

E – PAYMENT FORMAT

File No. -----

Date:

To,

The manager
-----Bank,

**Sub: Release of e-payment/electronic transfer of Rs.-----
(Rupees -----) to M/s**

Sir,

I am directed to inform you that the above payment is approved by the Competent Authority and the same may be released to the under mentioned Contractor/Party through e-payment system. The details of e-payment to be made are as follows: -

1.	Name & Address of the Contractor	:	
2.	Amount to be released	:	
	(in figures)	:	
	(in words)	:	
3.	Name of the Bank & Address with phone No.	:	
4.	Account No and type of Account	:	
5.	Bank RTGS No.	:	

2. You are requested to transfer of Rs. -----(Rupees -----) to above accounts by debiting our Account No. ----- with your Branch.
3. A copy of the transaction document used for effecting e-payment may be endorsed to the undersigned.

This issues with approval of Competent Authority vide sanction file no. IWAI/ Date-
-----.

Yours faithfully,

Nodal Officer/Accounts Officer

- Copy to: 1. Contractor
2. Manager, out station Bank
3. PCSA for putting it on the website.

DETAILS OF BANK ACCOUNT FOR RELEASE OF PAYMENT THROUGH
ELECTRONIC FUND TRANSFER SYSTEM.

(TO BE FURNISHED BY THE BIDDER ON ITS LETTER HEAD)
NAME OF THE PROJECT:-----

THE BANK ACCOUNT DETAILS ARE FURNISHED AS BELOW:

We -----(Name of the Bidder) hereby request you to give our payments by crediting our bank account directly by E-Payment mode as per account details given below. We hereby undertake to intimate IWAI in case of any change in particulars given below and will not hold IWAI responsible for any delay/default due to any technical reasons beyond IWAI's control: -

Bank Account Number :-----
RTGS/NEFT/IFSC CODE : -----
NAME OF THE BANK : -----
ADDRESS OF THE BRANCH
OF THE BANK : -----
BRANCH CODE : -----
ACCOUNT TYPE
(SAVING/CURRENT/OTHERS) :-----

A BLANK CHEQUE (CANCELLED) IS ENCLOSED HEREWITH.

I/We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or credit is not affected at all for reasons of incomplete or incorrect information, I/We would not hold IWAI responsible.

Signature of Authorized Signatory

date:

BANK CERTIFICATION:

It is certified that above mentioned beneficiary holds a bank account No. with our branch and the bank particulars mentioned above are correct.

Date

Authorized Signatory
Authorization No.-----
Name:-----
Official Seal/Stamp

Inland Waterways Authority of India
CREDIT VOUCHER

DATED

V. NO.

RECEIPT NO.:

DEBIT	CASH-IN-HAND													
CREDIT	PR		SC		HEAD			CODE			SLD			AMOUNT
														TOTAL

NARRATION: _____

PREPARED BY

CHECKED BY

APPROVED BY

Waterways Authority of India BANK RECEIPT

DATED

V. NO.

RECEIPT NO.:

DEBIT	CASH-IN-HAND															
CREDIT		PR		SC		HEAD				CODE				SLD		AMOUNT
															TOTAL	

NARRATION: _____

PREPARED BY

CHECKED BY

APPROVED BY