STANDING INSTRUCTIONS FORM FOR TRANSFER OF FUNDS

IndusInd Bank

To,
The Manager,

_____ Branch,
IndusInd Bank Limited

Date: D D M M Y Y Y Y

I/We wish to *(tick whichever is applicable)*: ☐ Apply for New Standing Instruction ☐ Amend the Existing Standing Instruction

BENEFICIARY DETAILS

Beneficiary Name: _____

Beneficiary Account Number: _____ IFSC Code *(not required for transfer to IBL Account)*: _____

Beneficiary Bank Branch: _____

Beneficiary Bank Name: _____

Beneficiary Bank City: _____

REMITTANCE DETAILS

Remittance Amount *(in figures)*:	₹ _____
Remittance Amount *(in words)*:	_____
Frequency:	☐ Daily, on date D D M M Y Y Y Y starting from the month of _____, Y Y Y Y ☐ Monthly, on date D D M M Y Y Y Y starting from the month of _____, Y Y Y Y ☐ Quarterly, on date D D M M Y Y Y Y starting from the month of _____, Y Y Y Y ☐ Half-Yearly, on date D D M M Y Y Y Y starting from the month of _____, Y Y Y Y ☐ Yearly, on date D D M M Y Y Y Y starting from the month of _____, Y Y Y Y
Debit Instruction Start Date: D D M M Y Y Y Y	Debit Instruction End Date: D D M M Y Y Y Y

ACCOUNT HOLDER DETAILS

Account Number: _____ Mobile Number: _____

Customer Name: _____

Customer/s Signature

I/We hereby agree to the terms and conditions mentioned hereunder.

TERMS & CONDITIONS FOR STANDING INSTRUCTIONS

- I/We undertake to keep sufficient funds in the account on the date of standing instruction. The Bank will not be held responsible if any transaction is delayed or not executed for reasons of incorrect or incomplete information.
- I/We understand that applicable charges will be debited from my account towards processing the standing instruction request.
- I/We understand that the Bank will be relying on the information I/we provide, and will be acting in accordance with such reliance.
- I/We understand that a charge may be levied by the Bank in the event the Standing Instruction is returned due to insufficient funds. Further, the Bank at its discretion has the right to cancel the instruction provided without advice if consecutive three payments have been returned due to insufficient funds.
- I/We understand that the instruction given by me/us will be in effect till the end of debit instruction or until advised by me/us in writing to suspend the standing instruction mandate. Any amendments to the standing instruction shall be given by me/us in writing at least 1 week prior to the next date of debit from my/our account.
- I/We understand that if the Standing Instruction falls on a holiday, the same will be executed on the next working day.
- I/We understand that amount once debited from the account towards standing instruction cannot be reversed/revoked back into the account.
- I/We understand that the Bank shall have the right, in its discretion, to refuse to execute any instruction received under this Agreement without incurring any liability thereof.
- I/We understand that the Bank is not responsible for any delay or failure to carry the standing instruction where such delay or failure is attributable to any cause beyond Bank's control and the Bank shall under no circumstance be responsible for any losses arising executing the standing instructions in such scenarios.
- I/We agree to indemnify and hold the Bank harmless and free from any claim, loss, liability, damage or expense arising directly or indirectly from this Agreement and/or the transactions contemplated therein or the Bank's inability to execute any transactions contemplated herein.

FOR BANK USE ONLY

Date of Execution	Signature Verified By *(Name & ECN)*	Request Executed By *(Name & ECN)*	SI Reference Number *(System generated)*

CUSTOMER ACKNOWLEDGEMENT FORM

I/We confirm having received the Standing Instruction request from your Account_____towards the beneficiary account number_____pertaining to_____Branch of_____Bank for ₹_____ with effect from_____on a daily/monthly/quarterly/half-yearly/yearly basis.

Date-Request Received	Received by *(Name & ECN)*	Branch Seal with signature