✓

Debit Mandate Form NACH / ~~ECS / DIRECT DEBIT~~

UMRN[1] | Date

Tick (✓)[2]

✓ CREATE
~~MODIFY~~
~~CANCEL~~

Sponsor Bank Code: ICIC0TREA00 | Utility Code: ICIC02840000005357

I/We hereby authorize: BSNL CHENNAI | to debit (tick✓): SB/CA/CC/SBNRE/SB-NRO/Other

Bank A/C Number

with Bank | IFSC | or MICR

an amount of Rupees[3] | [4] ₹

FREQUENCY ☐ Mthly ☐ Qtly ☐ H-Yrly ☐ Yrly ☑ As & when presented | DEBIT TYPE ☐ Fixed Amount ☑ Maximum Amount

Reference 1 CA. No. | Phone No.[6] 044-

Reference 2 Tel. No. | 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.

[5] PERIOD
From
To
OR ☑ Until Cancelled

Signature of Primary Account Holder (as per bank record) | Signature of Account Holder | Signature of Account Holder

1. Name as in back records 2. Name as in back records 3. Name as in back 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 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.