

MANDATE FORM/ AGREEMENT

ELECTRONIC CLEARING SERVICE (CREDIT CLEARING)/ REAL TIME GROSS
SETTLEMENT (RTGS) FACILITY FOR RECEIVING PAYMENTS

Details of Account Holder(Institutional only not personal)

Name of Account(Designation/Institution Name)	Saveetha Institute of Medical and Technical Sciences
Institute AISHE Code	U-0475
Type of Institute	Technical
Complete Contact Address	Saveetha Institute of Medical and Technical Sciences (deemed to be university), No: 162, Poonamallee High Road, Velappanchavadi, Chennai 600077
Contact No.	04466726691
Email	vicechancellor@saveetha.com

Bank Account Details(Institutional only not personal)

Bank name	INDIAN BANK
Complete Address	INDIAN BANK, VALARPURAM, SRI PERUMBUDUR TALUK, KANCHEEPURAM DISTRICT, PIN CODE 602 105
Whether branch is computerized	Yes
Branch's RTGS CODE	IDIB000V060
Branch's IFSC CODE	IDIB000V060
If this branch NEFT enable	Yes
Type of Bank Account	Savings
Complete bank Account no.	514389956
MICR Code of Bank	600019113
PAN Card Number	AAFTS0845L
TIN/TAN Number	CHES22923F

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 responsibility expected of me as a particular under the Scheme. The Utilization Certificate for the funds received shall be submitted as when required.




Seal/Signature of UBA Coordinator of PI

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


Seal/Signature of Authorized Person of Institute

VICE CHANCELLOR
SAVEETHA INSTITUTE OF MEDICAL
AND TECHNICAL SCIENCES
DEEMED UNIVERSITY
162, P.H. ROAD, CHENNAI - 600 077.