PAN LEVEL OTM DEBIT MANDATE FORM NACH/DIRECT DEBIT/SI

[Applicable for Lumpsum Additional Purchases as well as SIP Registrations received through various modes except for MINORS]

HDFC MUTUAL FUND BHAROSA APNO KA

UMRN: OFFICE USE ONLY | Date: D D M M Y Y Y Y

Utility Code: OFFICE USE ONLY | ☐ Create ☐ Modify ☐ Cancel

Sponsor Bank Code: OFFICE USE ONLY | I/We authorize: HDFC Mutual Fund

To debit (tick✓): SB/CA/CC/SB-NRE/SB-NRC/OTHER | Bank A/c number:

With Bank: | IFSC/MICR:

an amount of Rupees: | ₹

Debit Type ☐ Fixed Amount ☐ Maximum Amount

Frequency ☐ Daily ☐ Weekly ☐ Bi - Monthly ☐ Monthly ☐ Quraterly ☐ Half-Yearly ☐ Annually ☐ As and When presented

PAN/PEKRN: | Reference 2:

1. 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. 2. 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. 3. 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 authorized the debit. 4. I/We understand and accept that in case transaction/s initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law (including Negotiable Instruments Act).

From: D D M M Y Y Y Y

To: D D M M Y Y Y Y

Signature of Primary Account Holder | Signature of Account Holder | Signature of Account Holder

Maximum period of validity of this mandate is 40 years only.

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

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FOLIO LEVEL OTM DEBIT MANDATE FORM NACH/DIRECT DEBIT/SI

[Applicable for Lumpsum Additional Purchases as well as SIP Registrations received through various modes for MINORS/ Folio based mandate]

HDFC MUTUAL FUND BHAROSA APNO KA

UMRN: OFFICE USE ONLY | Date: D D M M Y Y Y Y

Utility Code: OFFICE USE ONLY | ☐ Create ☐ Modify ☐ Cancel

Sponsor Bank Code: OFFICE USE ONLY | I/We authorize: HDFC Mutual Fund

To debit (tick✓): SB/CA/CC/SB-NRE/SB-NRO/OTHER | Bank A/c number:

With Bank: | IFSC/MICR:

an amount of Rupees: | ₹

Debit Type ☐ Fixed Amount ☐ Maximum Amount

Frequency ☐ Daily ☐ Weekly ☐ Bi - Monthly ☐ Monthly ☐ Quraterly ☐ Half-Yearly ☐ Annually ☐ As and When presented

Folio Nos: | Reference 2:

1. 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. 2. 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. 3. 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 authorized the debit. 4. I/We understand and accept that in case transaction/s initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law (including Negotiable Instruments Act).

From: D D M M Y Y Y Y

To: D D M M Y Y Y Y

Signature of Primary Account Holder | Signature of Account Holder | Signature of Account Holder

Maximum period of validity of this mandate is 40 years only.

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

INSTRUCTIONS to fill the Mandate (All mandatory fields highlighted)

1	2	3	4	5
Write **Name of your Bank** (as in Cheque/ pass book)	Write **Your Bank a/c no.** (as in Cheque/ pass book)	Tick **Bank account type**	Mention any one of **Your bank code IFSC or MICR Code** (as in Cheque/ pass book)	**Mandatory to mention the date**

PAN LEVEL/ FOLIO LEVEL OTM DEBIT MANDATE FORM NACH/DIRECT DEBIT/SI

[Applicable for Lumpsum Additional Purchases as well as SIP Registrations received through various modes except for MINORS]

HDFC MUTUAL FUND BHAROSA APNO KA

UMRN: OFFICE USE ONLY   Date: D D M M Y Y Y Y

Utility Code: OFFICE USE ONLY   ☐ Create ☐ Modify ☐ Cancel

Sponsor Bank Code: OFFICE USE ONLY   I/We authorize: HDFC Mutual Fund

To debit (tick✓) SB/CA/CC/SB-NRE/SB-NRO/OTHER   Bank A/c number

With Bank   IFSC/MICR

an amount of Rupees   ₹

Debit Type ☐ Fixed Amount ☐ Maximum Amount   **Frequency** ☐ Daily ☐ Weekly ☐ Bi - Monthly ☐ Monthly ☐ Quraterly ☐ Half-Yearly ☐ Annually ☐ As and When presented

PAN/PEKRN/ Folio Nos   Reference 2

1. 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. 2. 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. 3. 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 authorized the debit.

From D D M M Y Y Y Y

To D D M M Y Y Y Y

Maximum period of validity of this mandate is 40 years only.

Signature of Primary Account Holder	Signature of Account Holder	Signature of Account Holder
1. Name as in Bank Records	2. Name as in Bank Records	3. Name as in Bank Records

6	7	8	9	10	11
Mandatory to write Payment Start date	**Mandatory to write till payment date**	**Sign as per Bank records** (Sign of all account holder primary & Joint required)	Write your **Name as per Bank records** (All signatories name required)	Write your **Mobile No.**	Write maximum **Mandate Amount** (In both figure & words) That may be debited

INSTRUCTIONS TO FILL ONE TIME MANDATE (OTM) - PAN / FOLIO NOS. LEVEL

1. Investor may register for the One Time Mandate (OTM) for NACH/ECS/DIRECT DEBIT/Standing Instruction (SI), as applicable, for payment towards any future purchase transactions (eg lumpsum, SIP) received through any mode i.e. physical or electronic ("OTM facility"). Investors who have already submitted a One Time Mandate (OTM) form i.e. already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account. However, if such investors wish to add a new bank account towards OTM facility may fill the form.
2. Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned.
3. Mobile Number: Unit holder(s) should mandatorily provide their mobile number on the mandate form.
4. Where the mode of holding in the bank account is "Joint", the OTM mandate is to be signed by all Jointholders. Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to third party verification.
5. **PAN/PEKRN/ Folio Nos.:** Investors, should provide the PAN/PEKRN of the First Holder, as applicable, under Reference 1. Investors, should provide the Folio nos of the First Holder, as applicable.
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 HDFC Mutual Fund.
7. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
8. Utility Code of the Service Provider will be mentioned by HDFC Mutual Fund
9. Tick on the respective option to select your choice of action and instruction.
10. The numeric data like Bank account number, Investors account number should be left padded with zeroes.
11. Please mention the Name of Bank and Branch, IFSC / MICR Code.
12. The maximum amount per transaction that can be processed must be mentioned in words. The amount in figures should be same as the amount mentioned in words. In case of ambiguity, the mandate will be rejected.
13. If the investor wishes to opt for more than one dates / frequencies for debit from the bank account as in case of Systematic Investment Plan, it is advisable to select - "As & when presented".
14. As per NPCI Circular NPCI/NACH/OC No.012/2023-24, mandate can be registered for a maximum duration of 40 years. An investor has to mandatorily enter the 'End Date' of the mandate by filling the date for a maximum period of 40 years from the start date or less.
15. Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking.
16. Investors enrolling for Daily SIP should select "As & when presented" as payment frequency in the OTM.
17. Date has to be filled in mandatorily.

Declaration: I/We hereby declare that the particulars provided in this mandate are correct and complete and hereby agree to participate in the NACH/ECS/Direct Debit/Standing Instructions (SI) and make payments through the NACH platform according to the terms and conditions thereof. I/We further hereby agree and acknowledge that I/we will not hold the AMC and/or responsible for any delay and/or failure in debiting my bank account for reasons not attributable to the negligence and/or misconduct on the part of the AMC I/We hereby declare and confirm that, irrespective of my/our registration of the above mobile number in the 'DO NOT DISTURB (DND)', 'or in any similar register maintained under applicable laws, now or subsequent to the date hereof, I/We hereby consent to the Bank/AMC communicating with me/us in any manner whatsoever on the said mobile number with respect to the transactions carried out in my/our aforementioned bank account(s). I/We will inform the AMC about any changes in my bank account. I/We hereby agree to abide by the terms and conditions that may be intimated to me/us by the AMC/Bank with respect to the NACH/ECS/Direct Debit/SI from time to time.

Authorisation to Bank: This is to inform that I/We have registered for ECS / NACH (Debit Clearing) / Direct Debit / SI facility and that the payment towards my/our investments in the Schemes of HDFC Mutual Fund shall be made from my/our above mentioned bank account with your Bank. I/We hereby authorize the representatives of HDFC Asset Management Company Limited, Investment Manager to HDFC Mutual Fund carrying this mandate form to get it verified and executed. I/We authorize the Bank to debit my/our above-mentioned bank account for any charges towards mandate verification, registration, transactions, returns, etc, as applicable for my/our participation in NACH/ECS/Direct Debit/SI.