	Debit Mandate Form NACH/ECS/DIRECT DEBIT (Standing Instructions)
TATA	UMRN Standing Instructions)
Tick (V) Sponsor	Bank Code Date Date
MODIFY I/We hereby authori	IZE TATA CAPITAL FINANCIAL COMPANY COM
CANCEL Bank a/c numb	to debit (ticky) SB/CA/CC/SR-NRE/SR NROW
with Bank korpototra V	per 8 9 0 3 0 6 3 0 4 6 8 to debit (tickv) SB/CA/CC/SB-NRE/SB-NRO/Ot
an amount of Lill	Cight thousand live hundred
an amount of Rupees Fifty FREQUENCY Bi-Mthly	Eight thousand five hundred and sixty Eight
Reference 1 Agreement No.:	As & when presented DERIT TYPE TO
Reference 2 Branch Name	Maximum Amount
PERIOD	70117703
From 0 3 0 4 2 0	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 balk
TO 3000000	The state of the ball of the b
Or Until Cancelled	Signature primary Account holder Signature of Account holder Signature of Account holder
This is to confirm that the declaration has been	. On the count holder
in the provider customer preference register, or in	carefully read, understood and made by meios. I am authorising the user entity/corporate to bebit my account. I have understood that I amount orised to cancel/amend request to the user entity/corporate or the bank where I have authorized the debit. I whe hereby declare that the above information is true and it is 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.
account(s).	records registered in mylour name(s) and/or is the number that I/we use in the ordinary course. If have authorized the debit my account. I have understood that I amount orised to cancel/amend 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
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UMR	Debit Mandate Form NACH/ECS/DIRECT DEBIT (Standing Instructions)
TATA	
CREATE CREATE	Utility Code
MODIFY I/We hereby authorize	TATA CAPITAL FINANCIAL SERVICES LIMITED
Bank a/c number	X 9 0 2 0 C 3 7 / C A TO TO GEDIT (ticky) SB/CA/CC/SB-NRE/SB-NRO/Othor
with Bank karnataka Vikas	Grance na Room
n amount of Rupees The Elah	A thousand Line 1990 O O U O O O MICR S O LE ZOLT
	Cay I I - TIV Velu A - A -
	Maximum Amount
PERIOD Branch Name	HUBIA 9844617403
rom OR OU 2 8 VO	l agree for the debit of mandate processing charges by the bast of
2002000	l 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.
Until Cancelled	Signature primary Accessed
s is to confirm that the declaration has been account	1. In Great a Count of Account holder Signature of Account holder
ct and that the mobile number listed above is registed provider customer preference maintains.	Is a substant folder 1. In a substant of Account holder 1. In a substant of Account holder 1. In a substant of Account holder 2. In a substant of Account holder 2. In a substant of Account holder 3. In a substant of Account holder 4. In a substant of Account holder 4. In a substant of Account holder 5. In a substant of Account holder 6. In a substant of Account holder 7. In a substant of Account holder 8. In a substant of Account holder 8. In a substant of Account holder 9. In a
d out in my/our aforesaid account(s).	ellation/amendment request to the user entity/corporate at debit my account. In have understood that I am authorised to cancel/amend my/our name(s) and/or is the number that I/we use in the ordinary course. I/We hereby declare that the above information is true and milar 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
	The above mobile above mobile bank communicating to me/us about the transactions
J	Debit Mandate Form NACH/ECS/DIRECT DEBIT (Standing Instructions)
TA UMRN	
Sponsor Bank Coo	Date 0 8 0 2 2 0 1 9
I/We hereby authorize	TATA CAPITAL FINANCIAL SERVICES LIMITED
Bank a/c number 8 9	10 Dept (tick, A SHICA/CC/CD NEW CO.
Bank karnataka Vikay Gr	No.
And .	1 3 E V C S O O O G O O O O O O O O O O O O O O O
UENCY Bi-Mthly Mthly	INDUCANT I
nce 1 Agreement No.:	Type Priy Yrly As & when presented DEBIT TYPE PR
nce 2 Branch Name	Z AMOUNT
DD DO	10000
03042019	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.
30032046	Singular as per latest schedule of charges of the bank.
Until Cancelled	Signature primary Account holder Signature of Account holder Signature of Account
onfirm that the declaration has been carefully read,	understood and made by me/us. I am authorising the user entity corporate 18. Von 18. De 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 debt my becount. I have understood that I am authorised to cancellation/amendment regiest to the user entity/corporate or the bank where I have authorized the debti. I/We hereby declare that the above is registered in my/our name(s) rand/or is the number that I/we use in the ordinary course. I/We hereby declare that the above information is true and carried out in my/our aforesaid account(s).