



# ONE TIME AUTHORISATION FORM FOR NACH/ECS/DIRECT DEBIT/STANDING INSTRUCTION

UMRN

Date

Choose (✓)

Sponsor Bank Code

Office use only

Utility Code

Office use only

CREATE ☒  
MODIFY ☒  
CANCEL ☒

I/We hereby authorize

**SHRIRAM MUTUAL FUND**

to debit (✓)

☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Other

Bank A/c No.:

With Bank

Bank Name & Branch

IFSC

MICR

an amount of Rupees

Amount in Words

₹

FREQUENCY

☒ Monthly ☒ Quarterly ☒ Half Yearly ☒ Yearly ☒ As & when presented (default)

DEBIT TYPE ☒ Fixed Amount ☒ Maximum Amount

Folio No.

Phone No.

Reference

Email Id

I agree for the debit of Mandate processing charges by the Bank whom I am authorising to debit my account as per latest Schedule of charges of the Bank.

PERIOD

From

to

Max Validity: 40 years only.

Sign  Signature of First Account Holder Sign  Signature of Second Account Holder Sign  Signature of Third Account Holder

1.  Name as in Bank Records 2.  Name as in Bank Records 3.  Name as in Bank Records

• This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user Entity / Corporate to debit my account.

I have understood that I am authorised to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the user entity / corporate or the bank where I have authorised the debit. I/We hereby declare that the above information is true and correct and that the mobile number listed above is registered in my/our name(s) and/or is the number that I/we use in the ordinary course. I/We hereby declare that, irrespective of my/our registration of the above mobile in the provider customer preference register, or in any similar register maintained under applicable laws, now or subsequent to the date hereof. I/We consent to the Bank communicating to me/us about the transactions carried out in my/our aforesaid account(s).

#### **Instructions to fill OTA**

1. UMRN is auto generated during mandate creation and is mandatory to be updated during amendment and cancellation of mandate. (maximum length - 20 Alpha Numeric Characters)
2. Date in DD/MM/YYYY format.
3. Tick on box to select type of actions to be initiated.
4. Tick on box to select type of actions to be affected.
5. Customer's legal account number, left padded with zeroes. (Maximum length - 35 Alpha Numeric Characters)
6. Name of the Bank and Branch.
7. IFSC/MICR code of customer bank. (Maximum length - 11 Alpha Numeric Characters)
8. Amount payable for service of maximum amount per transaction that could be processed, in words.
9. Amount figures, similar to the amount mentioned in words (Maximum length - 13 digits Numeric, in paisa)
10. Mention Loan Account number.
11. Type of loan in Reference Box.
12. Tick on box to select frequency of transaction.
13. Validity of mandate with dated in DD/MM/YYYY format.
14. Names of customer/s and signatures as well as seal of Company (where required). (Maximum length of Name 40 alpha Numeric Characters)
15. Undertaking of customer.
16. Telephone no. with STD code of customer or 10 digit mobile number of customer.
17. Mail of customer.
18. End date cannot be more than 40 years from the date of mandate.

*"In case there is any change in your KYC information please update the same by using the prescribed 'KYC Change Request Form' and submit the same at the Point of Service of any KYC Registration Agency"*

