

UMRN

Date

Tick () Sponsor Bank Code Utility Code

I/ We hereby authorize to debit (tick)

Bank A/C Number

With Bank IFSC or MICR

an amount of Rupees ₹

FREQUENCY Mthly Qtrly H - Yrly Yrly As and when presented DEBIT TYPE Fixed Amount Maximum Amount

Reference 1 Ph. / Mob. No.

Reference 2 Email ID

* I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the Bank.

PERIOD

From

To

Or Until Cancelled 1 Name as in bank records 2 Name as in bank records 3 Name as in bank records

* This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorizing the User entity / Corporate to debit my account, based on the instructions as agreed and signed by me.
* I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / Corporate or the Bank where I have authorized the debit.

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Instructions to fill Mandate :

1. UMRN is auto generated during mandate creation and is mandatory to be updated during amendment and cancellation of mandate. (Maximum length - 20Alpha Numeric Characters)
2. Date in DD/MM/YYYY format.
3. Sponsor Bank IFSC / MICR code, left padded with zeroes where necessary. (Maximum length - 11 Alpha Numeric Characters)
4. Utility Code of the Service Provider. (Maximum length - 18 Alpha Numeric Characters)
5. Name of Service Provider.
6. Tick on box to select type of action to be initiated.
7. Tick on box to select type of account to be affected.
8. Customer's legal account number, left padded with zeroes. (Maximum length - 35Alpha Numeric Characters)
9. Name of Bank and Branch.
10. IFSC / MICR code of customer bank. (Maximum length - 11 Alpha Numeric Characters)
11. Amount payable for service or maximum amount per transaction that could be processed, in words.
12. Amount in figures, similar to the amount mentioned in words, (Maximum length- 13 digit numeric, in paise)
13. Reference 1 Service Provider generated consumer reference number / Beneficiary A/c. No.
14. Reference 2 : Service provider generated Scheme / Plan reference number / Beneficiary A/c. name.
15. Tick on box to select frequency of transaction.
16. Validity of mandate with dates in DD/MM/YYYY format.
17. Names of customer/s and signatures as well as seal of Company (where required). (Maximum length of Name -40 Alpha Numeric Characters)
18. Undertaking by customer.
19. Telephone No. with STD code / Mob. no. of customer.
20. Mail ID of customer.
21. Initiating Branch SOL ID

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