

MANDATE FORM FOR ECS PAYMENT / REFUND OF EMD

From (Firm's name with full address)

To,

MD SIIDCUL

Sub:- Payment through NEFT/RTGS/ECS system.

Ref.No/ Advt.No- _____

Kindly arrange the payment against refund of our EMD through NEFT/RTGS/ECS system. The details of our banker are as under:

- (i) Tender Advt. No. for which payment is due: _____
- (ii) Bank Name: _____
- (iii) IFSC Code: _____
- (iv) Bank address and telephone number: _____
- (v) 9 digit MICR code No. of the bank branch: _____
- (vi) Type of account (Saving/Current): _____
- (vii) Ledger Folio No. _____
- (viii) Account No. along with proof _____
(Photocopy of blank cheque)
- (ix) Account Holder Name /Beneficiary Name: _____

(Authorized Signatory)

Date: