

FUND WITHDRAWAL REQUEST FORM

Client Code:

Date:

Name of the Account Holder(s):

Request For (In Figure):

BDT.

(In Word): Taka

Please fill up the following information:

For **BEFTN:**

(Please mention
Only your Bank
A/C information
which exists in
your **BO A/C** at
BEIL)

Bank Name:	
Bank Account No.:	
Bank Branch:	
Bank Routing No.:	
Client Mobile No.:	

Signature of the First Account Holder

Signature of the Joint Account Holder

OFFICE USE ONLY:

Signature Verified by	Approved by	
	Manager:	Head of Operations:

BRAC EPL Investments Limited

Cash Withdrawal Form

Customer Copy

Account Number: _____

Client Name : _____

Received On : _____

Collected On : _____

Authorized Signature & Seal: