



SMART Credit (ACH): Reversal Request Form

ATTN: SMART Team HSBC Building, 968 Rama IV Rd. Silom, Bangrak, Bangkok 10500 Tel: 02-614-4297, 02-614-4255 Fax: 02-353-7333	Date:
	Company:
	Contact Person:
	Tel:
	Fax:

We, _____, account number _____, hereby request The Hongkong and Shanghai Banking Corporation Limited, Bangkok branch (the "Bank") to coordinate with the beneficiary bank to perform reversal of processed ACH Payment with below details:

Reason for reversal: _____

No.	Beneficiary Bank	Beneficiary Name	Beneficiary Account Number	Value Date	Amount (THB)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Should there be any charges associated with the reversal request, we authorise the Bank to debit such charges from our account specified above.

We acknowledge and agree that:

1. The request will be processed on the best effort basis;
2. The return of fund is provisional and dependent on the successful reversal by the beneficiary bank;
3. The fund may not be returned in full as it may be subject to banking fee charged by the beneficiary bank.

Authorised Signature and Company Seal (if any):

Bank Use Only				
W/S ID	Deal #	Capt. by	Appr. by	Count
Signature Verified by		Fax Indemnity Held		Call Back Service
		Yes	No	Time: