

**On Letterhead of CTS Vendor**

**Authorization letter for scanners compatibility**

**Date:**

**To,  
The Deputy General Manager,  
IT Department,  
Bank of Maharashtra,  
Lokmangal, 1501,  
Shivaji Nagar,  
Pune-411005.**

**Sir,**

**Sub: Compatibility of cheque scanner model \_\_\_\_\_ with  
CTS application installed in \_\_\_\_\_ grid.**

**Tender Reference NO.: 102017**

**We, \_\_\_\_\_, hereby confirm that cheque scanner  
model \_\_\_\_\_ will be compatible with the Bank's CTS application  
provided by us.**

**Authorised Signatory,**

**Sign & seal.**

CTS VENDORS CONTACT DETAILS				
Sr. No	CTS vendor	Contact Person	Contact Numbers	Email id
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