



# CIBC Business Contact Centre (Non-PPSL) Request for Wire and InterBranch Payment

**FAX** completed form to: **CIBC 1 866 463-9002** **Faxed Confirmation Required**

Date (mm/dd/yyyy) \_\_\_\_\_ Value Date (mm/dd/yyyy) (International wire payments may be future value dated up to 2 business days) \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Contact Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Ext. \_\_\_\_\_ Fax Number \_\_\_\_\_

Debit Transit - Account (Wire) \_\_\_\_\_ Debit Transit - Account (Service Charge, if different) \_\_\_\_\_

FX Contract \_\_\_\_\_ FX Rate \_\_\_\_\_ FX Equivalent \_\_\_\_\_

### Wire Transfer Information

Currency of Payment  CAD\* (under \$150,000 - see Note below)  CAD (\$150,000 or more)  USD  Other: \_\_\_\_\_ Indicate currency

Payment Amount \_\_\_\_\_ **OR** CAD Equivalent \$ \_\_\_\_\_

**\*Note: For wire payments valued under \$150,000 CAD and destined for countries outside of Canada, unless checked below you hereby instruct CIBC to convert the amount to the currency of the place of payment at CIBC's prevailing foreign exchange purchase rate. If currency is not available, the amount will not be converted.**

Please check if you do not wish CIBC to convert the amount:

Intermediary Bank \_\_\_\_\_ SWIFT (BIC) Code \_\_\_\_\_

Bank of Beneficiary \_\_\_\_\_ SWIFT (BIC) Code (Mandatory for EU payments) \_\_\_\_\_

Bank Address \_\_\_\_\_ Destination Country \_\_\_\_\_

Bank Identifier (Bank Code/Transit/Routing No. ex. Canada - CC+9 digits, USA - FW+9 digits, UK - SC+6 digits) \_\_\_\_\_

Beneficiary Bank Account Number at Intermediary Bank \_\_\_\_\_

Beneficiary Name (Mandatory) \_\_\_\_\_

Beneficiary Address (Mandatory - Complete Address) \_\_\_\_\_

Beneficiary Account (Mandatory and for payments to European Union: include IBAN (accompanied by SWIFT (BIC) Code) OR Mexico: include CLABE) \_\_\_\_\_

Payment Details (if any) \_\_\_\_\_

Correspondent Bank Charges - Paid by :  Remitter  Beneficiary

**Authorized Signing Officer(s): Client acknowledges this wire payment is subject to the terms of the Fax Wire Service Agreement.**

\_\_\_\_\_  
Name Title Signature

\_\_\_\_\_  
Name Title Signature

### For Internal CIBC Use Only

Client ID No. \_\_\_\_\_ SR No. \_\_\_\_\_ Authorization to create or increase overdraft  Yes

Service Charges  Standard  Waived  Special/Flat Fee: Amount: \$ \_\_\_\_\_

**Authorized by CIBC in accordance with delegation letter by:**

\_\_\_\_\_  
CIBC Officer's Name Signature CIBC Officer's Name Signature

For Company Internal Reference Only  
CIBC will disregard information