How to sign your NACH mandate

This is a one time instruction from you to your bank allowing ZestMoney to auto deduct EMI amount every month on the due date.	UMRN Date 1 5 0 4 2 0 1 6 Tick (✔) Sponsor Bank Code Utility Code CREATE ✔ I/We, hereby authorize Chalk Farm Ventures Pvt. Ltd. To debit (tick✔) SB / CA /CC SB-NRE /SB-NRO /Other Bank a/c Number: 0 0 0 0 0 0 0 0 8 or MICR With Bank Dhanlakshmi Bank IFSC DLX. 0 0 0 8 or MICR 8 or MICR
Instructions	An amount of Rupees twenty-nine thousand two hundred fifty-seven rupees
Take a print of the complete page	Reference 2 I Agree for the debit of mandate processing charges by the bank will orn I am authorizing to debit my accounts as per latest schedule of charges of the bank. PERIOD From 1 5 0 4 2 0 1 6 Scholleg-Privary boount hoper Signature of Account holder Signature of Account holder
2. Sign in the area above your name and sign only once	To Until cancelled 1 M***********************************
Make sure to match the signature with your bank records	authorized the debit.
4. Scan or upload a high quality image of the form below	
ZestMoney is registered unde	er the company "Camden Town Technologies Pvt Ltd"
Wich to howavar the acti	ual amount debited would always be as per your EMI Plan.
Please fo Sign, clicl	ollow the instructions above. k and upload the photo on <u>app.zestmoney.in</u> re to fit the below form completely inside the photo.
Please fo Sign, clicl Make sur	ollow the instructions above. sk and upload the photo on app.zestmoney.in
Please fo Sign, click Make sur UMRN UMRN UMRN UMRN Sponsor Bank Code	ollow the instructions above. k and upload the photo on app.zestmoney.in re to fit the below form completely inside the photo.
Please fo Sign, click Make sur UMRN Sponsor Bank Code CREATE MODIFY I/We, hereby authorize	ollow the instructions above. k and upload the photo on app.zestmoney.in re to fit the below form completely inside the photo. Date D M M Y Y Y Y
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Please fo Sign, click Make sur UMRN	Date Date Date Date SB / CA /CC SB-NRE /SB-NRO /Other To debit (tick) SB / CA /CC SB-NRE /SB-NRO /Other IFSC Drive As & when presented DEBIT TYPE Fixed Amount Maximum Amount Phone No. Email ID
Please fo Sign, click Make sur UMRN	Date Date Date Date Date Date Date Date
Please fo Sign, click () Sponsor Bank Code CREATE MODIFY CANCEL Bank a/c Number: With Bank An amount of Rupees FREQUENCY Mthly Qtly H-Yrly Yrl Unique ID Reference 2 I Agree for the debit of mandate processing charges by the PERIOD From D M M M Y Y Y Y	Date Date Date Date SB / CA /CC SB-NRE /SB-NRO /Other To debit (tick) SB / CA /CC SB-NRE /SB-NRO /Other IFSC Drive As & when presented DEBIT TYPE Fixed Amount Maximum Amount Phone No. Email ID

This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account ,based on the instruction as agreed and signed by me.

I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the user entity / corporate or the bank where I have authorized the debit.