

TO

**STOCK HOLDING CORPORATION OF INDIA LIMITED**

**CLIENT'S MANDATE FORM FOR DIRECT PAYMENT OF DEPOSITORY PARTICIPANT BILLS THROUGH ELECTRONIC CLEARING SCHEME**

1) Client Name : (Name of the First Holder)	2) Depository Name (NSDL/CDSL) :
3) DP ID :	4) Client Account No:
5) Particulars of Bank Account : (It should be the same bank as given in the account opening form) Bank Name :	
Bank Branch :	
9 Digit MICR Code :	
Bank Account Number :	
Type of A/C (Saving/Current/Cash Credit) with code 10/11/13 :	

I hereby express my willingness to settle the payment of depository participant bills raised on the client account number referred to above through my bank account as mentioned above for Direct Payment of my Depository Participant Bills.

I hereby authorise Stock Holding Corporation of India Limited to raise the debits on my above account.

The instruction will remain in force till further notice from me, which will be delivered to you in writing against your acknowledgment.

I understand that the Bank's responsibility ends with making payment of the bill and it will no way be responsible for any dispute between Stock Holding Corporation Of India Ltd and me.

I hereby authorise my Bank to honour the debits raised for payment of depository participant bills.

\_\_\_\_\_  
Signature of First Account Holder  
(As per SHCIL records)

\_\_\_\_\_  
Signature of Second Account Holder  
(As per SHCIL records)

\_\_\_\_\_  
Signature of Third Account Holder  
(As per SHCIL records)

\_\_\_\_\_  
Signature of Account Holder  
(As in Bank Records)\*

\_\_\_\_\_  
Signature/s of Joint Account Holder/s  
(As in Bank Records)\*

\* Where the bank account mentioned above is operated jointly, the signatures of the joint holders are also required

For use of Bank only

Standing instructions accepted by us and the Bank A/C No. & signature of a/c holder has been verified. Branch :

Date:

\_\_\_\_\_  
Authorised Signatory of Bank with Bank Stamp

**For Office Use only (Not to be filled in by Client)**

Recorded on \_\_\_\_\_

Recorded By \_\_\_\_\_

**Note :**

- 1)The client's bank branch should participate in Electronic Clearing Scheme (Debit Clearing) of RBI.
- 2) The client will submit the ECS debit mandate form duly countersigned by his bank as having noted his ECS debit mandate.
- 3) If any field in bank particulars (point 5 in ECS mandate form) is not preprinted, please manually enter and attach a photocopy of a blank cheque leaf.
- 4) Please arrange to submit the ECS mandate form duly filled and signed to the nearest SHCIL Branch.