

**ACCEPTANCE FOR ELECTRONIC FUND TRANSFER / RTGS TRANSFER**

01	NAME & ADDRESS OF THE SUPPLIER / VENDOR PHONE NO. WITH STD CODE	PAN NO. <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>	
02	VENDOR CODE (as in WORK ORDER)	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>	
03	Details of Bank Account:		
A)	NAME & ADDRESS OF THE BANK (WITH PIN CODE)		
B)	BANK TELEPHONE NUMBER (WITH STD CODE)	<table border="1" style="display: inline-table; width: 200px; height: 20px;"></table>	
C)	BANK BRANCH CODE:	<table border="1" style="display: inline-table; width: 100px; height: 20px;"></table>	
D)	MICR CODE	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>	
E)	ACCOUNT NUMBER	<table border="1" style="display: inline-table; width: 250px; height: 20px;"></table>	
F)	TYPE OF ACCOUNT	CURRENT / OD / CASH CREDIT	
G)	VENDOR NAME AS PER BANK RECORDS		
H)	BANK BRANCH RTGS IFSC CODE	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>	
I)	BANK BRANCH NEFT IFSC CODE	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>	
J)	VENDOR'S EMAIL ID (give two ids)	<table border="1" style="display: inline-table; width: 300px; height: 20px;"></table> <table border="1" style="display: inline-table; width: 300px; height: 20px;"></table>	
K)	NAME OF AUTHORISED SIGNATORY		

CERTIFICATE

I / We hereby agree to receive the payments due from BHARAT HEAVY ELECTRICALS LIMITED, RANIPET by the National Electronic Funds Transfer and/or RTGS Transfer mode by credit to my / our above mentioned Bank Account. I / We also agree that payments made to the above mentioned Account is a valid discharge of the liability of Bharat Heavy Electricals Limited, Ranipet. I / we also agree to bear the applicable Bank Charges for the above mode of transfer.

AUTHORISED SIGNATORY OF VENDOR WITH SEAL

Banker's Certification

We confirm that we are enabled for receiving RTGS and NEFT credits and we further confirm that the account number of _____ (name of account holder), the signature of the authorized signatory and the MICR and IFSC codes of our Branch mentioned above are correct.

PLACE:

DATE:

(Manager / Officer's
Signature Under Bank stamp)
Authorisation No. _____

Note: This EFT Form is to be submitted duly filled in manually in all fields and duly signed by Authorised Signatory and certified by Banker.