

UMRN Date Utility Code Create Modify CancelSponsor Bank Code I / We Authorize To Debit (Tick) Bank A/c Number With Bank IFSC / MICR An Amount of Rupees ₹ Debit Type Fixed Amount Maximum Amount Frequency Monthly Quarterly Half Yearly Yearly As & When PresentedReference 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 the bank. 2. 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.

3. 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.

From To Or Until Cancelled

Signature of Primary A/c Holder _____

Signature of Account Holder _____

Signature of Account Holder _____

Phone No.

1. Name as in Bank Records _____

2. Name as in Bank Records _____

3. Name as in Bank Records _____

Instructions for Filling the Mandate Form:

- * **UMRN number should not be filled**
- * **Amount refers to value of bill amount x 12 in case of Monthly customers and value of bill amount x 6 in case of Bi-monthly customers**
- * Reference 1 - In case of Landline/FTTH numbers **10 digit Billing Account Number** to be entered = starts with 903XXXXXXX
- * Reference 1 - In case of Postpaid mobile **9 Digit Billing Account Number** to be entered = starts with 5XXXXXXX
- * Reference 2 - Mobile Number to be entered for correspondence purposes
- * **From Date - To be filled as 1st of the following month**
- * **To Date - should not be filled**
- * Phone No. - **Landline Number with STD Code to be entered**
- * Signature - **A/c Holder signature is enough in case of individuals**
- * Signature - In case of non individuals, **FOR SEAL TO BE PLACED** and Authorised Signatories to sign the mandate

Once the Form is duly filled, the same needs to be sent to the below address:

Accounts Officer ECS Section,
6th Floor, Anna Road Telephone Exchange,
10, Dams Road, Chennai - 600002