

Debit Mandate Form NACH/ ECS/ DIRECT DEBIT



UMRN

Date

Tick (✓) Sponsor Bank Code Utility Code

CREATE /I/We hereby authorize **CAPRI GLOBAL HOUSING FINANCE LIMITED** to debit (tick✓) SB/ CA/ CC/ SB-NRE/ SB-NRO/ Other

MODIFY Bank a/c number

CANCEL

with Bank IFSC or MICR

an amount of Rupees ₹

FREQUENCY Mthly Qtly H-Yrly Yrly As & when presented DEBIT TYPE Fixed Amount Maximum Amount

Reference 1 Phone 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

To

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.
 • 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.

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