SBM bank

NACH MANDATE FORM

Please fill in all the required details in BLOCK LETTERS, Tick boxes as applicable

UMRN

Date D D M M Y Y Y Y

Utility Code

◯ Create ◯ Modify ◯ Cancel

Sponsor Bank Code

I / We authorize **SBM Bank (India) Ltd.**

To debit (tick✓) SB / CA / CC / SB-NRE / SB-NRO / OTHER

Bank A/c number

With Bank

IFSC / MICR

an amount of Rupees

₹

Debit Type ☐ Fixed Amount ☐ Maximum Amount

Frequency ☐ Daily ☐ Weekly ☐ Bi-Monthly ☐ Monthly ☐ Quarterly ☐ Half-Yearly ☐ Annually ☐ As & when presented

Reference 1

Reference 2

1. 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. 2. This is to confirm that the declaration has been carefully read, understood & made by me / us. I am authorising the user entity / Corporate to debit my account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorized 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. 4. I/We understand and accept that in case transaction/s initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law (including Negotiable Instrument Act).

From D D M M Y Y Y Y To D D M M Y Y Y Y Maximum period of validity of this mandate is 40 years only

Phone No.

Signature of primary account holder

Signature of account holder

Signature of account holder

1. Name as in bank records

2. Name as in bank records

3. Name as in bank records

Instructions to fill Mandate

1. UMRN is auto generated during mandate creation and is mandatory to be updated during amendment and cancellation of mandate (maximum Length - 20 Alpha Numeric Characters) 2. Date of in DD/MM/YYYY format 3. Sponsor bank IFSC/MICR code, left padded with zeroes where necessary. (Maximum length - 11 Alpha Numeric Characters) 4. Utility Code of the Service Provider. (Maximum Length - 18 Alpha Numeric Characters) 5. Name of Service Provider 6. Tick on box to select type of action to be initiated 7. Tick on box to select type of account to be affected 8. Customer's legal account number, (Maximum length - 35 Alpha Numeric Characters) 9. Name of Bank 10. IFSC/MICR code of customer bank (Maximum Length - 11 Alpha numeric Characters for IFSC & 9 numeric for MICR code.) 11. Amount payable for service or maximum amount per transaction that could be processed in words 12. Amount in figure similar to the amount mentioned in words (Maximum Length - 13 digit numeric in paise) 13. Service Provide generated consumer reference number 14. Service Provide generated Scheme Plan reference number 15. Tick on box to select frequency of transaction 16. Validity of mandate with dates in DD/MM/YYYY format 17. Name of Customer's and signature/s as well as seal of company (where required), (Maximum length of Name - 40 Alpha Numeric Characters) 18. Undertaking by customer 19. Permanent ID of customer e.g. PAN/Aadhar No. 20. Telephone no. with STD code of customer 21. 10-digit mobile number of customer 22. Mail ID of customer.