



Payment Order Request Form

The ordering customer is the person sending the wire.

BOSVG
Doing more Together

PAYMENT ORDER REQUEST FORM

(PLEASE BE COMPLETE IN BLOCK LETTERS & WHERE REQUIRED, PLACE A CHECK MARK (✓) IN THE BOXES TO INDICATE YOUR SELECTIONS)

RECEIVED AT: BRANCH	<input checked="" type="checkbox"/> R'GTE <input type="checkbox"/> G'TWN <input type="checkbox"/> B'FRD <input type="checkbox"/> CAN <input type="checkbox"/> BEQ <input type="checkbox"/> UNION <input type="checkbox"/> BALLIE	DATE (DD/MM/YY)
TRANSACTION REQUESTED	<input type="checkbox"/> WIRE TRANSFER <input type="checkbox"/> DRAFT <input type="checkbox"/> INTER-BANK SETTLEMENT <input type="checkbox"/> MANAGER'S CHEQUE	
50. ORDERING CUSTOMER'S INFORMATION		
<small>BOSVG customers: Use line 1 if both ordering amount & fees are to be debited from the same account. Use line 1 if ordering amount is to be debited from one account & use line 2 if fees are to be debited from a separate account.</small>		
CUSTOMER'S ACCOUNT #:	_____	
CUSTOMER'S NAME:	_____	
CUSTOMER'S STREET ADDRESS:	_____	
CUSTOMER'S CITY/TOWN/VILLAGE:	_____	
CUSTOMER'S COUNTRY:	_____	
CUSTOMER'S CONTACT #	_____	

→ Today's date

→ Your account #

→ Your full name

} Your address
(Street, village, country)

} Your telephone
number

→ The recipient's currency must be used

PAYMENT INFORMATION	ORDERING AMOUNT (<i>figures</i>)	ORDERING CURRENCY
	(<i>words</i>)	
METHOD OF PAYMENT	<input type="checkbox"/> CHEQUE <input checked="" type="checkbox"/> DEBIT MY ACCOUNT <input type="checkbox"/> CASH	
CHARGES TRANSACTION	<input type="checkbox"/> BEN (All transaction costs are borne by the beneficiary) <input checked="" type="checkbox"/> SHA (The transaction costs are shared)	
	<input type="checkbox"/> OUR (All transaction costs are borne by the ordering customer)	

→ Identify the amount to be sent. This must be written in both figures and words. Consider the wire transfer fee when entering the amount

Must always be Debit my account

→ The default option is SHA



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The Beneficiary bank is the bank that holds the account of the person receiving the money.

57. BENEFICIARY BANK INFORMATION	Please complete only if a wire transfer or interbank settlement is requested. BIC/ ABA/ IBAN/ Transit Number is required only for wire transfers.
BIC/ ABA / IBAN/ TRANSIT NUMBER	<input type="text"/>
BANK'S NAME:	<input type="text"/>
BANK'S STREET ADDRESS:	<input type="text"/>
BANK'S CITY:	<input type="text"/>
BANK'S COUNTRY:	<input type="text"/>

- Codes that identifies a specific bank
- The bank's name
- The bank's address (street, city, country)

This is the information of the person receiving the money.

59. BENEFICIARY CUSTOMER INFORMATION	This section is compulsory for all requests. Customer's Account # is required for wire transfers & interbank settlements.
CUSTOMER'S ACCOUNT #:	<input type="text"/>
CUSTOMER'S NAME:	<input type="text"/>
CUSTOMER'S STREET ADDRESS:	<input type="text"/>
CUSTOMER'S CITY/TOWN/VILLAGE:	<input type="text"/>
CUSTOMER'S COUNTRY:	<input type="text"/>

- Receiving customer's account number
- Receiving customer's name
- Receiving customer's address (street, city, country)

Concisely state the purpose for sending the money. The purpose stated would determine the supporting document required.

70. REMITTANCE INFORMATION/PURPOSE	<input type="text"/>
This section is compulsory for all requests. Please ensure that the information/purpose provided here is explicit but concise.	<input type="text"/>

For example: Payment for items-you must present the invoice from merchant



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An intermediary bank is one that acts as a middle man for the sending and receiving bank. This section is left blank unless your transaction requires it

56. INTERMEDIARY BANK INFORMATION	Please complete only if applicable to your wire transfer.
BIC/ ABA / IBAN/ TRANSIT NUMBER	<input type="text"/>
BANK'S NAME:	<input type="text"/>
BANK'S CITY:	<input type="text"/>

- Codes that identifies a specific bank
- The bank's name
- The bank's city

Kindly debit the above-mentioned account number(s) for any amount(s) transferred, plus charges. It is understood that where a message will be sent by cipher or otherwise, it is at my/our risk in every respect and that neither Bank of Saint Vincent and the Grenadines Limited nor your correspondents will be liable for the consequences of any delay, mistake or omission in transmission or payment or any interception of the said message.

PASSPORT NATIONAL ID DRIVER'S LICENCE

CUSTOMER (1) SIGNATURE

CUSTOMER (2) SIGNATURE

CUSTOMER ID TYPE & NUMBER

↑
Sign here

↑
You must present a valid form of ID