

**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<br>(DD/MM/YYYY) | Periodicity<br>(M/BiM/Qly/etc.) | Amount of Installment with<br>Upper Limit | Valid up to<br>(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)