

# Advance Settlement Bank Details Form

## Employee Information

Full Name

Employee ID

Department

Designation

Contact Number

## Advance Details

Advance Amount

Purpose

Date Requested

## Bank Account Details

Bank Name

Account Holder Name

Account Number

IFSC Code

Branch

## Declaration

I hereby declare that the above details are true and correct to the best of my knowledge.

Employee Signature

Date

## For Office Use Only

Approved By

Approval Date

## Important Notes

- Please ensure all bank details are correct to avoid payment delays.
- Submission of incorrect information may lead to rejection of the advance request.
- Advance amount is subject to approval by authorized personnel.
- Maintain a copy of this form for your records.
- This form must be completed and signed by the applicant.