

भुगतान प्राप्ति के लिये इस फॉर्म को भरकर कैंसिल्ड चेक एवम पैन की प्रति के साथ उल्लिखित पते पर शीघ्राशीघ्र भेजने का कष्ट करें।  
आवश्यक सूचनाएं बोल्ट कर दी गई हैं। You are required to send this format alongwith a cancelled cheque and copy of PAN at  
mentioned address. Manadatory fields have been marked bold.

**AUTHORISATION LETTER/E-MANDATE FORM**  
FOR E-PAYMENT/ ELECTRONIC FUNDS TRANSFER (EFT / RTGS/NEFT)  
(PLEASE FILL UP THE FORM IN CAPITAL LETTERS ONLY)

<b>TYPE OF REQUEST (Tick One)</b>	<input type="checkbox"/> CREATE <input type="checkbox"/> CHANGE
<b>BHEL Vendor/Supplier Code*</b>	<input type="text"/>
<b>Vendor PAN*</b>	<input type="text"/>
<b>Vendor Name as per PAN</b>	<input type="text"/>
<b>*आवश्यक/Mandatory</b>	
<b>Company/Organization's Name</b>	<input type="text"/>
Address	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
<b>Pin Code</b>	<input type="text"/>
<b>Contact Person(s)</b>	<input type="text"/>
Telephone No.	<input type="text"/>
<b>MOBILE NO.</b>	<input type="text"/>
<b>E-mail ID*</b>	<input type="text"/>
<b>1. Bank Name*</b>	<input type="text"/>
2. Bank Branch & Address	<input type="text"/>
	<input type="text"/>
3. Bank Telephone No.	<input type="text"/>
<b>4. Bank Account No. (IN FULL)*</b>	<input type="text"/>
5. Account Type.	<input type="text"/>
6. Bank's Branch Code	<input type="text"/>
<b>7. Bank RTGS / NEFT IFSCode*</b>	<input type="text"/>
<b>8. Enclosed cancelled cheque No.*</b>	<input type="text"/>

## DECLARATION :

1. I as represnetative / owner of the above named company/organization, hereby authorise BHEL - Jhansi to electronically remit payments to the designated bank account. I hereby certify that the particulars given above are true, complete and correct.
2. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold BHEL/transfereing Bank responsible.
3. This authority remains in full force until BHEL - Jhansi receives & acknowledges written notification requesting a change or cancellation.
4. I have received the contents of the covering letter and agree to discharge the responsibility expected of me as a participant under e-payment/EFT/RTGS/NEFT.

Authorised Signatory  
Company Seal  
Date:

Verification by Bank

- Encl:- 1. Cancelled Cheque  
2. Copy of PAN

**Note: Please send the form duly filled in with one original cancelled cheque & copy of PAN to:**  
**Dy. Manager (Cash), Finance & Accounts Deptt., Transformer Plant, BHEL, Jhansi - 284120, UP.**