

Liquidity Management

Cash Sweeping Setup Form



Structure Details			
Structure Type	<input type="checkbox"/> Single Tier	<input type="checkbox"/> Mesh	<input type="checkbox"/> Hierarchy
Failure Level	<input type="checkbox"/> Instruction	<input type="checkbox"/> Structure Remaining	<input type="checkbox"/> Structure Remaining Related
Structure Priority			

Instruction Details			
Control Account			
Type	<input type="checkbox"/> Internal	<input type="checkbox"/> External (Please provide External Account On-Boarding Form)	
Account Name			
Account Number			
Contra Account/s			
Type	<input type="checkbox"/> Internal	<input type="checkbox"/> External (Please provide External Account On-Boarding Form)	
Account Name			
Account Number			
Sweep Type	<input type="checkbox"/> Zero Balancing <input type="checkbox"/> Sweep Transfer <input type="checkbox"/> Range Balance <input type="checkbox"/> Range Based Target	<input type="checkbox"/> Credit Trigger <input type="checkbox"/> Debit Trigger <input type="checkbox"/> Percentage Credit <input type="checkbox"/> Percentage Debit	Details: _____
Execution Mode	<input type="checkbox"/> Time-Triggered <input type="checkbox"/> On-Line	<input type="checkbox"/> Beginning of the day <input type="checkbox"/> End of the day	Details: _____
Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly <input type="checkbox"/> Other:	Other: _____
Start Date (YYMMDD)		End Date (YYMMDD) <i>(Leave blank for indefinite)</i>	
Non-Working Day Option	<input type="checkbox"/> Previous Working Day	<input type="checkbox"/> Next Working Day	<input type="checkbox"/> Skip Execution

Sweep Constraints	Minimum Amount to Sweep In		Maximum Amount to Sweep In	
	Minimum Amount to Sweep Out		Maximum Amount to Sweep Out	
Force Debit	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partial	
Reversal	<input type="checkbox"/> No	<input type="checkbox"/> Yes – Force Debit	<input type="checkbox"/> Yes – Without Force Debit	
OD Limit to be considered	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Priority	<input type="checkbox"/> User Defined	<input type="checkbox"/> Top Consolidation		
Details: _____				

Authorization

The Client hereby authorises CBD act on the above Cash Sweeping Setup and hereby acknowledges and assume all risk associated with CBD acting upon this request.

The Client represents and warrants that the signatory/ies below is/are duly authorized to enter into this Agreement on behalf of the Client.

For and on behalf of the Client

For and on behalf of the Client

Authorized Signature and Company Stamp

Authorized Signature and Company Stamp

FOR BANK USE ONLY

Client RIM

Received by		Approved by	
Enrolled by		Signature / Date	
Signature / Date			