

YES/BANK

Cash Management Services

YES TRANSACT

(Standard Services Set up Form)

DATE: DD MM YYYY

Business Segment

☐ BRB ☐ MIB ☐ SEB

☐ Other (Specify)

1. ENTITY DETAILS (Please use CAPITAL letters, all communication will be sent to the address mentioned in bank's records)

ENTITY NAME

MODI HOUSING PVT LTD - SILVER OAK VILLAS PERA

Entry Card ID

MOBILE No

E-MAIL

elkavilasingamodi@modihousing.com

2. Payments Services (If you require authentication is mandatory)

View Only Access (If all below details only if Transaction Access required)

☒ Corporate Net Banking	☒ Tax Payment	☒ EPI	☒ Bill Payment	Beneficiary Advice (Standard)	☒ Yes
☒ Smart Trade (Trade on Net for Trade Clients)	☐ IEC Code	☐	West Region : Yes Bank House, Mumbai (ID: digitaladmin@yesbank.in) Select for Maharashtra, Gujarat and Goa Other Regions : Mount Road, Tamilnadu (ID: digitalops@yesbank.in)	BR. Code 1194	BR. Code 925

☒ Smart Collect	E-Mail ID	enable e-mail alerts
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3. Account Mapping

A/C1	0	0	9	7	7	0	4	0	0	0	0	0	1	3	13
A/C2															
A/C3															
A/C4															
A/C5															

4. User Registration Matrix * self auth only, applicable for makers, for payment users only. Makers with self auth access can approve their own transactions.

User Name	Role (Maker/Checker/View/Verifier)	Mobile No (Unique for each user)	E-Mail ID (Unique for each user)	Authorization Limit (VN)
PAMESH KUMAR		9804942440	modi.p@modihousing.com	

24*7 Transaction Limit: Default Limit Will be Applicable

5. Pricing

One time set charges I/We authorize you to debit above charges from my/our A/c No.

Txn	RTGS	NEFT	IMPS	1000	>25000	Registration	Bill Pay	Bill	Registration	Bill Pay	Bill	Registration	Bill Pay	Bill	Registration
1	1.8	0.5	1	4	6.5	15	3								

Do not mention 'Modi/Housing A/c' for charge code. Limit agreed with bank as per regular agreement etc. If not mentioned above explicitly, A/c 1 is Account Mapping will be considered for debit as applicable.

FOR MODI HOUSING PVT LTD
SILVER OAK VILLAS PERA

Authorized Signatories

We, undersigned hereby confirm that above facilities offered are assessed for the said customer & confirm that the customer is eligible for the above facilities.

FOR OFFICE USE ONLY:	Name	Emp ID / Branch Code	Emp E-Mail /CORPORATE E-Mail ID	Signature
PSM				
RM				
Branch				
Remarks				

CASH MANAGEMENT SERVICES & TRADE FINANCE

YES/BANK

Standard Terms & Conditions