



### MANDATE INSTRUCTION FORM FOR NACH / DIRECT DEBIT

UMRN

Date

Sponsor Bank Code

Utility Code

- Create
- Modify
- Cancel

I/We hereby authorize  to debit tick (✓)  SB  SB  SB  SB-NRE  SB-NRO  Others

Bank A/C Number

with Bank  IFSC  or MICR

an amount of Rupees

Frequency  Monthly  Qtly  H-yrls  Yrly  As & when presented Debit Type  Fixed Amount  Maximum Amount

Ref. 1

Ref. 1

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  Untill Cancelled

\_\_\_\_\_  
Signature of Primary Account Holder

\_\_\_\_\_  
Signature of Primary Account Holder

\_\_\_\_\_  
Signature of Primary Account Holder

\_\_\_\_\_  
Name as in Bank Records

\_\_\_\_\_  
Name as in Bank Records

\_\_\_\_\_  
Name as in Bank Records

This is to confirm that the declaration has been carefully read, understood & made by me / us I am authorizing the user entity / Corporate to debit my account, based on the instructions 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