KARVY STOCK BROKING

Banker Copy

KARVY

Auto Debit Form - NACH Registration

UMRN | | | F | o | r | | o | f | f | i | c | e | | u | s | e | | | | | Date D D M M Y Y Y Y

Sponsor Bank Code: For Office Use Utility Code: For Office Use

Tick (✓)
- CREATE ☐
- MODIFY ☐
- CANCEL ☐

I/We hereby authorize _____ 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 ☐ Qylt ☐ H-Yrly ☐ Yrly ☐ As & when presented DEBIT TYPE ☐ Fixed Amount ☐ Maximum Amount

Reference 1: Name Mobile No.

Reference 2 Email ID

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.

PERIOD
- From D D M M Y Y Y Y
- To D D M M Y Y Y Y
- 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 & made by me/us. I am authorizing the User entity/Corporate to debit my account based on the instructions as agreed and singed 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 of the bank where I have authorized the debit

Declaration

*I hereby declare that the particulars given on this mandate are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold Karvy Stock Broking Ltd., their representatives, service providers, participating banks & other user institutions responsible. I have read the Terms & Conditions and agree to discharge the responsibility expected of me as a participant/s under the scheme. I authorize use of above mentioned contact details for the purpose of this specific mandate instruction processing. I hereby confirm adherence to terms on this mandate.

Authorisation to Bank: I wish to inform you that I have registered with Karvy Stock Broking Ltd. for ECS / NACH / Direct Debit through their authorised Service Provider(s) and representative for my/our payment to the above mentioned beneficiary by debit to my/our above mentioned bank account. For this purpose I hereby approve to raise a debit to my/our above mentioned account with your branch. I hereby authorize you to honour all such requests received through to debit my/our account with the amount requested, for due remittance of the proceeds to the beneficiary.\

Instructions to fill Mandate:

1. UMRN is auto generated (filled by Office) during mandate creation and is mandatory to be updated during amendment and cancelation of mandate.
2. Date DD/MM/YYYY format.
3. Sponsor Bank IFSC/MICR Code left padded with Zeroes where necessary. (Eg.in case of IFSC code is IBKL00054 00IBKL00054)
4. Utility code is filled by the Service provider and must be left blank.
5. Select the type of bank account.
6. Customers Bank account number, left padded with zeroes (For example if the account number is 345586, all the left blank cells have to be filled with zeroes like 00000000000000000000345586.
7. Name of Bank and Branch
8. IFSC / MICR code of customer bank.
9. Amount payable or maximum amount per transaction that could be processed in words.
10. Amount payable or maximum amount per transaction that could be processed in figures.
11. Tick on box to select frequency of transaction
12. Service provider generated Reference number.
13. Service provider generated Reference number /scheme/ plan.
14. Email ID and Phone number of Customer.
15. Period for validity of mandate.
16. Name(s) of customer(s) and signature(s).

Client Code (UCC): _____

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DECLARATION:

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

Signature of the Applicant: _____

Client Code (UCC):	