ADITYA BIRLA CAPITAL
PROTECTING INVESTING FINANCING ADVISING

UMRN | Date

Sponsor Bank Code: INDB0000098 | Utility Code: INDB00477000028001

Tick(✓)

CREATE ✓
MODIFY
CANCEL

I/We hereby authorise: ADITYA BIRLA FINANCE LIMITED to debit (tick✓) SB /CA /CC /SB-NRE /SB-NRO /Other

Bank A/C number

with Bank: Name of customers bank IFSC | or MICR

an amount of Rupees | ₹

FREQUENCY ☐ Mthly ☐ Qtly ☐ H-Yrly ☐ Yrly ☐ As & when presented

DEBIT TYPE ☒ Fixed Amount ☑ Maximum Amount

Reference 1 | Phone No.

Reference 2 | Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorising to debit my account as per latest schedule of charges of the bank

PERIOD
From
To
Or ☐ Until Cancelled

Signature Primary Account holder | Signature of Account holder | Signature of Account holder

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

- This is to confirm that the declaration has been carefully read, understood and 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.
- I have understood that I am authorized 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.

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Instructions to fill Mandate

- Unique Mandate Reference Number (UMRN) to be provided on the physical mandate, only in case of mandate cancel/amend
- Date in DD/MM/YYYY format
- Tick on box to select type of account to be affected i.e. SB/CA/SB-NRE etc
- Customer's complete a/c number as provided on his/her cheque leaf
- Name of Bank and Branch - 10. I FSC / MICR code of customer bank. (Maximum length – 11/9 Alpha Numeric Characters)
- Amount payable for service or maximum amount per transaction that could be processed, in words
- Amount in figures, similar to the amount mentioned in words. (Maximum length -13 digit Numeric)
- Service Provider generated consumer reference number / Scheme/ Plan reference number (Non Mandatory)
- Name and Signature of primary/jointly managed a/c holder

bsi. ISO 9001 Quality Management
FS 597341

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