

NACH/OTBM Form Filling Important Pointers

RELIANCE MUTUAL FUND **ONE TIME BANK MANDATE**
(NACH / Direct Debit Mandate Form)
(Applicable for Lumpsum Additional Purchases as well as SIP Registration)

Reliance Nippon Life Asset Management Limited
(formerly Reliance Capital Asset Management Limited)
A Reliance Capital Company

APP No. **1**

UMRN **3** (Office Use Only)

Date: DD MM YYYY **2**

Sponsor Bank Code (For Office Use Only) Utility Code (For Office Use Only)

Create Modify Cancel I/We hereby authorize **Reliance Mutual Fund** to debit (tick ✓) JSB CA CC SB-NRE SB-NRO Other **4**

Bank A/c no: **5**

With Bank (Name of Destination Bank) IFSC **6** MICR **7**

an amount of Rupees **8**

FREQUENCY: Monthly Quarterly Half Yearly Yearly as & when presented DEBIT TYPE Fixed Amount Maximum Amount

Reference 1 Folio No. **9** Email ID: **11**

Reference 2 Appln No. **10** Mobile / Phone No.: **11**

I agree to the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

From: PERIOD **12**

To: **3 1 1 2 2 0 9 9** 1 **13** Signature of Account Holder 2 Signature of Account Holder 3 Signature of Account Holder

Or Until Cancelled 1 **13** Name as in Bank Record 2 Name as in Bank Record 3 Name as in Bank Record

14 This is to confirm that the declaration (as mentioned overleaf) has been carefully read, understood & made by me / us. I am authorizing the User Entity / Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / Corporate or the bank where I have authorized the debit.

OTBM + SIP Form / 26th June 2017 / Ver 1.7

Important Pointers

- 1** Kindly leave the 'Application Number' blank
- 2** Ensure, that you mention the date in your form in the specified DD/MM/YYYY format, which means the current date, followed by the month and the year
- 3** Kindly leave the UMRN, Sponsor Bank Code and Utility Code sections blank. This will be filled at our end
- 4** Ensure that you tick the Debit Bank Type section
- 5** Please mention your Bank Account Name in the mandate form
- 6** Please mention your 11 digit IFSC Code
- 7** Please mention 9 digit MICR number
- 8** Kindly mention the amount in numbers and words. Both the amount mentioned in numbers and words should match
- 9** Please mention the Folio Number. In case of a new Folio, please keep the field blank. The same will be updated at our end
- 10** Note App no field has been provided separately to fill Application number, if required
- 11** In order to stay updated on your account and receive important alerts and notifications, do mention your email address and contact number
- 12** Once you do this, please mention the period in the same DD/MM/YYYY format which will indicate the start date of your mandate enrollment period
- 13** Ensure that all holders sign the form and their respective names as per the Bank Records are mentioned therein
- 14** a) While printing the Application form please ensure the Terms and Conditions pages are included. Application form should be downloaded and printed completely. Incomplete form submission may lead to rejection
b) Ensure that application form is legible/readable, unclear form is viable for rejection

Please avoid any over-writing in the One time Bank Mandate form. In case of any unavoidable overwriting in the form please put counter signature for authentication.