MALAPPURAM DISTRICT POLICE CO-OPERATIVE SOCIETY Ltd. No.: M 438

AUTO DEBIT MANDATE FORM

Tick (✓)

☐ Create
☐ Modify
☐ Cancel

Product Name :

PAN *

Member Number :

Pen Number :

Name

Name of Bank & Branch :

Date

Bank Code :

Utility Code :

Un

I/We hereby authorize : Malappuram District Police Co-operative Society Ltd. No. M-438

To be debit (tick✓) ☐ ✓ SB/ ☐ CA/ ☐ CC/ ☐ SB-NRE/ ☐ SB-NRO/ Other Bank

Bank Account Number : 3 3 8 5 9 4 0 7 0 3 8

With Bank State Bank of India

IFSC S B I N 0 0 0 8 6 5 9

or MICR

an amount of Rupees :

Frequency : ☐ Monthly ☐

Email ID :

Phone No :

Period
From
To

OR X Until Cancelled

Signature : ……..... …….. ……..

Name : 1. ……. 2. …….. 3. ……..

☐ This is to confirm that the declaration has been carefully understood and made by me/us. I am authorizing the User/Corporate to debit my account, based on the 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/Corporate or the bank where I have authorized the debit.