MOTILAL OSWAL Mutual Fund

NACH/ ECS/ Direct Debit Mandate Form [Applicable for Lumpsum Additional Purchases as well as SIP Registrations]

UMRN: For Official Use

Date:

Tick (✓)	
Create	✓
Modify	
Cancel	

Sponsor Bank Code: For Official Use

Utility Code: For Official Use

I/We hereby authorize: Motilal Oswal Mutual Fund

To Debit (to tick ✓): ☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Other

Bank a/c number:

with Bank: IFSC: Or MICR:

an amount of Rupees: ₹

FREQUENCY: ☐ ~~Mthly~~ ☐ ~~Qtly~~ ☐ ~~H.Yrly~~ ☐ ~~Yrly~~ ☑ As & when presented

DEBIT TYPE: ☐ ~~Fixed Amount~~ ☑ Maximum Amount

Reference 1: Folio No.:

Mob. No.:

Reference 2: Application No.

Email ID:

I agree for 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.

SIP Period

From: ☐☐☐☐☐☐☐☐

To: 3 1 1 2 2 0 9 9

Or ☐ ~~Until cancelled~~

1. Signature of the account holder 2. Signature of the account holder 3. Signature of the account holder

1. 2. 3.

This is to confirm that the declaration has been carefully read, understood & made by me/us