



'OTM - NACH - CANCELLATION / UPDATION FORM'

Date

D	D	M	M	Y	Y	Y	Y
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Choose (✓)
 CREATE
 MODIFY
 CANCEL

UMRN

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 Office use only

Sponsor Bank Code

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 Office use only Utility Code

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 Office use only

I/We hereby authorize **TATA MUTUAL FUND** to debit (✓) SB CA CC SB-NRE SB-NRO Other

Bank A/c No.:

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With Bank:

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 Bank Name & Branch IFSC

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 MICR

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an amount of Rupees

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 Amount in Words ₹

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FREQUENCY (preselected) Monthly Quarterly Half Yearly As when presented (default) DEBIT TYPE Fixed Amount Maximum Amount

Reference / Folio No.

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 Email Id

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Scheme / Plan reference No. **All Schemes of Tata Mutual Fund** Mobile

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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

D	D	M	M	Y	Y	Y	Y
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to

D	D	M	M	Y	Y	Y	Y
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or Until Cancelled (default)

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
Name (Mandatory) Name (Mandatory) Name (Mandatory)

• 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, based on the instructions as agreed and signed by me.
• 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.

INSTRUCTIONS TO FILL OTM - NACH UPDATE/ CANCELLATION FORM

1. This form is to be used only for Updating and Cancellation of existing NACH form.
 2. Update option is only for updating the "Debit Amount"
 3. The following fields are required and should match with the mandate registered in our records:
 - Date: In format DD/MM/YYYY
 - Bank A/c Type: Tick the relevant box
 - Fill Bank Account Number
 - Fill name of Destination Bank
 - IFSC / MICR code: Fill respective code
 - Mention Maximum Amount
 - Mention Folio Number
 - Mention Application Number
 - Period: Starting date of NACH registration (in format DD/MM/YYYY)
 - Telephone Number (Optional)
 - Email ID
 - Signature as per bank account
 - Name: Mention Holder Name as Per Bank Record
 4. In case of cancellation, future instalments of all SIPs registered under the said mandate will also stand to be ceased. Unit holders are requested to send mandate cancellation request at least 15 days in advance duly signed. Any debit towards purchase or SIP instalments during the intervening period may be processed and Unit holder(s) account would be debited.
 5. On successful modification (update) or cancellation you will receive a confirmation from TME
 6. Investors are deemed to have read and understood the terms and conditions of OTM Facility, SIP registration through OTM facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of Tata Mutual Fund.
 7. Utility Code of the Service Provider will be mentioned by Tata Mutual Fund
 8. Tick on the respective option to select your choice of action and instruction.
 9. The numeric data like Bank account number, Investors account number should be left padded with zeroes.
 10. Amount payable for service or maximum amount per transaction that could be processed in words. The amount in figures should be same as the amount mentioned in words, in case of ambiguity the mandate will be rejected.
 11. For the convenience of the investors the frequency of the mandate will be "As and When Presented"
 12. The mandate will be valid till 31/12/2099
 13. Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking.
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