

**Annexure- E  
(For Auto Debit Facility)**

Date : \_\_\_\_\_

The Vice President  
Credit Card Business Department  
Bobcards Ltd.  
Baroda House, 2<sup>nd</sup> Floor,  
Behind Dewan Shopping Centre,  
S.V. Road,  
Jogeshwari (West),  
Mumbai-400102

Sir,

**Re: Authority to Debit my SB /CA a/c against my Bobcard Card/  
Application no. \_\_\_\_\_ dues.**

have applied for Bobcard (Type) \_\_\_\_\_ card. I irrevocably authorize Bobcards Ltd. to debit my (SB / CA) \_\_\_\_\_ A/c no. \_\_\_\_\_ maintained at Bank of Baroda \_\_\_\_\_ branch, against Total Amount Due  / Minimum Amount Due  / Specific Percent %  of monthly or any dues in credit card issued to me.

I, hereby also confirm that I am an authorized signatory of the above stated a/c & it pertains to me.

Yours faithfully,

Name :

Signature:

X

X.....

We Recommend & Verify the above signature  
Bank of Baroda

Authorised Signatory  
Signature No.: