RELIANCE FINANCE LIMITED
रिलायन्स फाइनान्स लिमिटेड

APPLICATION FOR STOP PAYMENT

Date: ..../......../..............

To,
The Branch Manager,
Reliance Finance Limited
..............................Branch

Dear Sir/Madam,

I/We humbly request you to stop payment of the cheque issued to my/our account maintained at your Finance Company, according to the following information:

Account Number: ....

Account Name: ....

Permanent Address: ....

....

Cheque Number: [From].. [To]...

Number of Cheque Leaf: ....

Reason for stop payment: ....

Request Date and Time: ..../......../..............

I/We hereby authorize the Reliance Finance to debit my/our account mentioned above for the necessary charges as per the Finance's Standard Tariff Charges. I/We hereby declare that the Finance Company shall not be liable if the cheque is paid prior to the request for stop payment of cheque/s.

....
Accountholder's Signature(s)

....
Stamp if applicable

FOR OFFICE USE ONLY

Application Received and Signature Verified by: .... Date: ..../........../.........................

Applicable fee/Charges: ☐ Yes ☐ No Charge Amount (Rs): .... In Words: ……..............

Entered by: ……………................................... Signature: ……………………………………………

Approved by: ……….....…................................... Signature: ……………………………………….......