

Debit Mandate Form NACH/ECS/DIRECT DEBIT (Standing Instructions)

TATA
Tick (✓)

UMRN

Date 27/02/2019

Sponsor Bank Code

Utility Code

CREATE
MODIFY
CANCEL

I/We hereby authorize

TATA CAPITAL FINANCIAL SERVICES LIMITED

to debit (tick✓)

SB/CA/CC/SB-NRE/SB-NRO/Other

Bank a/c number

10208065935

with Bank

STATE BANK OF INDIA

IFSC

SBIN0006354

or MICR

831002007

an amount of Rupees

Forty one thousand eight hundred

₹ 41800

FREQUENCY

☐ Bi-Mthly☒ Mthly☐ Qtrly☐ H-Yrly☐ Yrly☐ As & when presented

DEBIT TYPE

☒ Fixed Amount☒ Maximum Amount

Reference 1

Agreement No.:

TCFTW0535000010292188

Phone No.

9162895313

Reference 2

Branch Name

Jamshedpur

Email ID

PERIOD

From

03/06/2019

To

31/03/2020

Or

☐ Until Cancelled

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.

Signature primary Account holder

Signature of Account holder

Signature of Account holder

1. ASHA DEVI

Name as in bank records

3. Name as in bank records

This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorising the user entity/corporate to debit my account. I have understood that I am authorised 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. I/We hereby declare that the above information is true and correct and that the mobile number listed above is registered in my/our name(s) and/or is the number that I/we use in the ordinary course. I/We hereby declare that, irrespective of my/our registration of the above mobile in the provider customer preference register, or in any similar register maintained under applicable laws, now or subsequent to the date hereof, I/We consent to the Bank communicating to me/us about the transactions carried out in my/our aforesaid account(s).

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