

MANDATE FORM

BY

VENDOR / CONTRACTOR / EMPLOYEE FOR
EFT / ECS / RTGS / NEFT PAYMENT

1. NAME OF THE FIRM / PERSON / PARTY.....
.....

2. ADDRESS: (The same should be mentioned in all bills).....
.....

TELEPHONE NO & FAX:

CELL PHONE.....E-mail.....

3. P.A.N.....

4. PARTICULARS OF BANK ACCOUNT:

(i)BANK NAME:

(ii)BRANCH NAME & ADDRESS:
.....

(iii)BANK BRANCH TELEPHONE NO.:

(iv) ACCOUNT TYPE (whether SB or Current):

(v) ACCOUNT NO.:

(vi) BANK'S MICR CODE:

(vii)BANK'S IFS CODE:

5. DECLARATION OF THE PARTY:

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not affected at all for reasons of incomplete and incorrect information, the User Institution i.e., S.E.RAILWAY will not be held responsible. I have understood the scheme and agree to discharge the responsibility for which I am liable as a participant under the scheme.

Date:

Signature of the Supplier/Party/Employee

N.B.:(i) One original cancelled Cheque is to be enclosed [where the cheque carry IFS Code & Account No. should be given.

(ii) Photocopy of PAN Card is to be enclosed.

(iii) Photocopy of Trade License is to be enclosed [where PAN Card is not in favor of the Firm.]

SIGNATURE OF BANK OFFICIAL