BANK MANDATE FORM

(Please fill in the information in CAPITAL LETTERS. Please TICK wherever it is applicable)

1.	. Name of Member Lending Institution / NBFC:																				
2.	Member ID [As given by CGTMSE]:														_						
3.	Address o	Address of member ID:														_					
	City with pin-code:PAN No.:																				
	GSTIN No.:E-mail id.:																				
	Ph. No. with STD code: Mob. No															-					
4.	Particular	rs of Bank	accou	nt:																	
n	eneficiary – ame of bank ILI																				
1 -	address and in-code				Branch City																
	Type of account (Pl tick)			Saving / Current /Cash Credit				Branch Code [of member id]													
N	IICR No.						<u> </u>			Ţ				1				1			
Α	account Num																				
II	FSC CODE	CODE For RTGS transfer					<u> </u>		1		<u>.l</u>	1	<u> </u>	<u> </u>			1	1			
	For NEF transfer		Γ																		
5.	Date from w	hich the m	andate	should b	e ef	fecti	ve:														
ID par RT per	I hereby of layed or not BI Bank / Orticulars of not GS/NEFT. retaining to MGTMSE).	Corporation ny account I authorize	r reaso Bank/ to facil CGTM	ns of inc SBI Ban litate up- ISE to ca	omp ik re dation redit	lete spor on of the	or inconsible. Frecord procee	orrect in I also is for peds of	inforr unde ourpo Clain	natiertak se o ns to	on, ke to f cr	I shao ad edit	all r vise of a	not l e an imo -me	nolo y c unt entic	Contact hang thro oned	TM ge ir ugh acc	SE / the RBl	/ e [t		
	Certified t	hat particul	lars fur	nished al	bove	are	correc	t as pe	r our	reco	ords	S.									
Ba	nk's stamp (Seal):																			

(Name and Signature of the Authorized Official)

Date: