

MANDATE FORM

**ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)/REAL TIME GROSS SETTLEMENT (RTGS) FACILITY FOR RECEIVING PAYMENT**

**A - DETAIL OF ACCOUNT HOLDER:-**

NAME OF ACCOUNT HOLDER	D.D.O., D/o Social Justice & Emp.
COMPLETE CONTACT ADDRESS	242, Shastri Bhawan, N D
TELEPHONE NUMBER/FAX/EMAIL	011-23382895

**B - BANK ACCOUNT DETAILS:-**

BANK NAME	STATE BANK OF INDIA
BRANCH NAME WITH COMPLETE ADDRESS	SHASTRI BHAWAN, NEW DELHI
TELEPHONE NUMBER AND MAIL	011-23073723
WHETHER THE BRANCH IS COMPUTERISED	YES
WHETHER THE BRANCH IS RTGS ENABLED IF YES THEN WHAT IS THE BRANCH IFSC CODE	SBIN0050203
IS THE BRANCH ALSO NEFT ENABLED	YES
TPE OF BANK ACCOUNT (SB/CURRENT/CASH CREDIT)	SB
COMPLETE BANK ACCOUNT NUMBER (LATEST)	65121695912
MICR CODE OF BANK	110002742

**DATE OF EFFECT:-**

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 responsibility expected of me as a participant under the scheme.

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SIGNATURE OF CUSTOMER  
**UPENDRA NATH PANDEY**  
Drawing & Disbursing Officer  
W/o. Social Justice & Empowerment  
Govt. of India, New Delhi  
Code: 212437

DATE:-

Certified that the particulars furnished above are correct as per our records.

(Bank's Stamp)

.....  
SIGNATURE OF CUSTOMER

DATE:-

1. Please attach a photocopy of cheque along with the verification obtained from the bank.
2. In case your Bank Branch is presently no 'RTGS Enabled', than upon it's up gradation to 'RTGS Enabled', branch, please submit the information again in the above proforma to the Department at earliest.