DIRECT DEBIT MANDATE FORM

DATE:	
FROM Account Holder's Name : Account Holder's Address :	
TO ICICI Bank Limited.,, Branch,, City.	
Ref: Account No.:	7
Dear Sir, I/We (the "Accountholder/s) hold the above mentioned ICICI Bank's account (the "Account") with branch of ICICI Bank Limited ("ICICI Bank"). The Accountholder/s would like to inform you that we have availed merchant acquiring service/s of ICICI Merchant Services Private Limited ("ICICI MS") for accepting payment through Credit/Debit cards. Pursuant to the arrangement between the Accountholder/s and ICICI MS, the Accountholder/s hereby unconditionally and irrevocably authorize ICICI Bank to debit the Account and credit ICICI MS's account number on receiving instructions in writing from ICICI MS specifying the amount to be debited from the Account due to nonpayment by the Accountholder towards Charge backs, Refunds & Fees over the entire tenure of the arrangement with ICICI MS w.e.f till The Accountholder/s hereby authorize ICICI to forward this duly signed and completed debit mandate form to ICICI Bank after affixing the signatures of their authorized person(s) to signify their approval for the above instructions and arrangement.	
The Accountholder/s hereby agree and undertake that any issue, dispute, concern or query with regard to the debit of the Account for the above referred purposes shall be independently settled by the Accountholder/s with ICICI MS directly without any reference or liability of ICICI Bank. ICICI Bank shall not be responsible or liable in any manner whatsoever, as to cost or consequence thereof, for the amount debited from the Account as per the instruction received in writing from ICICI MS. The provisions of this clause shall survive the termination of the arrangement between the Accountholder/s and ICICI MS. Thanking you, Yours truly,	
(Account Holder/s) Accepted and Approved Authorized Signatory ICICI Merchant Services Pvt. Ltd	Signature & full account no. VERIFIED
	ICICI Bank Ltd.