Mandate Instruction Form for NACH

UMRN | | | | | | | | | | | | | | | | | | | | Date D D M M Y Y Y Y

Tick (✓)
CREATE ☑
MODIFY ☐
CANCEL ☐

Sponsor Bank Code | Utility Code

I/We hereby authorise **IDFC Bank Limited** To debit (tick✓) SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Other ☒

Bank a/c number

With Bank | IFSC | or MICR

an amount of Rupees | ₹

FREQUENCY ☑ Monthly ☒ Quarterly ☒ Halfyearly ☒ Yearly ☒ As & when presented DEBIT TYPE ☒ Fixed Amount ☑ Maximum Amount

Reference 1 | Phone No.

Reference 2 | Email ID

PERIOD
From D D M M Y Y Y Y
To D D M M Y Y Y Y
Or ☒ Until Cancelled

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.

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

1) 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
2) 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

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