



Eastern Power
Distribution Company of A.P.Ltd
ఆంధ్రప్రదేశ్ తూర్పు ప్రాంత విద్యుత్ పంపిణీ సంస్థ

SBH ATM – Electricity Bill Pay Registration Form

Please register me for the SB ATM Bill Pay Service for payment of my Electricity bill through the ATM as per the details given below.

Please use a separate form if you have more than one Service.

1. Personal Details:

Name: _____

Address: _____

City : _____ PIN CODE: _____

TEL(OFF) _____ (RES) _____

MOBILE _____ MAIL ID _____

2. CARD DETAILS:

ATM / DEBIT CARD NUMBER : _____

ACCOUNT TYPE : SAVINGS / CURRENT

BANK ACCOUNT NUMBER _____

Please note that your Primary Account associated with the above Card will be accessed while paying your bills using the ATM Bill Pay Service.

3. BILLS PAID DETAILS: Filling the following details will allow you to avail the ATM Bill Pay Service. The details are available on your bill copy. Please attach a copy of your bill for verification of details.

4. APEPDCL BILL DETAILS:

SERVICE NUMBER :

UNI CODE(17 digits):

5. DECLARATIONS.

- I have attached a Balance Inquiry Transaction slip with this form.
- I agree to abide by the Terms and Conditions.
- We have noted that this is only an addon service and Bank is not liable in any way for any loss or damage.**

Date: _____

Place: _____

Signature of Customer.

Terms and Conditions

1. I/We agree and accept the terms and conditions of SBI ATM Bill Pay Services to carry out my/our bill payments through the ATM, at my request, given by me/us from time to time.
2. I/We agree that by registering for ATM BillPay Services, I/We authorize State Bank of India ('the Bank') and its agents to follow the payment Instructions I/We have given using ATM Banking facility. I/We fully understand that the Bank engages third party service providers ('agents') to provide this service.
3. I/We undertake to ensure that there would need to be sufficient clear funds in my/our accounts on stipulated dates for making the payments. I/We understand that the Bank shall not be held responsible or liable if it is unable to effect the payment transactions due to insufficient clear funds in the account.
4. I/We agree to provide my/our correct identification details as registered with the biller. I/We agree to indemnify the Bank and /or its agents from any liability due to erroneous information given by me/us in this regard.
5. I/We agree that in case of any change in my identification details, it is my/our responsibility to register the changes immediately.
6. I/We authorize the Bank to share our personal and bill payment related information with its agents, billers and/or financial institutions. I/We also acknowledge that the Bank remains entitled to assign any activities to any third party agency at its sole discretion. I/We have no objections whatsoever to the biller providing my/our billing details to the Bank and/or its agents.
7. I/We agree that this facility will be available to me/us subject to and upon receipt of the billers confirmation as to the details furnished by me/us.
8. I/We agree that any dispute on bill details will be settled directly by me with the biller.
9. I/We agree that all the transactions, those requiring processing by the Bank will be carried out only during business hours. All transactions made by the Bank based on the authority in the ATM BillPay Registration form is binding on me. I/We agree to bring to your notice any error/mistake in the transaction.
10. I/We agree that all the conditions applicable to ATM Banking are binding on me/us in this regard.
11. I/We further agree that it shall solely be my/our responsibility to schedule payments ahead 2 working days before the due date of the bill so that the billers receive the payments within the due dates. In the event of late payment, I/We shall be liable for late payment charges and other consequences as may be enforced by the biller.
12. I/We understand that the payment instructions shall constitute an irrevocable and unconditional authority to debit my/our account and remitting payment to the biller.
13. I/We understand that Bank and/or its agents will not be responsible or liable for not effecting the payment due to incomplete, inaccurate or delayed submissions of details.
14. I/We understand that the Bank and/or its agents will not be responsible or liable if it is unable to effect the payment transactions owing to (1) Mechanical/technical failure (2) Events beyond the control of the Bank.
15. I/We understand and agree that the Bank will not be held liable for any loss or damages whatsoever, for carrying out the instruction in good faith.
16. I/We agree to indemnify Bank harmless from the against all action, claims, damages, losses whatsoever, that the Bank may incur at any time.
17. I/We agree that Bank may from time to time make alterations, additions, deletions in the scheme with or without notice to me/us and that these shall effect and be binding upon me/us.
18. In case of overdraft in the account for the reason whatsoever, I/We agree to pay the amount with applicable interest thereon, to the Bank.
19. In the event I/We wish to terminate the service, I/We agree to initiate necessary action in this regard. I/We agree that I shall remain liable for all the transactions that have crystallized prior thereto.
20. The Bank reserves the right to charge and recover from you, fees for availing the ATM BillPay service. Such fees shall be as stated in the tariff sheet on the Bank's website. The Charges shall be debited to your Saving/Current account with the Bank. Failure to pay the charges on or before the specified date will render you liable for payment of interest at such rate as may be stipulated by the Bank and/or withdrawal of the ATM BillPay service without any notice to you or liability to the Bank. The Bank reserves the right to amend the current tariff without any notice.
21. The Bank or its agents retain the customary right to suspend the operations of the ATM BillPay Service without notice and at their sole discretion.

Bank Use Only

Application Received On :

Application Received By :

Date Completion Call made on :

Call made by :

Application No. Assigned :

Date verification & Entry on :

Date entered by :

Application Status : Accepted / Rejected

Reason for Rejection :