## ANNEXURE-II

## Mandate by the Payee for e-Payment

No. Date:

To
The .....
(The Head of the office)
.....
(Address of the office)

**Subject: Payment through electronic mode.**

Sir,

I/we am/are giving option for availing the facility of e-Payment. Kindly arrange to remit the amount to my/our Bank Account hereinafter. The details of my/our particulars are furnished below:

1. (a) Name of the Claimant/ Payee/Recipient:
   (Capital letters)
   (b) Address:
   (c) Contact No. Land Line: Mobile :
   (d) E-mail:
   (e) ID No.: ** Nature of ID: **
2. (a) Name of Bank:
   (b) Name of Branch with Bank Branch Code:
   (c) Account Type: Savings / Current / Cash Credit
   (d) Bank Account No. [CBS allotted a/c. no.]:
   (e) Branch IFSC [11-digits]:
   (f) Branch MICR [9-digits]:

The Bank particulars furnished above is correct and true.
I/we hereby declare that I/we and my/our heirs and successors accept the liability of making good to Government the overpayment, if any, made to me/us under the scheme.
I/we hereby authorise.....Branch (name of the Branch) of the _____ Bank to receive amount on my/our behalf for credit to my/our account as stated above and further authorise that the receipt of credit given by the bank for the amount of my/our account shall be treated as legal quittance.

Yours faithfully,

(Signature of the Claimant/ Payee/Recipient)

(To be accepted by the Head of Office)

Date: Signature of the Head of office
(Office Seal)

.B. (a) ID No. & Nature of ID: ID No. (i) For individual: It should be Voter Card, Adhar Card or PAN Card or any other Identity card issued by the State Government/Central Government/ Government Autonomous Bodies/ Local Bodies, (ii) For Autonomous Body/Firm/ Company: Registration No. or PAN / TAN Number or Trade License.
(b) Verification of Bank Particular: Copy of the 1st page of the Pass-Book along with a copy of cancelled cheque or certified by the concerned Bank-branch.