unauthorized signature, or improper/missing endorsement or any other reason or form of fraud is committed.

I/We hereby indemnify Habib Bank AG Zurich, UAE and will hold you harmless against any claim(s) made by me/us arising from the processing of the above mentioned if the cheque(s) is returned unpaid due to the reasons mentioned above. I/We also authorize you to debit my/our account with the equivalent amount of the cheque(s) that is returned unpaid.

Yours faithfully.

authorized signatory(s)
Place city & country
Date [] [] []
day month year

FOR OFFICE USE
SV
signature
Verified by []

NOTE:
- In the case of multiple signatories, authorized signatories must sign as per the account mandate.
- The customer agrees to abide by all the above Terms & Conditions, which are subject to change without any prior notice.