

MANDATE FORM

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

A. DETAIL OF ACCOUNT HOLDER:

NAME OF ACCOUNT HOLDER	CENTRAL UNIVERSITY OF JAMMU
COMPLETE CONTACT ADDRESS	VILL BAGLA, P.O RAHYA SUCHANI, TEHSIL VIJAYPUR, SAMBA (J&K)- 181143
TELEPHONE NUMBER/FAX/EMAIL	01923-249660

B. BANK ACCOUNT DETAILS:

BANK NAME	STATE BANK OF INDIA
BRANCH NAME WITH COMPLETE ADDRESS	CENTRAL UNIVERSITY OF JAMMU
TELEPHONE NUMBER AND EMAIL	BAGLA (RAHYA-SUCHANI) SAMBA (J&K) 01923-249631, sbi.18531@sbi.co.in
WHETHER THE BRANCH IS COMPUTERISED	YES
WHETHER THE BRANCH IS RTGS ENABLED IF YES THEN WHAT IS THE BRNACH'S IFSC CODE	SBIN0018531
IS THE BRANCH ALSO NEFT ENABLED	YES
TYPE OF BANK ACCOUNT (SB/CURRENT/CASH CREDIT)	SB A/C 32911811713
COMPLETE BANK ACCOUNT NUMBER (LATEST)	32911811713
MICR CODE OF BANK	180002050

DATE OF EFFECT:-

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 participant under the scheme.

.....
 (Signature of customer)

वित्त अधिकारी
 Finance Officer

जम्मू केंद्रीय विश्वविद्यालय
 Central University of Jammu

Date:

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



.....
 (Signature of customer)

वित्त अधिकारी
 Finance Officer

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 Central University of Jammu