

	AXIS BANK		UMRN																	Date																
			Sponsor Bank Code	UTIB0000248																Utility Code	UTIB00256000012104															
	Tick (✓)		I/We hereby authorize	AXIS FINANCE LIMITED																to debit (tick ✓)	SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other <input type="checkbox"/>															
	CREATE MODIFY CANCEL		Bank a/c number																																	
		with Bank	Name of customers bank																IFSC					or MICR												
		an amount of Rupees	in words																₹																	
		FREQUENCY	<input type="checkbox"/> Mthly <input type="checkbox"/> Qtly <input type="checkbox"/> H-Yrly <input type="checkbox"/> Yrly <input type="checkbox"/> As & when presented																DEBIT TYPE	<input type="checkbox"/> Fixed Amount <input type="checkbox"/> Maximum Amount																
		Reference 1																	Phone No.																	
		Reference 2																	Email ID																	
		PERIOD	I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank*																																	
		From																																		
		To																																		
		Or	<input type="checkbox"/> Until Cancelled				1. Name as in bank records 2. Name as in bank records 3. Name as in bank records																													
		This is to confirm that the declaration has been carefully read ,understood and made by me/us .I am authorizing the User entity / Corporate to debit my account. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity/ Corporate or the bank where I have authorized the debit.																																		

	AXIS BANK		UMRN																	Date																
			Sponsor Bank Code	UTIB0000248																Utility Code	UTIB00256000012104															
	Tick (✓)		I/We hereby authorize	AXIS FINANCE LIMITED																to debit (tick ✓)	SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other <input type="checkbox"/>															
	CREATE MODIFY CANCEL		Bank a/c number																																	
		with Bank	Name of customers bank																IFSC					or MICR												
		an amount of Rupees	in words																₹																	
		FREQUENCY	<input type="checkbox"/> Mthly <input type="checkbox"/> Qtly <input type="checkbox"/> H-Yrly <input type="checkbox"/> Yrly <input type="checkbox"/> As & when presented																DEBIT TYPE	<input type="checkbox"/> Fixed Amount <input type="checkbox"/> Maximum Amount																
		Reference 1																	Phone No.																	
		Reference 2																	Email ID																	
		PERIOD	I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank*																																	
		From																																		
		To																																		
		Or	<input type="checkbox"/> Until Cancelled				1. Name as in bank records 2. Name as in bank records 3. Name as in bank records																													
		This is to confirm that the declaration has been carefully read ,understood and made by me/us .I am authorizing the User entity / Corporate to debit my account. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity/ Corporate or the bank where I have authorized the debit.																																		

	AXIS BANK		UMRN																	Date																
			Sponsor Bank Code	UTIB0000248																Utility Code	UTIB00256000012104															
	Tick (✓)		I/We hereby authorize	AXIS FINANCE LIMITED																to debit (tick ✓)	SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other <input type="checkbox"/>															
	CREATE MODIFY CANCEL		Bank a/c number																																	
		with Bank	Name of customers bank																IFSC					or MICR												
		an amount of Rupees	in words																₹																	
		FREQUENCY	<input type="checkbox"/> Mthly <input type="checkbox"/> Qtly <input type="checkbox"/> H-Yrly <input type="checkbox"/> Yrly <input type="checkbox"/> As & when presented																DEBIT TYPE	<input type="checkbox"/> Fixed Amount <input type="checkbox"/> Maximum Amount																
		Reference 1																	Phone No.																	
		Reference 2																	Email ID																	
		PERIOD	I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank*																																	
		From																																		
		To																																		
		Or	<input type="checkbox"/> Until Cancelled				1. Name as in bank records 2. Name as in bank records 3. Name as in bank records																													
		This is to confirm that the declaration has been carefully read ,understood and made by me/us .I am authorizing the User entity / Corporate to debit my account. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity/ Corporate or the bank where I have authorized the debit.																																		