


**ELECTRONIC FUND TRANSFER (EFT) DEBIT AUTHORIZATION FORM**

Favoring **BAY LEASING & INVESTMENT LIMITED**

**PART 1: TO BE FILLED BY THE ACCOUNT HOLDER(S)**

DEPOSIT ACCOUNT HOLDER'S DETAILS																															
Name of the Deposit Account Holder :																															
Bay Leasing's Deposit Account Number:						Amount:			Taka			Ps.																			
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Payment Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Annually																															
EFT Debit Starts On:				Regular Payment on				EFT Debit Ends On:																							
D	D	M	M	Y	Y	Y	Y	D	D	day of the month		D	D	M	M	Y	Y	Y	Y												
DETAILS OF THE BANK ACCOUNT																															
Name of the Bank Account Holder:																															
Bank Account Number: <table border="1" style="width:100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																															
Bank Name:						Account Holder's Contact No:																									
Branch Name:						Account Holder's Email ID:																									
Account Holder's Mailing Address:																															
I/We hereby authorize <b>Bay Leasing &amp; Investment Limited</b> to initiate Electronic Fund Transfer (EFT) Debit transactions to collect amount of above mentioned deposit account. I am/ We are fully aware that these EFT transactions will be posted to the bank account mentioned in this form.																															
I/We authorize the Bank as mentioned above to provide the information in Part 2 of this form to Bay Leasing & Investment Limited.																															
<input type="checkbox"/> Yes, I/We have read and agreed upon the terms and conditions mentioned overleaf.						X _____ <b>Signature of the Account Holder(s)</b>																									
<i>[This form cannot be processed without Signature(s) of the Account Holder(s) in both sides of this form]</i>																															

**PART 2: TO BE FILLED BY THE BANK**

Bank Name:																							
Branch Name:						Routing Number:			<table border="1" style="width:100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>														
Branch's Mailing Address & Telephone No:																							
We confirm that the information of the Account Holder(s) mentioned above and also confirm that, the bank account number and account holder's signature provided above have matched with our records.																							
<i>[This form cannot be processed without Bank's Seal and Signature of the Authorized Bank Official]</i>									X _____ <b>Signature of the Authorized Bank Official</b>														
Name of Bank Official:						Date:			D	D	M	M	Y	Y	Y	Y							
Contact Number & Email ID:																							

**PART 3: TO BE FILLED BY BAY LEASING & INVESTMENT LIMITED**

Serial Number: <table border="1" style="width:100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																															
Verified for BLIL by:						Date:			D	D	M	M	Y	Y	Y	Y															



**Bay Leasing & Investment Limited**

SECURE YOUR FUTURE

**ELECTRONIC FUND TRANSFER (EFT) DEBIT AUTHORIZATION**

**GENERAL TERMS & CONDITIONS**

*(TO BE AGREED UPON AND SIGNED BY THE ACCOUNT HOLDER)*

1. All applicable laws of Bangladesh Bank related to the BEFTN Operation will be applicable for all the transactions under this authorization and shall also govern the terms and conditions as mentioned herewith.
2. The original authorization form must be signed and sealed (where applicable) by the account holder and the related Bank and this will be preserved with Bay Leasing & Investment Limited. No photocopy of this form will be acceptable.
3. This authorization is accepted as per following criteria: (a) the bank account submitted by account holder matches with the bank's record, (b) the signature of the account holder is verified by the bank, (c) the fund is available in the mentioned account and (d) acceptance of payment by Bay Leasing subject to the applicable terms and conditions.
4. If the EFT payment instruction date falls on a weekend or a public holiday, the same may be effective on the next working day.
5. This EFT payment instruction shall remain in effect until Bay Leasing & Investment Limited provides written confirmation regarding any amendments/ cancellations of the BEFTN authorization. This such confirmation/ written advice must be received by the bank at least fifteen (15) days before the next payment is due.
6. Any such amendments/ cancellations will not release the account holder from the liability to the bank arising on account of the bank having executed the instruction before receipt of such amendments/ cancellations.
7. The account holder must ensure that adequate funds are available in the specified bank account during the time/date of transfer as mentioned in this form. The account holder also must ensure that the funds remain available for at least seven (07) working days if in case the fund is not transferred as per the scheduled date due to some technical error.
8. The account holder acknowledges that any charge/fee if incurs shall be paid by the client and shall be deducted from the bank account by the respective bank.
9. The bank with whom the account is maintained shall not be in the position to dishonor the authorization unless there are technical glitches. In case of such failure of transfer, the dishonored EFT debit has be paid in cash or cheque by the account holder separately. BLIL will not be responsible for any dishonor made by the bank and any dispute in this regard should be resolved by the client with the bank only.
10. No separate/individual payment receipt will be issued by BLIL against the transfers. The periodic/annual statement shall contain all the records of these payments made through EFT transfer. The client's statement can be obtained from BLIL upon written request of the account holder.
11. The account holder cannot hold BLIL responsible for any error in debit amount from his/her bank account. In case of errors the account holder will have to contact BLIL for clarification and necessary rectification. The account holder will pay for the shortage amount or get back the excess amount if required.

**I/ we hereby confirm that I/we have read the above mentioned terms and conditions and have agreed to comply with them.**

X \_\_\_\_\_  
Signature of the Account holder

*[This form cannot be processed without Signature(s) of the Account Holder(s) in both sides of this form]*