REFERENCE: ADMN - II/E-PAYMENT/ 2014-15/200				•				DAT	ED :	15/0	9/2014
MANDAI	TE F	OR	M								
ELECTRONIC CLEARING SERVICE (CREDIT CLEA FACILITY FOR REC	ARING EIVIN)/ REA G PAYI	L TIN MEN	AE C FS	ROSS	SET	TLI	EMEN) T	RTG	S)
A. DETAILS OF ACCOUNT HOLDER				•	-	•			-	· · · .	
NAME OF ACCOUNT HOLDER					•						
DESIGNATION								÷.,			
IDENTITY NO	WE	BKLE	E 22	4	\bigcirc		\mathbf{C}	C)	$\left(\right)$)
COMPLETE CONTACT ADDRESS											
TELEPHONE NO. (MOBILE)								•			
EMAIL						-					
		-			Fa siçelərə qərəsi mürkə						
B. BANK ACCOUNT DETAILS											
BANK NAME				•			-				
BANK ADDRESS				••••••							
TELEPHONE NUMBER & EMAIL											
WHETHER THE BRANCH COMPUTERIZED?					-	ting and the state	Attra	-			
WHETHER THE BRANCH IS RTGS ENABLED?				T	<u> </u>				T .	-	
IF YES, THEN WRITE THE ' IFSC'							-	L	L		
IS THE BRANCH ALSO ' NEFT' ENABLED ?											
TYPE OF BANK ACCOUNT (SB/ CURRENT/CC)									-		
COMPLETE BANK ACCOUNT NUMBER											
MICR CODE OF BANK							L.			•	
DATE EFFECT FROM											•
I HEREBY DECLARE THAT THE PARTICULARS GIVEN ABO DELAYED OR NOT EFFECTED AT ALL FOR REASONS OF IN HOLD THE USED INSTITUTION RESPONSIBLE. I HAVE R DISCHARGE RESPONSIBILITY EXPECTED OF ME AS A PAR	Compl Ead ti	ete of He op	R INCO	ORRI S IN	ECT IN VITATI	FORM ON L	A AT	ION, I	WC	ULD	NOT
DATE :	SIGNATURE OF CUSTOMER										
CERTIFIED THAT THE PARTICULARS FURNISHED	ABOV	/E AR	E CO	RRI	ECTA	S PE	R O	UR F	REC	ORE	S.
BANK'S SLAMP		-									
DATE :	SIGNATURE OF BANK AUTHORITY										
1. PLEASE ATTACH A PHOTOCOPY OF CHEQUE ALON	IG WIT	H THE	VERIF	ICA	TION O	BTAI	NEC	FRO	M TH	IE BA	NK.
IN CASE YOUR BANK BRANCH IS PRESENTLY N 2. RTGS ENABLED BRANCH PLEASE SUMIT THE INFO DEPARTMENT AT EARLIEST.	· · · · ·		1 C								