आधार हाउसिंग फाइनेंस लि. Aadhar Housing Finance Ltd.
A DHFL Group Company

Ref No. : AHFL/_____

ELECTRONIC CLEARING SERVICE (DEBIT CLEARING) MANDATE FORM

The Manager,

(Bank Name) _____

(Branch Name) _____

This is to inform that I/We, (* A/c Holder Name) have registered for the RBI's Electronic Clearing Service (Debit) Clearing / Direct Debit facility to make payment towards Loan repayment instalment in "**AADHAR HOUSING FINANCE LTD**" and the same shall be made from my/our below mentioned bank account with your bank. I/We authorise the representative carrying this **ECS (Debit) Clearing / RECS / Direct Debit** mandate form to get it verified & executed.

Bank Account Details (As per Bank records) :

A. A/c Holder Name : _____

B. Account Number : | | | | | | | | | | | | | | | | | | | |

C. MICR Code : | | | | | | | | | |

D. Ledger Code : | | | | | | | | | | | |

E. Account Type :

F. Start Date (10th) : End Date : No. of Installment :

G. Upper Limit Amount : **Rs.**

** The Upper Limit is Twice of the Present EMI Rs._____ as provision for future increase in EMI Value due to increase in variable Interest rate.

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 undertake to provide cheques as and when required by user institution and also agree to discharge the responsibility expected of me as a participant under the scheme.

(_____) (_____)

Signature of the Account Holder Signature of Joint A/c holders, if any (* Signature is required of all A/c holders)

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

Date : Bank's stamp Signature of the Authorised Official from the Bank

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AADHAR HOUSING FINANCE LTD Use Only.

Applicant Name : _____ Co-Applicant Name : _____

Mobile No. : _____ Mobile No. : _____

Email ID : _____ Email ID : _____

Communication Address : _____

Loan Code No : | | | | | | | | | | | | Branch Code : | | | | AHFL Branch Name : _____

NACH MANDATE FORM

आधार Aadhar Housing Finance Ltd. A DHFL Group Company UMRN | | | | | | | | | | | | | | | | | | | | | Date | | | | | | | | |

Tick (✓)

✓	CREATE
	MODIFY
	CANCEL

Sponsor Bank Code **YESB0000001** Utility Code **Y E S B 0 0 1 6 6 0 0 0 0 0 3 1 9 1**

I / We hereby Authorize **AADHAR HOUSING FINANCE LTD** to debit (tick✓) **SB / CA / CC / SB-NRE / SB-NRO / Other**

Bank A/C Number | | | | | | | | | | | | | | | | | | | | |

With Bank _____ IFSC | | | | | | | | | | | or MICR | | | | | | | | | |

an amount of Rupees _____ INR ₹

FREQUENCY ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ Yearly ✓ As & when presented DEBIT TYPE ☐ Fixed Amount ✓ Maximum Amount

Reference 1 _____ Phone No _____

Reference 2 _____ Email ID _____

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest shedule of the charges of the bank.

PERIOD

From | | | | | | | | |

To | | | | | | | | |

Or ✓ Until Canceled

_ _____ _____

_ _____ _____

• This is to confirm that the declaration has been carefully read, understood & made by me/ us. I am authorizing the User entity / Corporate to debit my account, based on instructions as agreed and signed by me.

• 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 debit.