

## MANDATE FORM

### ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)/ REAL TIME GROSS SETTLEMENT ( RTGS) FACILITY FOR RECEIVING PAYMENTS

**A. DETAILS OF BANK ACCOUNT HOLDER:-**

NAME OF THE ACCOUNT HOLDER	
COMPLETE CONTACT ADDRESS	
TELEPHONE NUMBER/FAX/MAIL	

**B. BANK ACCOUNT DETAILS**

BANK NAME	STATE BANK OF INDIA
BRANCH NAME WITH COMPLETE ADDRESS, TELEPHONE NUMBER AND EMAIL	CUUTACK CITY BRANCH , COLLEGE SQUARE, CUTTACK-3 TEL NO- 0671-2648993
WHETHER THE BANK IS COMPUTERISED?	YES
WHETHER THE BANK IS RTGS ENABLED? IF YES, THEN WHAT IS THE BRANCH'S IFSC CODE	YES IFSC CODE-SBIN 0001663
IS THE BRANCH IS ALSO NEFT ENABLED?	YES
TYPE OF BANK ACCOUNT (SB/CURRENT/CASH CREDIT )	SAVINGS
COMPLETE BANK ACCOUNT NUMBER (LATEST)	
MICR CODE OF BANK	753002007

**DATE OF EFFECT:-**

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect I would not hold the user Institution responsible. I have read the option invitation letter and agree to discharge responsibility expected of me as a participant under the scheme.

Date: \_\_\_\_\_ ( \_\_\_\_\_ )  
Signature of Customer

Certified that the particulars furnished above are correct as per our records.

(Bank's Stamp) \_\_\_\_\_ ( \_\_\_\_\_ )

Date \_\_\_\_\_ Signature of Bank Manager

Please attach a photocopy of cheque along with the verification obtained from the bank.  
In case your Bank is presently not "RTGS Enabled", then upon its up gradation to "RTGS Enabled" branch, please submit the information again in the above proforma to the Department at earliest.