

National Automated Clearing House

To Remittance Dept., SBI Card & Payment Services Pvt. Ltd., DLF Infinity Tower, Tower C, 12th Floor, Block II, Building no 3, DLF Cyber City, Gurgaon-122002 (Haryana) India Dear Sir,

Subject: Authorization to pay SBI CARD outstanding through National Automated Clearing House (NACH).

I, being a SBI Cardholder, hereby authorize SBI Card & Payment Services Pvt. Ltd. to release payment for the outstanding amount on my SBI Card directly from my Bank account number mentioned herein, through NACH facility of NPCI.

I hereby declare that the entire information given by me is correct. If any transaction is delayed due to any incorrect/ incomplete information given by me, I will not hold SBI Card & Payment Services Pvt. Ltd responsible for the same.

I further agree that my bank shall be informed for this debit mandate and it cannot be cancelled/withdrawn/suspended except with the written consent of SBI Card & Payment Services Pvt. Ltd.

I am enclosing the NACH Enrolment Form and request you to activate the NACH on my credit card account mentioned therein.

(Signature of SBI Card Holder)	

(Signature of SBI Card Holder)

NACH Enrollment Form (Please fill and mail)

1.	Credit Card No:	
2.	Credit Cardholder Name:	
3.	Payment Debit Type: Total Amount Due as mentioned in statement	
	Minimum Amount Due as mentioned in statement	
	Fixed Amount per month [Rsonly]	
	Tixed Amount per month [issomy]	
4.	Bank Account Holder Name:	
	✓ No more Delayed Payments or Late Payment Charges ✓ Freedom from Drop Boxes	
	✓ Complete Flexibility	

Note: Please allow us 7 working days to activate the NACH on your card account.

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