



# NACH MANDATE INSTRUCTION FORM

Kotak Mahindra Bank Ltd.

PLEASE FILL IN BLOCK LETTERS ONLY

UMRN  Date

Tick (✓) Sponsor Bank Code **C I T I O O P I G W** Utility Code **C I T I O O O 2 0 0 0 0 0 0 3 7**

CREATE I/We hereby authorize **Kotak Mahindra Bank** to debit (tick ✓) **SB/CA/CC/SB-NRE/SB-NRO/Other**  
MODIFY  
CANCEL Bank A/c Number:

with Bank  IFSC  or MICR

an amount of Rupees  FOR BANK USE ONLY ₹  FOR BANK USE ONLY

FREQUENCY  Mthly  Qty  H-Yrly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

Reference 1  CRN (CUSTOMER RELATIONSHIP NUMBER) Phone No.

OR Reference 2  (CREDIT CARD ACCOUNT NUMBER) Email ID

Credit Card Number

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

PERIOD  
From  Signature Of 1st Account Holder  Signature Of 2nd Account Holder  Signature Of 3rd Account Holder   
To  X  X  X  X  X  X  
Or  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 & made by me/us. I am authorizing the user entity/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 entity/Corporate or the bank where I have authorized the debit.

- 1) Please sign as per signatures in your Bank Records. All joint account holders are required to sign the NACH mandate.
- 2) Please enclose a photocopy of a blank cancelled cheque issued by your Bank for verifying the accuracy of the MICR code.
- 3) Kotak Bank will notify you on the setup of NACH Mandate facility on your Credit Card account. In the interim, we request you to make payment towards your Credit Card outstanding by alternative modes.
- 4) This option will carry forward on renewal/ reissue/ swapping/ upgrade of your Credit Card.
- 5) In case NACH transaction fails then the Customer has to make payments via alternate modes. (Cheque, NEFT etc)
- 6) Please send the completely filled and duly signed NACH Mandate Form along with a Photocopy of cancelled cheque to the following address: Kotak Mahindra Bank Ltd. Credit Card Operations, Kotak Infiniti, 5th Floor, Building No.21, Zone-I, Infiniti IT Park, General A. K. Vaidya Marg, Opp. Western Express Highway, Malad (E), Mumbai - 400097.

### DECLARATION

I hereby express my unconditional consent to debit payment of my credit card dues, referred to above through participation in the NACH of the NPCI of the Reserve Bank of India and hereby unconditionally and irrevocably authorize Kotak Mahindra Bank to raise the debits on such regular payments as referred to above, against my Bank Account Number as given above.

I hereby declare that the particulars given above are correct and complete and if the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I will not hold Kotak Bank responsible.

I agree and understand that my bank shall be informed of these debits as per enclosed letter. I shall advise them of the same and I understand that the instruction cannot be withdrawn/ cancelled except with the written consent of Kotak Mahindra Bank for the payment of the credit card dues. I understand that my bank account will be debited 3 working days prior to the payment due date. I will ensure availability of funds in my Bank account. Verification Charges if levied will be borne by me.

### For Retail Credit Cards (Not Applicable For B2B Cards)

### For B2B Credit Cards Only

Minimum Amount Due for Credit Card	Tick Here	Total Amount Due for Credit Card	Tick Here	Total Amount Due for Credit Card	Tick Here
------------------------------------	-----------	----------------------------------	-----------	----------------------------------	-----------

Note: Not Applicable For B2B Customers

PRIMARY CREDIT CARD HOLDER SIGNATURE

PLEASE FILL IN BLOCK LETTERS ONLY

UMRN  Date

Tick (✓) Sponsor Bank Code **C I T I O O P I G W** Utility Code **C I T I O O O 2 0 0 0 0 0 0 3 7**

CREATE I/We hereby authorize **Kotak Mahindra Bank** to debit (tick ✓) **SB/CA/CC/SB-NRE/SB-NRO/Other**  
MODIFY  
CANCEL Bank A/c Number:

with Bank  IFSC  or MICR

an amount of Rupees  FOR BANK USE ONLY ₹  FOR BANK USE ONLY

FREQUENCY  Mthly  Qty  H-Yrly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

Reference 1  CRN (CUSTOMER RELATIONSHIP NUMBER) Phone No.

OR Reference 2  (CREDIT CARD ACCOUNT NUMBER) Email ID

Credit Card Number

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

PERIOD  
From  Signature Of 1st Account Holder  Signature Of 2nd Account Holder  Signature Of 3rd Account Holder   
To  X  X  X  X  X  X  
Or  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 & made by me/us. I am authorizing the user entity/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 entity/Corporate or the bank where I have authorized the debit.