सानिमा विकास बैंक लिमिटेड
SANIMA BIKAS BANK LIMITED
banking simplified
(Promoted by Non-Resident Nepalese)

INDEMNITY FOR INSTRUCTIONS RECEIVED BY FAX / Email

To Sanima Bikas Bank Limited
Naxal, Kathmandu, Nepal

I/We,_____ hereby instruct and authorize you to honor and act upon the instructions received by way of Fax Transmission / Scanned fax instruction through email purporting to be signed by me/We, in relation to the transfer of funds, and pay the said amounts to the specific payees detailed therein. My/ our instruction to pay to the payee will base upon the payees name, citizenship number/ passport number/ license number and payment code.

I/we hereby undertake to keep the Bank fully indemnified and free from all claims, damages, charges and expenses which the Bank may incur, directly or indirectly, by reason of complying with this request/instruction or any incorrect or improper fax-authorized/ email authorized transaction from me/us.

Bank is under no obligation to accept an Instruction and may, in its absolute discretion, accept and act on (or decline to accept and act on) any instruction. Without limiting the foregoing, bank may decline to accept and act on an Instruction if:

(a) It appears to the bank that it has not been received in full; or

(b) It is received on a day, or at a time, when the bank is closed

For the avoidance of doubt neither the Bank nor any of its officers or staffs shall be under any obligation to check the authenticity or bona fides of any instructions received by the Bank in accordance with this arrangement before or after acting in accordance with them.

I/We hereby confirm that the Bank can entertain requests received: (Please tick as appropriate)

a) Via any Fax number
b) via any Email address
c) Via the following Fax number(s) only:
d) Via the following email address(s) only:

1. …….
2. …….

1. ……
2. ……

This indemnity would be valid for all the accounts mentioned below:

Account number …….. Account number …….
Account number …….. Account number …….

I/We hereby request the Bank to call back the below mentioned individual/s in the contact number provided hereunder to confirm the validity of the instruction received by the bank for the transactions exceeding the threshold mentioned below:

Contact person(s) 1) …….. 2)…….
Contact number(s) 1) …….. 2)…….
(Landline) (Landline)
1)……. 2)…….
(Mobile no) (Mobile no)

Call back threshold: above NPR/USD……..
In words……

I/We shall agree to pay NPR 500 to instruct any transaction exceeding call back threshold limit.

Effective date of the indemnity: ……..
(dd/mm/yy)

This indemnity shall be governed by and constructed in all respects in accordance with Nepalese law and I/We hereby submit to the non-exclusive jurisdiction of the Nepalese Courts.

Customer's Authorized Signature: ……..
(Signatory's Name)