



**ELECTRONIC CLEARING SERVICE (CREDIT CLEARING TIMES GROSS SETTLEMENT (RTG) FACILITY FOR RECEIVING PAYMENTS**

SL. NO.	DETAILS OF ACCOUNT HOLDER	
1.	NAME OF ACCOUNT HOLDER	<b>QUALITY COUNCIL OF INDIA</b>
a)	COMPLETE CONTACT ADDRESS	2 <sup>ND</sup> FLOOR, INSTITUTION OF ENGINEERS BUILDING, BAHADUR SHAH ZAFAR MARG, NEW DELHI – 110002 – INDIA
b)	TELE No. / Fax / E-mail	011-2337 9321, 23379621 info@qcin.org
2.	<b>DETAILS OF ACCOUNTS DETAILS-</b>	
a)	BANK NAME	AXIS BANK LTD.
b)	Branch Name with complete address	6/83, Padam Singh Road, W.E.A. Karol Bagh, New Delhi – 110 005 Tel No.011 45400735 Fax : 011-45400734 Web : www.axisbank.com
c)	Whether the branch is computerized?	Yes
d)	Is the branch also NEFT	Yes
d)	Type of Bank Account	Savings Bank A/c
e)	Complete Bank A/c No.	223010100053020
f)	MICR Code of bank	110211025
g)	RTGS / IFS Code	UTIB0000223

**c) Date of effect-**

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I would not hold the user institution responsible. I have read the option invitation letter and agree to discharge responsibility expected of me as me participant under the scheme.

**For Quality Council of India**

  
.....  
**Authorized Signatory**

Signature of Customer

Date : 05/11/2009

Certified that particulars furnished above are correct as per our records.  
(Bank's Stamp)

  
.....  
Signature of the Authorized Official from the Bank



Date:

1. Please attach a photocopy of cheque alongwith the verification obtained from the bank