

(To be issued on Entity Letterhead)

Date:

TO WHOMSOEVER IT MAY CONCERN

Sub: Remittance of Funds collected through Partner Bank / Institutions for _____ [Dept Name]

Dear Sir/ Madam,

In reference to subject mentioned, we confirm that the monies dues to us for all transactions routed through RPP be remitted to our account as per the details mentioned below:

| Bank Account Details | |
|-----------------------|--|
| Entity Name | |
| PAN/TAN Number | |
| GST Number (*) | |
| Beneficiary Name | |
| Beneficiary Bank Name | |
| Branch Address | |
| A/c Number | |
| IFS Code | |

| Details of Nodal Officer for Reporting of Chargeback Cases and Fund Settlements | |
|---|--|
| Name of Person with Designation | |
| Email Id (Multiple if required) | |
| Mobile (Multiple if required) | |

| Payment Modes Required | | | | |
|---|--------------------------------------|-------------------------------------|------------------------------|-----------------------------|
| Internet Banking <input type="checkbox"/> | Credit Card <input type="checkbox"/> | Debit Card <input type="checkbox"/> | UPI <input type="checkbox"/> | QR <input type="checkbox"/> |

Note: - In case of Credit/ Debit cards as a payment mode type, department is liable to follow international norms for chargeback cases against their accepted payments. It is sole responsibility of department to protect chargeback (by providing asked documents like service delivery proof, payment receipt) cases against their payment collected through RPP. RPP/RISL is not responsible for any types of debit against chargeback.

() : - fields are mandatory compliances. Kindly attach required documents also.*

Thanks & Regards

For _____ [Entity]

Name:

Designation:

Bank Certificate

This is to confirm that the above-mentioned Account details are correct. We certify that the signature agrees with the one on our records.

Date:

Place:


 Bank
Seal