

Mandate Form

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

Name of the Scheme and the periodicity of payment

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 Branch IFSC CODE: _____

F Account number (as appearing on the cheque book) _____

(In lieu of the bank certificate to be obtained as under, please attach a blank cancelled cheque or photocopy of a cheque or front page of your savings bank passbook issued by your bank for verification of the above particulars)

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