BANK INFORMATION FORM

1. Important: Please provide ***complete*** and ***correct*** bank details as required below. The beneficiary is responsible for the banking data provided in this form. UNIDO is not responsible for any delay in payments resulting from changes in banking information which have not been promptly communicated to UNIDO, nor will bear any charges resulting from incorrect and incomplete information provided in this form.

2. Any changes to the banking details should be communicated by using a new Bank Information Form, as requests by email will not be accepted.
3. The undersigned authorizes UNIDO to contact the bank for confirmation/verification of information provided, if necessary.

Note: *Only one bank account in the name of the beneficiary will be accepted. No third-party payee is allowed.*

BANK DETAILS	☐ New ☐ Update existing account ☐ Additional account
NAME AND ADDRESS OF ACCOUNT HOLDER	
BANK NAME AND ADDRESS TELEPHONE AND EMAIL	
ACCOUNT NUMBER	
IBAN **(INT'L BANK ACCOUNT NO.)**	
BIC OR SWIFT CODE	
LOCAL BANK CODE/BRANCH CODE **(e.g. US ABA, UK sort code, IND IFSC, AT Blz, etc.)**	
CORRESPONDENT BANK	
ACH (AUTOMATED CLEARING HOUSE) AND FED WIRE TRANSFES (ONLY FOR USA)	
BANK ROUTING NO. **(SORT CODE, CORRESPONDENT BANK FOR USD)**	

DATE	**SIGNATURE OF AUTHORIZED PERSONNEL**
	NAME AND TITLE OF THE SIGNATORY (PRINT)

Note: The below is to be filled out by UNIDO for new/or change of VMD only:	
VERIFIED WITH (FROM VENDOR SIDE: NAME & TITLE)	
TELEPHONE NUMBER	
VERIFIED BY UNIDO PERSONNEL (NAME)	
DATE	
SIGNATURE	