TDB-CNA FUND TRANSFER THROUGH PUBLIC FINANCIAL MANAGEMENT SYSTEM (PFMS)

DETAILS OF ORGANIZATION

1.	PFMS Unique Code	
2 (i)	Agency Name (Name of the University/ Institute/ College, etc)	
2 (ii)	Agency Type (Statutory Bodies/Autonomous/NGO/Society etc.)	
2 (iii)	Hierarchy of Agency	
	(Central/State/ District/Block/Tahsil/PanchayatNillage)	
2 (iv)	Act/Registration No.	
2 (v)	Date of Registration	
2 (vi)	Registering Authority	
2 (vii)	State of Registration	
3.	TIN No. (If available)	
4.	TAN No.	
5.	Complete Contact Address of the Agency	
5 (i)	Block No./Building/Name of Premises	
5 (ii)	Road/Street/Post Office	
5 (iii)	Area/Locality	
5 (iv)	City/ District	
5 (v)	State	
5 (vi)	Pin code	
6.	Contact Person	
6 (i)	Designation	
6 (ii)	Phone Number (Land Line)	
6 (iii)	Alternate Phone No./Mobile No.	
6 (iv)	Official E-mail address	
	Bank Account details for TDB Schemes	
	Institution's Account Name (As per bank record)	
7 (ii)	Account No.	
()	IFSC Code	
, ,	Bank name (in full)	BANK OF MAHARASHTRA
()	Branch Name	
` ,	Complete Branch address	
7 (vii)	MICRNo.	
7 (viii)	Account Type	

Certified that the Institute's account is an RTGS/ECS/NEFT enabled branch. I hereby declare that the particulars given above are correct and complete. The above Agency's Account No. and bank details are registered/mapped under PFMS.

Date:	Signature of the Competent Authority
	of the Agency with seal.

Certified that the particulars furnished above are correct as per our records.

Date: Signature of the Authorized Bank Official with seal.