

**ELECTRONIC CLEARING SERVICE (ECS) DEBIT PROCEDURAL GUIDELINES - 2011**

**FORM NO. E-5**

**ANNEXURE-VIII**

**ELECTRONIC CLEARING SERVICE**  
**MANDATE FORM**

The Manager  
(Bank Name) \_\_\_\_\_  
(Branch) \_\_\_\_\_  
(Branch Address) \_\_\_\_\_  
Telephone No. \_\_\_\_\_

**Copy to the User Company**

Name **DLDAV MODEL SCHOOL**  
Address **BN-Block, Shalimar Bagh, Delhi-110088**  
Telephone No. **27473634, 27477634**  
User ID - **1109731**

I hereby authorize you to DEBIT my account for making payment to **DLDAV MODEL SCHOOL, SHALIMAR BAGH, DELHI-88** through ECS (Debit) clearing as per the details given as under:

**(FORM SHOULD BE FILLED IN CLEAN & CLEAR HANDWRITING, CUTTINGS ARE NOT ALLOWED)**

A. 9-Digit Code of the Bank & Branch :\* 

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(Appearing on the MICR cheque issued by the bank)

B. Account Type :  
(SB Account / Current Account or Cash Credit)  
Account Number (CBS enabled new account numbers only):\*  

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C.

Name of the Scheme	Date of effect	Type of Periodicity (M, Bi-M, Qly / etc.)	Amount of installment (upper limit *)	Number of installments / Valid upto
ECS for School fees	01.04.2015	M	₹ 20,000/-	Till the ward in the school

D. Date of effect : 01.04.2015 **(ECS will hit your Saving Bank Account on 7<sup>th</sup> of every month)**

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 school responsible. I have read the option invitation letter and agree to discharge the responsibility expected of me as a participant under the scheme.

Date: \* \_\_\_\_\_

**Signature of the A/C holder**

\_\_\_\_\_  
**(Name of the Account Holder in Block Letter)**

\* Company's stamped required in case of Current Account or Cash Credit.  
Bank's Stamp

Date \_\_\_\_\_

**Signature of the Authorized official of the Bank**

\* Marked fields are compulsory.

We assure you that only school fee will be debited from your Bank Account through ECS. We have fixed the upper limit as ₹ 20,000 taking into account of the Annual Charges which are to be paid twice in a year.

Student I.D. No. _____	Class & Sec. _____
Student Name: _____	
Father / Mother Name: _____	
Mobile No. _____	E-mail No. _____

Photocopy of Mandate Form received by bank
Authorized Signatory

Please attach a photocopy of cancelled cheque at the back of this form.