			AD CODE:			
Office use only:						
Remittance Ref. No.:		Originating Code:	g Branch			
FCC Contract Ref. No	:	Customer	D:			
FORM A-2 CUM LRS DECLARATION						
I/We	(1)					
	(Name of applicant	remitter)				
Address						
authorize						
`	of AD branch) ank/ Current/ RFC/ EEF arges and	C A/c. No				
* a) Issue a draft : Ber	•					
* b) Effect the foreign exchange remittance directly - 1) Beneficiary's Name 2) Name and address of the bank 3) Account No.						
* c) Issue travelers cheques for						
* d) Issue foreign curre Amount (specify cur * (Strike out whicheve	-		dicated below			
2) To be filled in by resident only if the remittance is made under LRS						
Sr. No. Whether	under LRS (Yes/No)*	Purpose Code	Description			
Note - (*) If Yes unde	LRS, please submit a	dditional details a	as per Appendix.			
3) Payment for import of services (Purpose Group Nos. 02, 03, 05, 06, 07, 08, 09, 10, 11, 15, 16 or 17), please indicate:						
"Name of the country providing ultimate services:"						
•	tick (\mathcal{I}) against an app should be consulted).	propriate purpose	code. In case of doubt/			

	(Under FEMA 1999)				
 I/We					
Sr. No.	Date	Amount	Name and address of AD branch/FFMC through which the transaction has been effected		
			which the transaction has been effected		
Signature (Name)	Signature of the Applicant				
, ,	(maine)				
Date:					
Certifica	Certificate by the Authorised Dealer				
This is to certify that the remittance is not being made by/ to ineligible entities and that the remittance is in conformity with the instructions issued by the Reserve Bank of India from time to time under the Scheme.					
Name and designation of the authorised official:					
Stamp and seal					
Signature					

Date:

<u>APPENDIX</u> (To be submitted only in case of LRS)

OUTWARD REMITTANCE APPLICATION FOR RESIDENT INDIVIDUALS

(To be completed by the applicant IN BLOCK LETTERS)

I.	DETAILS OF	THE APPLICANT	(REMITTER)
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Customer ID:	·		Account Nu	ımber:	
Branch Name:			DP Code:		
NAME OF THE APPLICANT					
ALLECANT					
FULL ADDRESS					
		T			
CONTACT DETAILS	TEL. NO.		M	OB. NO.	
CONTACT DETAILS	E-MAIL				
PAN NUMBER					
TAN NOMBER					
II. DETAILS OF THE FO	DREIGN EXCHANG	ie required (Ch	oose applica	able optio	n A or B or C)
A. For remittance of	fixed amount of F	Foreign Currency	,		
A. 1 of Territories of	ince amount of t	oreign currenc	<u>'</u>		
Foreign Currency		FC			
Toreign currency		Amount			
FC Amount in Figures		in Word			
i C Ainount in i igures					
B. For remittance in	Foreign Currency	equivalent of F	ived Runee	Amount	
D. 1 of Territourice III	oreign currency	equivalent of 1		Amount	
Foreign Currency		INR			
Torcigit currency		Amount			
INR Amount in Figures		in Word	s		
INICAMOUNT IN FIGURES					
C. For remittance in	Foreign Currency	other than above	/ 0		
C. 1 of Territediree in	oreign currency				
Foreign Currency		FC			
i oreign currency		Amount			
FC Amount in Figures		in Word			
i C Amount in i igules					

III. ACCOUNT DETAILS TO BE DEBITED

ACCOUNT NUMBER	ACCOUNT TYPE	AMOUNT IN FOREIGN CURRENCY

IV. PURPOSE OF REMITTANCE WITH PURPOSE CODE

SL	PURPOSE		FETERS CODE	SL	PURPOSE		FETERS CODE
1	INVESTMENT ABROAD IN	Equity Capital (shares) [Portfolio Investment]	S0001	6	TRAVEL	Business	S0301
		Debt Instruments [Portfolio Investment]	S0002			Pilgrimage	S0303
		Indian Direct investment	S0003*			Medical Treatment	S0304
		abroad in equity shares*				Education(Incl. Fee, Hostel Exp etc)	S0305
		ESOP IDRs	S0021 S0022			Other Travels including Holiday Trip, Settlement of International Credit Cards	S0306
2	PERSONAL GIFT AND DONATIONS		S1302	7	HEALTH SERVICES	Medical Treatment	S1108
3	DONATIONS TO RELEGIOUS & CHARITABLE INSTITUTIONS		S1303	8	STUDIES ABROAD	Education (E.g. fees for correspondence courses abroad)	S1107
4	MAINTENANCE OF CLOSE RELATIVE		S1301	9	EMIGRATION		S1307
5	OPENING OF FOREIGN CURRENCY ACCOUNT ABROAD		S0023			Loan to NRI Close Relative	S0011
6	PURCHASE OF IMMOVABLE PROPERTY ABROAD		S0005	10	OTHERS	General Insurance Premium and Term Life Insurance Premium	S0603
PURPOSE:						FETERS CODE:	
SOU	RCE OF FUNDS						

(*) - ODI form Part-I to be submitted along with this form.

If the purpose selected is one of the below then it is mandatory to furnish the details sought for

MAINTENANCE OF CLOSE RELATIVE	Relationship of beneficiary	
EDUCATION	Student Name and Student ID. Country of study abroad	
	The location of property being purchased	STATE:
PURCHASE OF IMMOVABLE PROPORTY ABROAD (#)	purchaseu	COUNTRY:
INVESTMENT ABROAD (#)	Equity Shares, Mutual Funds, VC Fund Debt Instrument	NAME OF THE COMPANY:
		LISTED / UN -LISTED:
	Others: (Furnish details)	UIN NO.

^{(#) -} If eligibility of more than one individual is clubbed, investment should be in joint names.

V. NATURE OF INSTRUMENT (SELECT THE MODE OF PAYMENT- TICK MARK)

VI. DETAILS OF THE BENEFICIARY

BENEFICIARY NAME *	
BENEFICIARY FULL ADDRESS *	
ACCOUNT NUMBER *	
IBAN* (Compulsory for remittance to UK, Europe, Gulf countries and other countries implemented IBAN) BSB * : (For Australia) TRANSIT CODE*: (For Canada) BENEFICIARY BANK NAME & ADDRESS*	
SWIFT /BIC	
SWIFT / BIC OF INTERMEDIARY BANK, IF ANY & BENEFICIARY BANK ACCOUNT NO. WITH INTERMEDIARY BANK	

(* Mandatory for WIRE transfer through SWIFT)

VII.DETAILS OF THE REMITTANCE MADE/TRANSACTIONS EFFECTED UNDER THE SCHEME IN THE CURRENT FINANCIAL YEAR (APRIL- MARCH) ______

SL NO.	DATE	CURRENCY	AMOUNT	NAME & ADDRESS OF AD BRANCH /FFMC THROUGH WHICH THE TRANSACTION HAS BEEN EFFECTED
1				
2				
3				
		TOTAL		(EQUI. IN USD)

VIII. DETAILS OF FORWARD CONTRACT BOOKED TO BE UTILIZED FOR THIS TRANSACTION

Rate Covered IF ANY with our Trader, please mention the details below:
(Applicable only for the Day)
(FF

This is to authorize you to debit my/our above mentioned account together with all charges & taxes and affect the foreign exchange remittance through SWIFT / issue Demand Draft /TCs / FCNs/ Issue or Reload of Travel Card as detailed above. (Strike out whichever is not applicable).