

**Note: Please print it on Letterhead of Institute**

**MANDATE FORM/ AGREEMENT**

**ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)/ REAL TIME GROSS SETTLEMENT (RTGS) FACILITY FOR RECEIVING PAYMENTS**

**A. DETAILS OF ACCOUNT HOLDER:**

<b>Name of Account (Designation/Institution name)</b>	
<b>Institute AISHE Code</b>	
<b>Type of Institute (Technical /Non-Technical)</b>	
<b>Complete Contact Address</b>	
<b>Telephone / Email</b>	<b>Mob: Email:</b>

**B. BANK ACCOUNT DETAILS**

<b>Bank name</b>	
<b>Branch name with complete Address</b>	
<b>Whether branch is computerized</b>	
<b>What is the branch's <u>RTGS CODE</u> <u>IFSC CODE</u></b>	
<b>If this branch NEFT enable</b>	
<b>Type of Bank Account</b>	
<b>Complete bank Account no.</b>	
<b>MICR Code of Bank</b>	
<b>PAN Card Number</b>	
<b>TIN/TAN Number</b>	

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 responsibility expected of me as a particular under the Scheme. The Utilization Certificate for the funds received shall be submitted as when required.

Seal/Signature of UBA Coordinator of PI

Certified that the particulars furnished above are correct as per records.

Seal/Signature of Authorized Person of Institute