

<On Letter head of Regulated Entity>

**Application for compounding of contravention under the
Payment and Settlement Systems Act, 2007**

1	Name of the applicant (in BLOCK LETTERS)	
2	Full address of the applicant (including Phone / Mobile Number and email id of the MD / CEO)	
3	Nature of the contravention (whether under sub-section (1), (3), (4), (5), (6) of section 26 of the Payment and Settlement Systems Act, 2007 (PSS Act)) [If there is more than one contravention, details of each contravention shall be given separately]	
4	Brief facts of the case clearly indicating the nature of the contravention, period and amount involved in the contravention	
5	Whether this is the first offence under the PSS Act? If not, action including compounding / monetary penalty / prosecution taken, with details of such action	
6	Any other information relevant to the case	

I declare that the particulars given above are true and correct to the best of my knowledge and belief and that I am willing to accept any direction / order of the Designated Authority in connection with compounding of my case. I also understand that in the event of this application for compounding being rejected on any ground including for submission of false / incomplete information / documents or being not found maintainable / compoundable by Reserve Bank or the compounding amount not being paid within the stipulated time, then the other provisions of the PSS Act shall apply and the applicant may be liable for action as Reserve Bank may deem fit in accordance with law.

(Signature of the Applicant)

Name :

Designation :

Dated :

Note: A copy of the compounding application shall also be emailed to cgmincefdco@rbi.org.in