

**Mandate Form for Electronic Transfer of Claim Payments**

<b>To</b> <b>LIBERTY VIDEOCON General Insurance</b> <b>Company Ltd</b>	<b>Office Code &amp;Name</b> : _____ <b>i-track Number</b> : _____
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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															
Branch MICR Code															
Name of the Account Holder : (As per Bank Account)															
Account Type		Savings					Current				Cash Credit				
Account No. (as appearing in the cheque book)															

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

Place: \_\_\_\_\_ Date: \_\_\_\_\_ (Beneficiary's Signature) \_\_\_\_\_

**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 LIBERTY VIDEOCON General Insurance Company 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 LIBERTY VIDEOCON General Insurance Company 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 LIBERTY VIDEOCON General Insurance Company Limited or not, which has been credited to my account [due to any reason] by LIBERTY VIDEOCON General Insurance Company 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 LIBERTY VIDEOCON General Insurance Company Limited into the aforesaid account will be valid discharge to LIBERTY VIDEOCON General Insurance Company 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, LIBERTY VIDEOCON General Insurance Company 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 LIBERTY VIDEOCON General Insurance Company Limited with an advance notice of 6 weeks, to withdraw from this mode of electronic payment.
- I / We further confirm that LIBERTY VIDEOCON General Insurance Company 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 LIBERTY VIDEOCON General Insurance Company Limited.
- After LIBERTY VIDEOCON General Insurance Company 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 LIBERTY VIDEOCON General Insurance Company 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.