GOA SHIPYARD LTD Electronic Payment System Mandate Form

Date	:

To, General Manager (Finance), Goa Shipyard 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) Day	tionle	ars of Order	
PO Number (For which mand		licuia	ars of Order	
submitted)	aic is			
Supplier Code				
Item/Service Description				
recita del vice de competon				
GSL Contact person Name & 1	Mobile No			
1				
	3) Particu	lars o	of Bank account	
Name of the Bank				
Address of the branch				
Branch IFSC Code No				
(11 Digit Code given by RBI)				
9-Digit code number of the bank and branch				
appearing on the MICR chequ	ie issued by	7		
Bank	_			
Type of the account with code				
S.B., Current or Cash Credit (10/11/13) Ledger and Ledger folio number				
Ledger and Ledger folio numb	ber			
Account number (as appearing	on the che	eaue		
book)				
,				
Type of EPS		RTGS / CORE BANKING		
(Please indicate Type of EPS	S opted)		Type (NA	
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
Cartified that the particulars	To be certified by the Bankers furnished above are correct as per our records.
certified that the particulars	turnished above are correct as per our records.
Bank's Stamp	
Date: Bank:	Signature of the authorized official of the
(Invariably supplier to subm	it cancelled cheque along with Bank certificate to ensure the