Annexure-1

TDB-TSA Hybrid Funds 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.) |  |
|  | (ii) | Agency Type (Statutory Bodies/Autonomous/NGO/Society etc.) |  |
|  | (iii) | Hierarchy of Agency (Central/State/District/Block/Tehsil/Panchayat/Village)  |  |
|  | (iv) | Act/Registration No.  |  |
|  | (v) | Date of Registration  |  |
|  | (vi) | Registering Authority  |  |
|  | (vii) | State of Registration |  |
| 3. |  | TIN No. (If available) |  |
| 4. |  | TAN No. |  |
| 5. |  | **Complete Contact Address of the Agency** |  |
|  | (i) | Block No./Building/Name of Premises  |  |
|  | (ii) | Road/Street/Post Office  |  |
|  | (iii) | Area/Locality |  |
|  | (iv) | City/District  |  |
|  | (v) | State |  |
|  | (vi) | Pin Code  |  |
| 6. |  | **Contact Person**  |  |
|  | (i) | Designation  |  |
|  | (ii) | Phone No. (Land Line) |  |
|  | (iii) | Alternate Phone No./Mobile No.  |  |
|  | (iv) | Official E-mail Address |  |
| 7. |  | **Bank Accounts Details for TDB Schemes**  |  |
|  | (i) | Institution’s Account Name (As per bank records)  |  |
|  | (ii) | Account No. |  |
|  | (iii) | IFSC Code |  |
|  | (iv) | Bank Name (in full) |  |
|  | (v) | Branch Name  |  |
|  | (vi) | Complete Branch Address  |  |
|  | (vii) | MICR No. |  |
|  | (viii) | Account Type |  |

Certified that the institute’s account is an PFMS enable 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.

Signature of the Competent Authority

of the Agency with Seal

Date:

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

Signature of the Authorized

Bank Official with Seal

Date: