Form No. E-5 **Appendix - VIII**

Ref.No: DHFL/ 09-10 / _____

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)

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

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

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. | | | | | | | | | | | | Branch Code : | | | |

Branch (DHFL) _____

Fresh **Swap :** **In case of swap previous mode**

*** Mandatory Field**