

FORMAT (OTS-F-11)
ECS – FORMAT

BIDDER'S NAME :
ADDRESS :
SUPPLIER REGN. CODE NO. WITH MDL :
BIDDER'S BANK NAME :
BANK BRANCH ADDRESS :
BANK ACCOUNT NO. :
NATURE OF ACCOUNT : SAVINGS / CURRENT / OTHERS*
NAME OF BANK : *give details
MICR NO. (9 DIGITS) FOR PAYMENT :
BIDDER'S PAN NO. :

NOTE : (A) ENCLOSE BANK'S VERIFICATION OF A/C. DETAILS AS PER FORMAT APPENDED BELOW.
(ENCLOSE ONE COPY OF RELEVANT CHEQUE LEAF DULY CANCELLED.)

We hereby authorize Mazagon Dock Limited to make all due payments through ECS by effecting credit in our above mentioned bank account

We, hereby, declare that particulars given above are correct and complete. If the transaction is delayed or not effected at all for reason of incomplete or incorrect information, we would not hold the user **institution responsible.**

Date

AUTHORISED SIGNATORY OF THE BIDDER

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

BANK'S STAMP

Date

SIGNATURE OF THE AUTHORISED OFFICIAL OF THE BANK