

Debit Mandate Form NACH



UMRN	F	O	R			O	F	F	I	C	E		U	S	E		O	N	L	Y		Date																													
Sponsor Bank Code	For office use only															Utility Code	For office use only																																		
Tick (✓) Create Modify Cancel	I/We hereby authorize															to debit (tick✓)															SB/CA/CC/SBNRE/SB-NRO/Other																				
Bank a/c number																																																			
with bank		Name of customers bank															IFSC								or MICR																										
an amount of Rupees		Amount in words															₹																																		
Frequency ☐ Mthly ☐ Qtly ☐ H-yrly ☐ Yrly ☐ As & when presented																										Debit Type ☐ Fixed Amount ☐ Maximum Amount																									
Reference 1																	Phone No.																																		
Reference 2																	Email ID																																		
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.																																																			
PERIOD																																																			
From																																																			
To																																																			
Or		Until Cancelled																																																	
													Signature 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												

* This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/Corporate to debit my account, based on the instruction as agreed and signed by me.
* I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate of the bank where I have authorized the debit.

Terms & conditions:

- 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)
- Date is in DD/MM/YYYY format.
- Sponsor bank IFSC/MICR code, left padded with zeroes where necessary (Maximum Length – 11 Alpha Numeric Characters)
- Utility code of the service provider (Maximum Length – 18 Alpha Numeric Characters)
- Name of service provider
- Tick on box to select type of action to be initiated
- Tick on box to select type of account to be affected
- Customer's legal account number (Maximum Length – 35 Alpha Numeric Characters)
- Name of Bank
- IFSC/MICR code of customer bank (Maximum Length – 11 Alpha Numeric Characters for IFSC & 9 Numeric for MICR code)
- Amount payable for service or maximum amount per transaction that could be processed in words
- Amount in figures, similar to the amount mentioned in words (Maximum Length – 13 digit Numeric in paise)
- Service provider generated consumer reference number
- Service provider generated scheme/plan reference number
- Tick on box to select frequency of transaction
- Validity of mandate with dates in DD/MM/YYYY format
- Name of customer/s and signature/s as well as seal of company (where required) (Length of Name – 40 Alpha Numeric Characters)
- Undertaking by customer
- Permanent ID of customer e.g. PAN/Aadhaar No.
- Telephone No. with STD code of customer
- 10 digit mobile number of customer
- Mail ID of customer

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