

DIRECT DEBIT MANDATE FORM



To,
The Manager
IDFC Bank Limited,

_____ Branch

Ref: _____

I/We hereby authorise you to debit my/our account for making payment to IDFC Bank Limited through the direct debit clearing as per the details mentioned herein under. I/We authorise IDFC Bank Limited to raise demands from me/us till all my/our dues to IDFC Bank Limited as referred herein are cleared through the direct debit from my/our account.

I/We unconditionally consent and authorise IDFC Bank Limited to raise debits for such amounts as may be calculated by IDFC Bank Limited from time to time. However, the debits of such amount shall not exceed Rs. _____/- (Rupees _____ only) per month.

I/We declare that the particulars given herein are correct and complete. If any direct debit transaction is delayed or not effected for reasons of incomplete or incorrect information, I/we shall not hold you responsible. I/We authorise you to debit my/our account towards such charges as may be determined by you for the service of direct debit.

I/We authorise IDFC Bank Limited and their representatives, agents, service providers etc. to get this form verified and acknowledged from your Bank.

NAME OF ACCOUNT HOLDER(S) _____

ACCOUNT NUMBER _____

ACCOUNT TYPE _____

LOAN ACCOUNT NUMBER _____

DATE OF EFFECT _____

Loan Type and Details	Periodicity (Monthly/Quarterly)	Amount of Upper Limit	Valid Up to	Date of Period

SIGNATURE OF ACCOUNT HOLDER (1)

SIGNATURE OF ACCOUNT HOLDER (2)

Place _____

Date
D D M M Y Y Y Y

Place _____

Date
D D M M Y Y Y Y

We hereby certify that the particulars and signature(s) furnished above are as per our records.

Date
D D M M Y Y Y Y

Bank Stamp and Signature of Authorised Official