NPCI NATIONAL PAYMENTS CORPORATION OF INDIA

UMRN | Date

Utility Code N A C H 0 0 0 0 0 0 0 0 0 5 9 6 9 1 | ✓ CREATE ◯ MODIFY ◯ CANCEL

Sponsor Bank Code M A H B 0 0 0 0 9 4 1 I/We Hereby authorize

to debit (tick ✓) SB CA CC SB-NRE SB-NRO Other Bank a/c number

with bank IFSC or 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 authorising 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 Authorising 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 authorised to cancel / amend the mandate by appropriately communicating the cancellation / amendment request to the user entity / Corporate or the bank where I have authorised the debit.

From

To

Or ☐ Until Cancelled

Phone No.

Signature of Primary Account Holder — 1. Name as in bank record

Signature of Account Holder — 2. Name as in bank record

Signature of Account Holder — 3. Name as in bank record

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