

GOA SHIPYARD LTD
Electronic Payment System Mandate Form

Date :

To,
General Manager(Finance),
Goa Shipyards Ltd.,
Vasco-Da-Gama,
Goa 403 802

Sub : Electronic Payment System Mandate Form The details for processing the payment through RTGS as below:

1) Particulars of Vendor / Customer's	
Name of the Supplier	
E-Mail ID	
PAN Number	
Name & mobile number of responsible person	
Address of the Vendor / Customer	
2) Particulars of Order	
PO Number (For which mandate is submitted)	
Supplier Code	
Item/Service Description	
3) Particulars of Bank account	
Name of the Bank	
Address of the branch	
Branch IFS Code No (11 Digit Code given by RBI)	
9-Digit code number of the bank and branch appearing on the MICR cheque issued by Bank	
Type of the account with code S.B., Current or Cash Credit (10/11/13)	
Ledger and Ledger folio number	
Account number (as appearing on the cheque book) (In lieu of the bank certificate to be obtained as under, attach a blank cancelled cheque or photocopy of a cheque or front page of passbook issued by the bank for verification of the above particulars)	
Type of EPS (Please indicate Type of EPS opted)	RTGS / CORE BANKING
RTGS Enabled Branch	YES / NO
Date of effect	

Declaration

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

Date:

(_____)

Name and signature of the Vendor / Customer

To be certified by the Bankers

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

Bank's Stamp

Date:

Signature of the authorized official of the

Bank: