HDFC BANK

UMRN | | |

SECURITY ACH MANDATE

HDFC BANK

UMRN

Date D D M M Y Y Y Y

Utility Code H D F C 0 0 0 1 7 0 0 0 0 0 1 1 0 3

☑ Create ☒ Modify ☒ Cancel

Sponsor Bank Code H D F C 0 0 0 0 0 1 5

I/We hereby authorize HDFC Bank Limited

To Debit (Tick✓) ☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB NRO ☐ Others

Bank A/C Number

with bank Name of customer Bank

IFSC/MICR

an amount of Rupees ₹

Debit Type ☒ Fixed Amount ☑ Maximum Amount

Frequency ☒ Monthly ☒ Quarterly ☒ Half Yearly ☒ Yearly ☑ As & When Presented

Reference 1

Reference 2

1. 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. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity /corporate to debit my account based on the instruction as agreed and signed by me. 3. I have understood that I am authorised 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.

Maximum period of validity of this mandate is 40 years only.

From

To X X X X X X X X

Maximum period of validity of this mandate is 40 years only.

Signature Primary Account holder

Signature of Account holder

Signature of Account holder

Phone No.

1 Name as in Bank Records

2 Name as in Bank Records

3 Name as in Bank Records

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IMPORTANT INSTRUCTIONS FOR FILLING ACH MANDATE FORM

1. **Following fields need to be filled mandatorily in Black and Capital Letters :**
   - Please mention date in format dd/mm/yyyy
   - Please tick bank account type viz SB for Saving Bank, CA for current account .
   - Bank account number valid for ECS/RTGS/NEFT as appearing in account statement.
   - Bank and Branch name where account is held.
   - IFSC/MICR code valid for ACH as per account statement/Cheque.
   - Amount on mandate in words and figure .
   - Reference No 1 – Mention Loan account number
   - Reference no 2 : Mention Loan type
   - Mobile number
   - Period: From -Select Start date in dd/mm/yyyy format EMI date.
   - Period: - To not to be filled.
   - Signature – as per bank records ensure there is no variation in signature from banks records
   - Name: As per Banks records in full and in Capital.
2. In case of Cooperative Banks please check with your bank on IFSC/MICR valid for ACH purposes.
3. In Case of account type – Cash Credit/OD please check with your bank on acceptance of ACH debit mandate on these account type.
4. Please ensure no overwriting on mandate form.
5. Please take printout on good quality A4 paper and tear across the line marked with scissor.
6. Form to be submitted along with copy of latest bank account statement to nearest retail Asset Branch.