

Withdrawal Request Form

CUSTOMER ACCOUNT INFORMATION			
Name:	VMBS Account No.:		
Telephone Number:	Email Address:		
Address:			
WITHDRAWAL INSTRUCTIONS Withdraw	Close Account		
Please withdraw the amount of \Box JMD \Box £ GBP			
Amount in figures:			
Amount in words:			
Purpose:			
PAYMENT INSTRUCTIONS 1 (BENEFICIARY INFORMAT	ION)		
□ RTGS (JA\$ to Jamaican Bank)	Wire Transfer FX Currency to Jamaican Bank		
Direct to UK Bank	Wire Transfer to Overseas Bank		
Beneficiary Name:	Beneficiary Account No.:		
Beneficiary Address:			
Bank Name:			
Bank Address:			
Sort Code/ Swift Code/Routing Number/ Transit No.:			
INTERMEDIARY BANK INFORMATION (where applicable)			
Bank Name:			
Bank Address:			
Sort Code/ Swift Code/Routing Number/ Transit No.:			
Additional Instructions:			
PAYMENT INSTRUCTIONS 2 (VMBS ACCOUNT INFORMATION)			
□ Transfer to VMBS Account □ JMD Cheque	CAD Cheque		
□ GBP Cheque □ USD Cheque	e 🛛 Pay to Bearer		
Please transfer the amount stated above to VMBS account number			
Please open a NEW □ JMD □ GBP □ USD □	□ CAD account in the following names:		
	· · · · · · · · · · · · · · · · · · ·		
Make cross cheque payable to			
	Send via courier at my expense		
VMBS Branch/Recipient Name & Address			
Please pay cash amount stated above to			



FEE INSTRUCTIONS (where appl	icable)			
□ I/We authorize you to debit my/c	our account number		to cover the total cost.	
\square I/We attach cheque/withdrawal v	oucher to cover the total cost.			
$^{\square}$ I/We authorize you to deduct the	e applicable fees from the amount re	quested be	efore completing the payment.	
CUSTOMER APPROVAL				
Copy of identification certified b	y a Notary Public/ VM Representativ	ve is enclos	sed.	
 I/We understand that: a) any cheque that is not collected within one calendar month will be cancelled and the amount credited to my account; b) my account will be debited with any processing and handling charges associated with my request from my account number above; c) the effective date of the transaction and the foreign exchange rate used (where applicable) will depend on when this form is received by VMBS in Jamaica and the nature of the request. I/We acknowledge that wire transfers are subject to cross border regulatory requirements and may be subject to international sanctions and/or require the provision of additional information to meet regulatory requirements to complete the transaction. I/We acknowledge that the funds may be retained or returned and may be subjected to fluctuations risks which is beyond the control of the Society. I/We further acknowledge that the wire transfer transaction will be conducted through correspondent bankers and agents and therefore the Society will not be responsible whatsoever or the transmission of the instructions by the correspondent bankers and agents. 				
Customer's Signature(s):	Identification type & Number(s):	Signatur Public:	e, stamp or seal of VMBS Rep/Notary	
1)				
2)				
FOR INTERNAL BANK USE ONLY CIF No(s).:			.:	
Account Type: 🛛 Savings	□ Time	Account	Status:	
Account Mandate:	Maturity Details:	·	Collateral/ Hold/ Cautions:	
Processing Fee (To be completed by t VMBS Schedule of Fees & Charges	he Processor):	ID Valida	ated (State expiry date):	
Cheque Number:	Cheque received by:		Date Cheque received:	
Approved by:		Date Ap	proved:	

COMPLETING THE FORM.

Name

Address

Account Number

Telephone Number

Email Address

Withdrawal Instructions

Purpose

Payment Instructions 1 (Beneficiary Information)

Intermediary Bank Information

Payment Instructions 2 (VMBS Account Information)

Valid Identification

Signature/Mark

Signature, Stamp or Seal of VMBS Rep or Notary Public

The date on which the form is being completed.

The name of the account holder completing the form.

The current residential address of the account holder completing the form.

The account number from which the transaction should be processed.

The current preferred telephone number of the account holder completing the form.

The current email address of the account holder completing the form

Tick the appropriate box to indicate if the request is for a withdrawal or the closure of the account, then check the relevant box to indicate the required currency. Write the amount to be withdrawn in words and numbers in the spaces provided.

The account holder must note the reason for the withdrawal/funds/wire transfer in the space provided.

Tick the appropriate box and complete required details in the spaces provided.

Direct to UK Bank Account - provide the details of the UK bank account to which withdrawal should be sent and enter the Sort Code in the space provided or

RTGS - JA\$ to Jamaican Bank - Provide the details of the Jamaican bank account to which Jamaican dollar withdrawal should be sent and enter the Swift Code in the space provided (Where funds are being sent to BNS or First Global Bank enter the Swift Code and the Transit Number) or

Wire Transfer FX Currency to Jamaican Bank - Provide the details of the Jamaican bank account to which the foreign currency withdrawal should be sent and enter the Swift Code in the space provided. (Where funds are being wired to BNS or First Global Bank enter the Swift Code and the Transit #) or

Wire Transfer - provide the details of the overseas bank account to which foreign currency withdrawal should be sent and enter the Swift Code. (Where the bank does not have a Swift Code enter the Routing number).

Additional Information - Indicate any additional information including Intermediary Bank information.

Intermediary Bank details are required for transfers involving different countries, currencies, or banks without a direct relationship.

Tick the appropriate box and complete required details in the spaces provided.

Transfer to VMBS Account - indicate the VMBS account number to which the withdrawal amount should be transferred and record the name of the account holder or

Transfer to New Account - indicate the currency and the name(s) of the account holder(s) in which the new account should be opened or

Make Crossed Cheque Payable to - record the name of the payee and tick the appropriate box to indicate how cheque is to be collected or

VMBS Branch/Recipient Name and Address - Enter the name of the VMBS Branch at which the cheque is to be collected / enter the name and address of the person who is to collect the cheque or

Pay to Bearer - indicate the name of the Bearer to whom cash is to be paid.

A certified copy of your valid passport/driver's license/state identification card/citizenship card must be sent along with the complete Withdrawal Request Form.

The account holder(s) must a sign their signature(s) or Mark to the Withdrawal Request Form in accordance with the Mandate of Payment on the account (Sole Owner, Any One or Survivor, Any Two or Survivor).

The signature(s) of the account holder(s) must be witnessed by either:

A Representative at a VMBS Overseas Representative Office

- A Solicitor/Attorney-at-Law
- A Notary Public
- A Bank Manager

Email: manager@myvmgroup.com | Telephone: 876 754 8627 | Fax: 876 929 5224 | Address: 73-75 Half Way Tree Road, Kingston 10



