



FUNDS WITHDRAWAL FORM

Account Name : _____

Account Login : _____

Account Type : Micro Classic Pro

Withdrawal Currency : _____ Withdrawal Amount : _____

Withdrawal Amount in Words : _____

BANK WIRE TRANSFER (TT ONLY)

Beneficiary's Name : _____

(This must be the same as your TRADIZE account name)

Beneficiary's Bank : _____

Country of Beneficiary's Bank : _____

Beneficiary's Account Number : _____

IFSC : _____

Bank SWIFT CODE : _____

Sort Code : _____

IBAN Number : _____

Payment Reference : _____

TERMS AND CONDITIONS:

1. I am aware that I bear all the bank charges involving in the withdrawal transaction.
2. I am aware that the bank uses current interbank exchange rates and hence I may receive an amount less than the requested withdrawal amount, due to currency fluctuations.
3. I am aware that TRADIZE will transfer the money only to TRADIZE account holder and not a third party.

Signature: _____

Date: _____

Withdrawal will be credited to your account within 3 to 5 business days.

Please scan and send this form via e-mail to support@tradize.com

For Official use only.

Account details Verified :

Bank details match :

Payment Authorised :

Authorised by :

Verified by :