

The Branch Manager

Date:

Equitas Small Finance Bank Ltd

Time: _____

Branch _____

Dear Sir/Madam,

Re:- Positive Pay confirmation for cheques presented in CTS Clearing payments.

I _____ (Name of the Account holder) having an account _____ (Account number) in your _____ (name of the Branch).

I hereby confirm that I have issued the following cheque/s in the captioned account with details as mentioned hereunder: -

| Sr. NO. | Cheque Number | Amount | Payee's Name | Cheque Date | Transaction Code(*) |
|---------|---------------|--------|--------------|-------------|---------------------|
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(*) 2 digits Transaction code is available on the Right Side of the MICR Band of the cheque.

I understand that Bank may reject any/all of the cheque/s at the time of presentment in Clearing payment due to any mismatch in the particulars of the cheque/s with the provided inputs as above. I also confirm to maintain sufficient balance in the account to honour aforesaid cheque/s.

_____ (Seal/Signature must be tallied with the record)

_____ (Name of the signatory/signatories)

_____ (Registered mobile number)

Note – All authorized signatories/signatory as per the operational instructions in the account shall provide this confirmation. Original signed form will only be accepted during the Banking hours of the Branch. This application will not be accepted by any person other than account holder. Depending on the time of receipt of the cheque by the branch, the same will be processed in the clearing session that follows.

For Office Use only

| | | |
|--------------------------|--------------|-----------------------|
| Confirmation entered at | Time & Date: | Signature of maker: |
| Confirmation verified at | Time & Date: | Signature of checker: |

Signature as per mode of operations/authorised signatory

DECLARATIONS ON POSITIVE PAY SYSTEM FOR CHEQUE PAYMENTS

1. I/We understand and agree that if the details provided by me/us in Positive Pay System/to the Bank do not match with the same details mentioned on the corresponding cheque(s) drawn/issued by me/us, the particular cheque(s) shall be returned unpaid by the Bank at the Bank's sole discretion and I/We wouldn't have any dispute/claim against the Bank in respect of such dishonour of the cheque(s).
2. I/We agree and confirm that the cheque details collected from me/us will be transmitted/stored in Bank's database as well as in National Payments Corporation of India (NPCI) database/transmitted by NPCI to the cheque presenting Bank and I/We agree and confirm that such storing/transmission of my/our confidential data will not constitute infringement of my/our right to privacy and data protection under IT Act any other applicable rules/regulations.
3. I/We agree and confirm that I/We while sending the PPS instructions shall ensure the availability of requisite funds in my/our designated Account, from which the amount shall be debited on payment of the relative cheque.
4. I/We acknowledge and agree that provision of details of cheque(s) issued in Positive Pay System shall not constitute any rights on me/us to get the relative cheque(s) paid and all existing laws and rules governing payment of cheque(s) as prevailing will determine the payment or otherwise of the cheque concerned.
5. I/We aware that for accounts with MOP "Either or Survivor" or "Anyone or Survivor", Positive Pay Confirmation can be provided by the other holder or any of the holders, as the case may be, irrespective of signatory/drawer of the cheque under the account. Bank shall not be liable for any Loss, Damage, Charges, Cost, Expenses incurred due to such confirmation provided by the other holder or any of the holders in the account.

Signature as per mode of operations/authorised signatory

Place:

Date:

(Acknowledgement by Branch)

Received Positive Pay confirmation in the account _____ (name)
_____ (A/c No.) for _____ (no. of cheques) at _____ AM/PM of _____
(date).

(Name & Signature of the receiving officer of the Branch)

