LokSuvidha UMRN		Date D D M M Y Y Y Y
Tick(✓) Sponsor Bank Code	Utility Code	UTIB00213000011670
CREATE	TED	to debit (tick /) SB/CA/CC/SB-NRD/SB-NRO/Other
CANCEL Bank a/c number		
with Bank IFSC		or MICR
an amount of Rupees ₹		
FREQUENCY X Mthly XQtly X H-Yrly X Yrly Y As & when Presented	DEBIT	TYPE X Fixed Amount 🗹 Maximum Amount
Reference 1	Ph	one No.
Reference 2	En	nail ID
PERIOD 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"		
From D D M M Y Y Y Y		
To D D M M Y Y Y Y Signature Primary Account Holder	Signature of	f Account Holder Signature of Account Holder
Or Until Cancelled 1. Name as in bank records 2 * This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/Corporate to		n bank records 3. Name as in bank records on the instructions as agreed and signed by me.
* 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.		
* *		
LokSuvidha UMRN		Date D D M M Y Y Y Y
Tick(✓) Sponsor Bank Code	Utility Code	UTIB00213000011670
CREATE	TED	to debit (tick) SB/CA/CC/SB-NRD/SB-NRO/Other
CANCEL Bank a/c number		
with Bank IFSC		or MICR
an amount of Rupees		₹
FREQUENCY X Mthly XQtly X H-Yrly X Yrly 7 As & when Presented	DEBIT	TYPE 🗵 Fixed Amount 🗹 Maximum Amount
Reference 1	Ph	one No.
Reference 2	En	nail ID
PERIOD "I agree for the debit of mandate processing charges by the bank whom I am authorizing to deb	t my account as per	latest schedule of charges of the bank"
From D D M M Y Y Y Y		
To DDMMMYYYYY Signature Primary Account Holder	Signature of	f Account Holder Signature of Account Holder
* 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, based of	
* I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment reques	t to the User entity/corpor	
* *		×
LokSuvidha UMRN		Date D D M M Y Y Y Y
Tick(✓) Sponsor Bank Code	Utility Code	UTIB00213000011670
CREATE V I/We hereby authorise LOK SUVIDHA FINANCE LIMI	TED	to debit (tick) SB/CA/CC/SB-NRD/SB-NRO/Other
CANCEL Bank a/c number		
with Bank IFSC		or MICR
an amount of Rupees		₹
FREQUENCY X Mthly XQtly X H-Yrly X Yrly 7 As & when Presented	DEBIT	TYPE 🕱 Fixed Amount 🗹 Maximum Amount
Reference 1	Ph	one No.
Reference 2	En	nail ID
PERIOD "I agree for the debit of mandate processing charges by the bank whom I am authorizing to deb	t my account as per	latest schedule of charges of the bank"
From D D M M Y Y Y Y		
To D D M M Y Y Y Y Signature Primary Account Holder		f Account Holder Signature of Account Holder
Or Until Cancelled 1. Name as in bank records 2 * 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, based of	on the instructions as agreed and signed by me.
* I have understood that I am authorized to cancel/amend ths mandate by appropriately communicating the cancellation/amendment reques	t to the User entity/corpor	ate or the bank where I have authorized the debit.