

Mandate Form for Electronic Transfer of Claim Payments

To Bajaj General Insurance Limited (Formerly known as Bajaj Allianz General Insurance Co. Ltd.)	Office Code & Name : i-track Number :
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Partner ID *(To be filled by Office)*:

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Full Name: Shri / Smt / Kum / M/s _____
 (As appears in your bank account)

Full Address: _____

Contact / Mobile No: _____ PIN Code: _____

_____ Email ID: _____

Bank Name:													
Branch Name & Address:													
Branch Tel No & Contact No:													
Branch IFSC Code for NEFT	<table border="1" style="display: inline-table; border-collapse: collapse; width: 100%; height: 20px;"><tr><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td></tr></table>												
Branch MICR Code	<table border="1" style="display: inline-table; border-collapse: collapse; width: 100%; height: 20px;"><tr><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td></tr></table>												
Name of the Account Holder : (As per Bank Account)													
Account Type	<table border="1" style="display: inline-table; border-collapse: collapse; width: 100%; height: 20px;"><tr><td style="width: 33%; text-align: center;">Savings</td><td style="width: 33%; text-align: center;">Current</td><td style="width: 33%; text-align: center;">Cash Credit</td></tr></table>	Savings	Current	Cash Credit									
Savings	Current	Cash Credit											
Account No. (as appearing in the cheque book)	<table border="1" style="display: inline-table; border-collapse: collapse; width: 100%; height: 20px;"><tr><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td></tr></table>												

I/we have read the declarations / conditions mentioned overleaf.

Place: _____ Date: _____ (Beneficiary's Signature) *X*

MANDATORY REQUIREMENT

PLEASE ATTACH HERE

Cancelled blank Cheque of your bank for ensuring accuracy of name of the bank, branch name, Account number and IFSC code. If NAME OR IFSC code of the payee is not printed on the cheque leaf, please attach copy of the first page of the bank passbook also.

I have verified the documents attached with the mandate and confirm that these documents correctly belong to the Partner ID & Partner Name mentioned in the mandate. (To be verified by superior)

Employee Code _____ Employee Name: _____ Designation _____

Place _____ Date _____ Signature _____

DECLARATION

- I / We hereby declare that the particulars given above are correct and complete and no blanks have been left. If the transaction is delayed or not effected at all for reason of incomplete or incorrect information I / we would not hold Bajaj General Insurance Limited responsible.
- I / We undertake to revoke the instruction for NEFT in the event of the business relationship expiring and or being 'terminated' and further hereby specifically authorize Bajaj General Insurance Limited, to do so, for me and on my behalf, in case the revocation communication is not received from me within seven days of expiry and or being termination of relationship.
- I / We further undertake to refund, at any time, any excess amount whether demanded by Bajaj General Insurance Limited or not, which has been credited to my account [due to any reason] by Bajaj General Insurance Limited, in excess of (i) the amount due to me, or (ii) in excess of amount for which I gave mandate, and or (iii) agreed rent/license fees/compensation/refundable security deposit/Commission/Claim/Refund/ Any other payment.
- I / We agree that the payment will be endeavoured to be credited starting from the date of next payment cycle and unless the Mandate is revoked by me/us issuance of relevant credit instruction for electronic payment from Bajaj General Insurance Limited into the aforesaid account will be valid discharge to Bajaj General Insurance Limited for having paid (i) the amount due to me, or (ii) in excess of amount for which I gave mandate, and or (iii) agreed rent/license fees/compensation/refundable security deposit/ Commission/Claim/Refund/Any other payment.
- I / We further confirm that we understand this mode as a method of payment introduced by Reserve Bank of India, which provides us an option to receive the amount and or to collect our payments by electronic payment mode directly through my/our bank accounts.
- I / We further confirm that I/we understand, Bajaj General Insurance Limited, shall make electronic payment to my account by issuing the Payment instruction electronically through its banker to the Clearing Authority and the Clearing Authority would ensure credit to my/our specified bank account provided hereinabove.
- I / We further undertake to inform Bajaj General Insurance Limited with an advance notice of 6 weeks, to withdraw from this mode of electronic payment.
- I / We further confirm that Bajaj General Insurance Limited will have, at its sole discretion, the right to return back to the option of paying to me/us by way of cheque if there are more than 2 consecutive failures in remittances for no fault on the side of Bajaj General Insurance Limited.
- After Bajaj General Insurance Limited issuing the Payment instruction electronically through its banker, for whatever reasons, if I/we do not get the credit to my/our account, then same shall neither constitute the default in (i) Payment of amount requested by me, or (ii) Payment of amount due to me/us, or (iii) Payment of agreed rent/license fees/compensation/refundable security deposit/ commission/claim/ Refund/Any other payment by Bajaj General Insurance Limited nor constitute default of any terms and conditions of any agreement/MOU/ Claim/Refund/Other contract and or Lease agreement/Leave and license agreement with me/us.