



UMRN

Date

Utility Code



Create



Modify



Cancel

Sponsor Bank Code

I/We authorize

To debit (tick✓)

Bank a/c number

With Bank

Name of customers bank

IFSC / MICR

An amount of Rupees

₹

Debit Type

Fixed Amount

Maximum Amount

Frequency

Monthly

Quarterly

Half Yearly

Yearly

As & when presented

Reference 1

Reference 2

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 bank. 2. This is to confirm that the declaration has been carefully read. Understood & make by me/us. I am authorizing the user entity/corporate to debit my account based on the instruction as agreed and signed by me. 3. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/ amendment request to the entity/corporate bank where I have authorized the debit.

From

To

Or

Until Cancelled

Signature Primary Account holder

Signature Primary Account holder

Signature Primary Account holder

Phone No.

1. Name as in Bank Records

2. Name as in Bank Records

3. Name as in Bank Records