BAJAJ FINANCE LTD.
4th Floor, Bajaj Finserv Corporate Office,
Off Pune-Ahmednagar Road, Viman Nagar,
Pune – 411 014 (Maharashtra)
Tel No. 020 -30405060 / 30405261 / 30405221

DIRECT DEBIT /ECS (DEBIT CLEARING) MANDATE FORM

The Manager
Bank Name : _____
Branch Address : _____
_____
Branch City : _____
Pin Code | | | | | | | :

(Please write the address of the bank's branch as per the cancelled cheque attached.)

I hereby authorize you to debit my account for making payment to **BAJAJ FINANCE LIMITED** through Direct Debit / ECS (Debit clearing) as per the details given as under

A. 9 DIGIT MICR CODE NUMBER OF THE BANK BRANCH : | | | | | | | | | |
(Please write MICR Code of 9 digit number appearing after cheque number in cancelled Cheque. Confirm MICR code with your banker. MICR Code starting and / or ending with 000 are not valid for ECS)

B. ACCOUNT TYPE : _____
(Savings Account/ Current Account / Cash Credit)
(10) (11) (13)

C. LEDGER NO. / LEDGER FOLIO NO. : _____

D. ACCOUNT NO. (If Bank A/c No. is changed due to core banking confirm with the Bank & write correct A/c. The A/c no written here should match with cancelled cheque attached)

Name of Scheme	Date of Effect (DD/MM/YYYY)	Periodicity (M/BiM/Qly/etc.)	Amount of Installment with Upper Limit	Valid up to (DD/MM/YYYY)

E. DATE OF EFFECT (DD/MM/YYYY) : _____

F. NAME OF ACCOUNT HOLDER AS IN BANK RECORDS :_____
NAME OF THE JOINT ACCOUNT HOLDER (IF ANY) :_____
NAME OF THE BORROWER :_____
CONTACT NUMBER OF THE ACCOUNT HOLDER :_____
(Mobile Number / Residential Telephone Number)
EMAIL ID OF THE ACCOUNT HOLDER :_____

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 the responsibility expected of me as a participant under the scheme.

Date: Signature of Account Holder Signature of Joint Account Holder (if any)
(Signature should match with the signature in Bank Records)

Certified that the bank A/c details like A/c Number, A/c Holder Name, A/c Type and MICR code are correct as per our records.

(Bank's Stamp)
Date: Signature of the Authorized official from the Bank

Loan Account Number: (to be filled by BFL) | | | | | | | | | | | | | | |

(Mandate to be obtained in 2 copies from customer)