

MANDAT FORM

FORMAT FOR ACCOUNT DETAILS OF THE APPLICANT TO RECEIVE PAYMENTS THROUGH CREDIT CLEARAIING MACHANISM.

1. SCHEME NAME: : REVISED INTEGRATED HOUSING SCHEME (RIHS-2016)

2. (a) WORKER'S NAME WITH COMPLETE ADDRESS, CONTACT TELEPHONE NO. AND E.MAIL ID. (if any) : NAME-
FATHER/SPOUSE-
AT:
POST:
VIA:
DIST:
PIN :

(b) IDENTITY CARD NO/BR NO : MANAGEMENT/UNIT NAME:

3. PARTICULARS OF BANK ACCOUNT

A. BANK NAME & ADDRESS. : BRANCH NAME
AT:
POST:
VIA:
DIST:
PIN :
TELEPHONE NO.

B. ACCOUNT NO.(AS APPEARING ON THE PASS BOOK/CHEQUE BOOK) (XEROX COPY TO BE ENCLOSED) :

C. IFSC CODE NO. :

D. ACCOUNT TYPE : Saving Bank A/c Other

E. AADHAR CARD NO. (XEROX COPY TO BE ENCLOSED) : YES NO

F. SEEDED WITH AADHAR NUMBER : YES NO

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.

DATE:

Signature of the worker