

Electronic Clearing Service (Credit Clearing)

Model Mandate Form

(Investor/customer's option to receive payments through Credit Clearing Mechanism)

Name of the Scheme and the periodicity of payment

No.

1) Investor/customer's name:

2) Particulars of Bank account

- A Name of the Bank :
- B Name of the branch :
Address :
Telephone No. :
- C 9-Digit code number of the bank and branch
appearing on the MICR cheque issued by the bank:
- D Type of the account (S.B., Current or Cash Credit)
with code (10/11/13)
- E Ledger and Ledger folio number:
- F Account number (as appearing on the cheque book)

3 Date of effect:

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the user institution responsible. I have read the option invitation letter and agree to discharge the responsibility expected of me as a participant under the scheme.

(.....)

Signature of the Investor/Customer

Date

Certified that the particulars furnished above are correct as per our records.

Bank's Stamp

Date:

(.....)

Signature of the authorised official of the Bank