NACH MANDATE FORM

RBL BANK
apno ka bank

UMRN														Date	D	D	M	M	Y	Y	Y	Y

Utility Code N A C H 0 0 0 0 0 0 0 0 0 6 2 4 8 7

Create ✔ Modify ✘ Cancel ✘

Sponsor Bank Code R A T N 0 T R E A S U   I/We hereby authorize   **RBL BANK LIMITED**

To Debit (Tick✔) SB / CA / CC / SB-NRE / SB-NRO / OTHER   **Bank A/c Number**

With bank | Name of Customer's Bank | **IFSC/MICR**

an amount of Rupees | Amount in words | ₹ | Amount in figures

Debit Type ☒ Fixed Amount   ✔ Maximum Amount   **Frequency** ☒ Mthly ☒ Qtly ☒ H-Yrly ☒ Yrly ✔ As & When presented

Reference 1 RBL Bank Credit Card Number   **Reference 2**

1. 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.
2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me.
3. 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.

From

To

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

Phone No.

1 Name as in bank Records   2 Name as in bank Records   3 Name as in bank Records

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I unconditionally authorize RBL Bank to raise debits on my account as mentioned in the attached ECS / NACH form every month by way of ECS / NACH towards payment of my RBL Credit Card Account mentioned above to the extent of:

☐ **Minimum Amount Due**   ☐ **Total Amount Due**

I further confirm that in the event in any month the ECS/NACH instruction is not carried out, I hereby authorize RBL Bank to raise a further demand on above account till the payments for that month is realized. If any transaction is delayed or not effected, for reasons of incomplete or incorrect information, I shall not hold RBL Bank responsible for such delay or failure.

In case no selection is made , then default TAD would be considered.

Signature _____   **Date** _____

Please turn over to check the Instructions

IMPORTANT INSTRUCTIONS FOR FILLING NACH MANDATE FORM

1. All fields are mandatory and need to be filled:
- Date in DD/MM/YYYY format.
- Name as per bank records in full and capital letters
- Bank account type viz. SB for Savings Bank account, CA for Current account
- Bank account number valid for ECS/RTGS/NEFT as appearing in account statement
- Name as per the Bank where the account is held
- IFSC/MICR code valid for ACH as per account statement/Cheque
- Amount on mandate in words and figures required
- Credit Limit in the Amount section
- Reference no.1- Mention the 16 digit number of RBL Credit Card
- 10 digit mobile number
- Signature - as per bank records
- Tick MAD or TAD with signature and date

2. In case of Cooperative Banks, please check with your bank on IFSC/MICR valid for ACH purposes

3. In case of account type - Cash Credit/OD check with your bank on acceptance of ACH debit mandate on these account types

4. Please ensure that there is no overwriting in the mandate form

5. Kindly print the form in a good quality A4 Sheet

6. Courier the form along with a copy of a cancelled cheque to the address mentioned below:
   Manager, Card Operations
   Credit Card Services,
   RBL Bank Ltd.
   1st Floor, C-57,
   Sector-57, Noida – 201301