

ECS – FORMAT
(All the point are to be filled up)

1. VENDOR'S NAME :
2. ADDRESS:
3. VENDOR'S REGN. CODE WITH GRSE:
4. DESIGNATED BANK ACCOUNT NAME:
5. BANK DETAILS :

NAME OF THE BANK:

BANK BRANCH ADDRESS:

9 DIGITS MICR CODE FOR PAYMENT:

IFSC / NEFT CODE:

BANK A/C NO:

| | | |
|---------|---------|------------------|
| | | |
| SAVINGS | CURRENT | OTHERS* |
| | | (* Give Details) |

DATE OF EFFECT:

NOTE: (A) ENCLOSE BANK'S VERIFICATION OF A/C DETAILS AS PER FORMAT APPENDED BELOW.*

(B) (ENCLOSE ONE COPY OF RELEVANT CHEQUE LEAF)

We, hereby, declare that particulars given above are correct and complete. If the transaction is delayed or not effected at all for reason of incomplete or incorrect information, we would not hold the user institution responsible.

Date:

Signature of the Authorised Signatory of the Vendor.

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

BANK'S STAMP

Date:

SIGNATURE of the Authorised Official of the Bank