MANDATE FORM

(ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)/REAL TIME GROSS SETTLEMENT (RTGS) FACILITY FOR RECEIVING PAYMENTS

A. DETAIL OF ACCOUNT HOLDER

| | NAME OF ACCOUNT HOLDER | | |
|----|--|--|----|
| | COMPLETE CONTACT ADDRESS | | |
| | Telephone Number | | |
| | Fax Number | | |
| | E-Mail | | |
| | PAN | | |
| | | | |
| В. | BANK ACCOUNT DETAILS | | |
| | BANK NAME | | |
| | D 1 N '4 C 1 (A 11 | | |
| | Branch Name with Complete Address | | |
| | TELEPHONE NUMBER AND E-MAIL | | |
| | WHETHER THE BRANCH IS COMPUTERISED | | |
| | WHETHER THE BRANCH IS COM OTERISED WHETHER THE BRANCH IS RTGS ENABLED? IF YES, | | _ |
| | THEN WHAT IS THE BRANCH IFCS CODE | | |
| | IS THE BRANCH ALSO NEFT ENABLED? | | |
| | TYPE OF BANK ACCOUNT (SB/CURRENT/CASH | | |
| | CREDIT) | | |
| | COMPLETE BANK ACCOUNT NUMBER (LATEST) | | |
| | MICR CODE OF BANK | | |
| | I hereby declare that the particulars given above are co- delayed or not effected at all for reasons incomplete or incorr Institution responsible. I have read the option invitation lett expected of me as a participant under the organization. | rect information I would not hold the us | er |
| | Date: | Signature of Customer |) |
| | Certified that the particulars furnished above are correct as | as per our records. | |
| | (Bank's Stamp) | | |
| | | (|) |
| | Date: | Signature of Bank Manager | |