







We understand your world

BillPay Registration Form



These fields are to be filled compulsarily.

Full Name			1		1	T	Ĭ		I		Î	Î		11	Î	Ĭ					Ĭ			Ĭ	Ĭ		
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Filling in the following de different Policy Nos. in	ails will e	nable yo	u to av	ail the	BillPa	y facil	ity. Yo	u can use s	pay i	for 5 d arate	iffere	nt bills to rec	unde	r Elec	tricity have	/ Othe	rs 5 i	under one b	Phone	Nos	. (Lan	dline anv.	+ Mob	ile Pho	ones co	mbine	1)& 5 ne (a
combination of 4 alphabe	ts or num	berofyo	urchole	ce) whi	ch will	appe	aron t	heAT	M/PI	none E	Banki	ng scr	een w	hen t	e bill o	detalls	arec	lisplay	ed to I	nelp y	ou lde	ntify	the bill:	while	paying	ı.	
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Electricity Companies Name of Co.		City	
Short Name for the Co.			
Consumer / Account No.			☐ Bill copy
(As provided by the Electricity Co.)			attached
Cycle No. (if applicable)	(
Billing Unit No. (if applicable)			
Mahanagar Gas Ltd.			☐ Bill copy
Short Name for the Co.	(1)		attached
Account No.			
Others			1 7 7
Name of Co.		City	
Short Name for the Co.	TITITIE	0	☐ Bill copy
Ref Field # 2			attached
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Declaration			
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