

## **ECS FORMAT**

VENDOR'S NAME : .....  
ADDRESS : .....  
VENDOR'S REGN. CODE NO. WITH GRSE : .....  
DESIGNATED BANK ACCOUNT NAME : .....  
BANK ACCOUNT NO. : .....  
NATURE OF ACCOUNT : SAVINGS / CURRENT / OTHERS \*  
\* give details.  
NAME OF BANK : .....  
BANK BRANCH ADDRESS : .....  
BANK CODE NO. : .....  
MICR NO. (9 DIGITS) FOR PAYMENT : .....  
BANK IFSC CODE FOR NEFT : .....  
BANK IFSC CODE FOR RTGS : .....  
E-MAIL ID OF BANK BRANCH : .....  
BANK CONTACT PERSON & TELEPHONE NO. : .....  
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.

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.

(.....)

Signature of the Authorised Signatory of the Vendor

Date :

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

BANK'S STAMP : (.....)

SIGNATURE OF THE AUTHORISED OFFICIAL OF THE BANK

Date :