

**ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)**  
**(MODEL MANDATE FROM)**

EMPLOYEE NAME-----SERVICE ID-----

**PARTUCULARS OF BANK ACCOUNT**

A).BANK NAME-----

B).BRANCH NAME-----

ADDRESS-----

TELEPHONE NO.-----

C). 9-Digit code Number of the Bank and Branch-----

D). ACCOUNT TYPE-----

E). IFSC -----

F). ACCOUNT NUMBER-----

( In lieu of the bank Certificate to be obtained as under please attach a bank cancelled cheque or photocopy of a front page of your saving bank passbook issued by your bank for verification of the above particulars)

**DATE OF EFFECT:**

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effect at all for reason of Incomplete or Incorrect information I would not hold the user institution responsible. I have read option invitation letter and agree to discharge the responsibility expected of me as a participant under the scheme.

(-----)

DATE-----

Signature of the Employee

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

(-----)

Signature of the authorized official from the bank