



## Withdrawal Authority Form

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**TO: THE MANAGER, INTERNAL PROCESSING CENTRE, 2-4 CONSTANT SPRING ROAD, KINGSTON 10**

Date:   
(dd/mm/yyyy)

### CUSTOMER INFORMATION

Surname:  First Name:  Date of Birth:   
(dd/mm/yyyy)

Email:  Telephone:

*Residential Address:*

Street 1:  Street 2:

City:  Post Code:

ID Type:  Passport  Photo Driver's License  Jamaican  British

Other  ID #:  Expiry Date:   
(dd/mm/yyyy)

### WITHDRAWAL INSTRUCTIONS

**Type of Withdrawal:**  Wire Transfer  Local Bank Transfer - Jamaica  Cheque (Individual)  Telex

3<sup>rd</sup> Party Transfer  Cheque (Entity)  JN Bank Account  Close Account

Branch:  Account Type:  Account Number:

This is my authority to withdraw from my JN Bank account and pay as follows:

(Amount in Words)

Pay in Currency:  JMD  USD  GBP  CDN Amount:

### CHEQUE DETAILS

#### 1. Pay Cheque To:

Amount:  Payee Name:

Currency:  JMD  USD  GBP  CDN Person collecting for Entity:

Telephone:  Withdrawal Reason:

#### 2. Pay Cheque To:

Amount:  Payee Name:

Currency:  JMD  USD  GBP  CDN Person collecting for Entity:

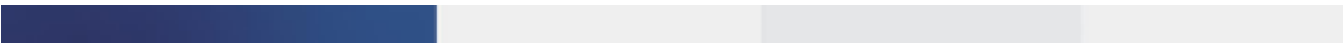
Telephone:  Withdrawal Reason:

#### 3. Pay Cheque To:

Amount:  Payee Name:

Currency:  JMD  USD  GBP  CDN Person collecting for Entity:

Telephone:  Withdrawal Reason:



**TELEX DETAILS**

**1. Telex**

Amount:  Bank:   
Branch:  Name on Account:   
Sort Code:  Account #:

**2. Telex**

Amount:  Bank:   
Branch:  Name on Account:   
Sort Code:  Account #:

**3. Telex**

Amount:  Bank:   
Branch:  Name on Account:   
Sort Code:  Account #:

**3<sup>rd</sup> PARTY TRANSFER**

**1. 3<sup>rd</sup> Party Transfer**

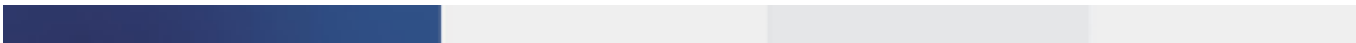
Amount:  Name of Bank:  Branch:   
Account Type:  Savings  Chequing Currency:  JMD  USD  GBP  CDN  
Account #:  Name on Account:   
*Branch Mailing Address:*  
Street 1:  Street 2:   
Swift / BIC / Routing #:

**2. 3<sup>rd</sup> Party Transfer**

Amount:  Name of Bank:  Branch:   
Account Type:  Savings  Chequing Currency:  JMD  USD  GBP  CDN  
Account #:  Name on Account:   
*Branch Mailing Address:*  
Street 1:  Street 2:   
Swift / BIC / Routing #:

**3. 3<sup>rd</sup> Party Transfer**

Amount:  Name of Bank:  Branch:   
Account Type:  Savings  Chequing Currency:  JMD  USD  GBP  CDN  
Account #:  Name on Account:   
*Branch Mailing Address:*  
Street 1:  Street 2:   
Swift / BIC / Routing #:



**JN BANK ACCOUNT**

**1. JN Bank Account**

Amount:  Branch:  Account Type:   
Name on Account:  Account #:

**2. JN Bank Account**

Amount:  Branch:  Account Type:   
Name on Account:  Account #:

**3. JN Bank Account**

Amount:  Branch:  Account Type:   
Name on Account:  Account #:

**CUSTOMER CONFIRMATION**

**Special Instructions:**

I/We declare that I/We have presented the documents to support this request and that I/We have read this authority and confirm that the information is correct. I/We agree to pay the service charge (s) for processing this transaction from the account that the withdrawal will be taken. I/We am/are aware that where the account balance is brought below the minimum required, monthly charges will apply.

Customer Signature:  Date:   
(dd/mm/yyyy)

**OFFICIAL USE ONLY**

Name JN-UK CSR:  Signature:  Date:   
(dd/mm/yyyy)  
Authorized Signature:  Stamp:

