Debit Mandate Form NACH

UMRN [For Office use only] Date D D M M Y Y Y Y

Tick(✓)

CREATE
MODIFY
CANCEL

Sponsor Bank Code [For Office use only] Utility Code [For Office use only]

I/We hereby authorize: FUTUREWISE TECHNOLOGIES PRIVATE LIMITED to debit (tick✓) **SB / CA / CC / SB-NRE / SB-NRO / Other**

Bank A/c No.:

With Bank: [Bank Name & Branch] **IFSC** OR MICR

an amount of Rupees [In Words] ₹ [In Figures]

FREQUENCY ☒ Mthly ☒ Qtly ☒ H. Yrly ☒ Yrly ☑ As & when presented DEBIT TYPE ☐ ~~Fixed Amount~~ ☑ Maximum Amount

Reference 1 **Mobile**

Reference 2 **Email id**

I agree for the debit of mandate processing charges by the bank whom I am authorising to debit my account as per latest schedule of charges of the bank.

PERIOD

From D D M M Y Y Y Y

to D D M M Y Y Y Y

or ☐ ~~Until Cancelled~~

1. Signature of Account Holder 2. Signature of Account Holder 3. Signature of Account Holder

1. Name of Account Holder 2. Name of Account Holder 3. Name of Account Holder

Declaration: This is to confirm that the declaration has been carefully read, understood and made by me/us. I/We hereby declare that the particulars given on this mandate are correct and complete, if the transaction is delayed or not effected at all for reasons of incorrect or incomplete information, I/We would not hold Futurewise Technologies Private Limited/ participating banks responsible. I/We authorize the use of the above mentioned contact details for the purpose of this specific mandate processing. I/We have understood that I/we are authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity or the bank where I/We have authorised the debit and express My/Our willingness and authorize to make payments through participation in NACH. I/We authorize the representatives of Futurewise Technologies Private Limited carrying this mandate form to get it verified and executed.