



ELECTRONIC CLEARING SERVICE (CREDIT CLEARING) MANDATE FORM

Please fill in the information in the CAPITAL letters

The Manager,

(Bank Name) _____
 (Branch Name) _____
 Address _____
 Telephone No _____

I/we, (*Account Holder Name) _____ (as per Bank records)
 hereby authorise you to credit my account for interest payment by " **DEWAN HOUSING FINANCE CORPORATION LIMITED**" through
 ECS (credit) clearing as per details given as under.

A. * 9-DIGIT CODE NUMBER OF THE BANK & BRANCH
 (Appearing on the MICR cheque issued by the Bank)

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B. ACCOUNT TYPE

(Saving : (10 / 31) / Current or Overdraft : (11 / 29 / 41) / Cash Credit : (13) / NRE / NRO (NRE / NRO)

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C.*ACCOUNT NO. (as per bank records)

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Name of the Scheme	Date of Effect	Periodicity	Amt. of Instalment with upper limit
FD (Interest)			

I/we 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/we would not hold the user institution responsible. I/we hereby agree to discharge the responsibility expected of me/us as a participant under the scheme.

(_____) (_____) (_____) (_____)

Signature of the FD Holder (in case of Joint A/c holders, Signature is required of all A/c holders.)

Date:

Signature of the Authorised Official from the Bank

Note : 1. Mandate to be obtained in two copies, Original for HO, another for DHFL Branch.

2. Copy of Cancelled Cheque of above bank account should be attached with this Mandate Form)

For DEWAN HOUSING FINANCE CORPORATION LTD. Use Only

Name of the FD Holder: _____ Joint FD Holder Name : _____
 Communication Address: _____
 Mobile No : _____ Mobile No : _____
 E mail ID : _____ E mail ID : _____
 Bank Name : _____ Branch : _____
 FD Receipt No.

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 Branch Code :

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Branch (DHFL) _____

Fresh Swap : In case of swap previous mode

* Mandatory Field