

To:
DUBAI ISLAMIC BANK
SALARIES DEPARTMENT
COD - GENERAL BANKING OPERATIONS

We hereby Authorize Dubai Islamic Bank (DIB) to debit our Account as per the details and amount below to affect transfer of Salary for our employees through the Central Bank WPS (Wages Protection System) as per the details contained in the SIF (Salary Information File) that we have prepared and sent to the DIB on a Read Only CD-ROM along with a signed hard copy.

SALARY PAYMENT INSTRUCTIONS

Our MOL Employer Unique ID	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>
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Company MOL Name: _____

Debit our DIB Account No.		Salaries Due Date (dd/mmm/yyyy)	
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Title of Account:			
Total Amount of Salaries (in Figures)		AED <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>	
Total Amount of Salaries in Words:			
<div></div> <div></div>			
Salary Month:		Salary Year:	Number of Staff Records in SIF:
Authorized Email Address			

TERMS AND CONDITIONS

We agree and confirm that:

- DIB will not process any salary transfer (s) without receiving this original cover letter duly signed.
- The softcopy will be verified against this debit authority for: The company’s Unique MOL Number, Total Amount of salaries, Number of Staff Records in SIF, Salary Month and Year.
- We have read, understood and Implemented the MOL directives regarding Employer Responsibility as related to WPS and the SIF file is prepared in accordance the Central Bank guidelines.
- Charges will be debited from our account mentioned above separately.
- DIB will process salary transfer (s) as per the softcopy without any liability to the contents.
- We authorize DIB to modify the Date and Time parts of the SIF file for resubmission if the first submission was rejected by WPS for a technical reason not related to the contents of the file.
- DIB will reject this application if ANY of the terms is not met and notify us through the Authorized Email above in case discrepancy or inability to process the instructions.

Authorized Signatory	Authorized Signatory
Name:	Name:
Signature	Signature

For Bank use only		لاستخدام البنك فقط	
Authorized Signature	التوقيعات المعتمدة	Signature Verification By	تم مطابقة التوقيع بواسطة
.....		Name :	الاسم :
		Signature :	التوقيع :