BANK CONFIRMATION – AUDIT REQUEST

Instructions

**Auditor**

1. Complete all known details in shaded areas before forwarding to the Bank.
2. If the space on the form is inadequate please attach a statement giving the full details as required by the headings on the form.

**Bank**

1. Ensure that the details supplied are as at the confirmation date shown below.
2. Complete unshaded areas, by listing information as called for under the relevant heading, from detail contained in the Bank’s records.
3. Confirm details in the shaded areas as to correctness, and mark any variation in red on all copies. Also insert, in red, any information that may have been omitted by the customer/auditor.
4. Three (3) copies of the form should be received by the Bank. All completed copies of the Confirmation are to be signed with original returned directly to the auditor at the address below. The duplicate is to be forwarded to the client and the triplicate retained by the Bank.

|  |  |  |  |
| --- | --- | --- | --- |
| To:Bank | <Bank Name><Branch Name> | From: Customer | <Customer Name><Customer Address> |
| Auditor: <Auditor Company Name> <Auditor Company Address> Contact: <Auditor Name> Ph: <Auditor Phone Number> | Customers Authorised Signature Date: |
| Confirmation Date: 30/06/2020 | Third Party Authority is attached | YES |  |
| NO |  |

**1. CREDIT ACCOUNT BALANCES**

Give details of all account balances in favour of the bank customer as at **30/06/2020**. Include details of any current accounts, interest bearing deposits, foreign currency accounts, convertible certificates of deposit, money market deposits, etc. if not listed below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Account Name | Account Number | Balance | Currency | Interest Rate |
| <Full Name of Account> | <Account Number> |  |  |  |

**2. DEBIT ACCOUNT BALANCES**

Give details of all account balances owed to the bank as at **30/06/2020**

by the bank customer in respect of overdraft accounts, bank loans, term loans etc. and also repayment terms.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Account Name | Account Number | Balance & Currency | Overdraft limit | Interest Rate | Repay terms -monthly, quarterly etc. |
|  |  |  |  |  |  |

**3. PROMISSORY NOTES/BILLS OF EXCHANGE HELD FOR COLLECTION ON BEHALF OF THE CUSTOMER**

|  |  |  |
| --- | --- | --- |
| Maker/Acceptor | Amount | Due Date |
|  |  |  |

**4. CUSTOMER’S OTHER LIABILITIES TO THE BANK** CONFIRMATION DATE **30/06/2020**

List liabilities owed, including:

1. Bills discounted with recourse, endorsed drafts/notes, forward exchange contracts, letters of credit, liability in respect of shipping documents where customer’s account not yet debited.
2. Include date, name of beneficiary, amount and brief description of any guarantees, bonds or indemnities undertaken by the bank on behalf of the customer (with recourse) or given by the customer.
3. Other liabilities – give details.

|  |  |  |  |
| --- | --- | --- | --- |
| Nature of Liability | Amount | Currency | Due Date |
|  |  |  |  |

**5. ITEMS HELD AS SECURITY FOR CUSTOMER’S LIABILITIES TO THE BANK**

Indicate if securities relate to particular borrowings or liabilities to the bank and whether lodged in the customer’s name. Also include details of any negative pledge arrangements.

If lodged by a third party, that party’s authority to disclose details **must** be attached.

|  |
| --- |
| Description (include amount if applicable) |
|  |

**6. ACCOUNTS OPENED/CLOSED**

List details of any accounts opened or closed during the twelve months prior to confirmation date **30/06/2020**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Account Name | Account Number |  | Account Name | Account number |
|  |  |  |  |  |

**7. SEALED PACKETS, LOCKED BOXES, SECURITY PACKETS ETC.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are sealed packets held on behalf of the customer?  | Yes |  | No |  |
| Are locked boxes held on behalf of the customer? | Yes |  | No |  |
| Are security packets held on behalf of the customer? | Yes |  | No |  |

**8. UNUSED LIMITS/FACILITIES**

Please confirm details of all available unused limits/facilities at confirmation date.

|  |  |  |  |
| --- | --- | --- | --- |
| Types of Facility | Amount of Facility | Amount of Facility used | Conditions of Facility Use |
|  |  |  |  |

**9. OTHER INFORMATION**

Please confirm (see shaded area) and/or provide any other details (unshaded area) relating to any financial relationships not dealt with under any of the above headings.

|  |  |
| --- | --- |
|  |  |
|  |  |

This certificate has been completed from our records at our \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ branch only. The bank and it’s staff are unable to warrant to the correctness of that information and accordingly hereby disclaim all liability in respect of the same. The information contained herein is confidential and provided for private use in confirmation of our customer accounts for audit purposes only. It may not be used for any other purpose or by any other persons. In particular this is not a credit reference.

|  |  |  |  |
| --- | --- | --- | --- |
| Authorising Officer’s Signature | Name | Bank Stamp | Date completed & returned |
|  | Title |  |  |