

# ONE TIME MANDATE (OTM) FORM



Application No. \_\_\_\_\_

Name of Applicant \_\_\_\_\_

PAN No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

Email ID \_\_\_\_\_

Bank Name \_\_\_\_\_

Account No. \_\_\_\_\_

Dated 

D	D	M	M	Y	Y	Y	Y
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 Place \_\_\_\_\_

⊗ SIGN HERE First/Sole Applicant/Guardian	⊗ SIGN HERE Second Applicant	⊗ SIGN HERE Third Applicant
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- I/We declare that the particulars furnished here are correct. I/We authorize LIC Mutual Fund acting through its service providers to debit my/our bank account towards payment of SIP installments and/or any lumpsum payments through an Electronic Debit arrangement / NACH (National Automated Clearing House) as per my request from time to time.
- If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible.
- I/We will also inform LIC Mutual Fund about any changes in my bank account.
- I/We hereby authorize to honour such payments and have signed and endorsed the Mandate Form.
- Further, I authorize my representative (the bearer of this request) to get the above Mandate verified. Mandate verification charges, if any, may be charged to my/our account.
- I/We hereby agree to read the respective SID and SAI of the mutual fund before investing in any scheme of LIC Mutual Fund using this facility.
- I/We request you to make provisions for me / us and / or an advisor authorized by me to be able to utilize this mandate for any transaction (not limited to SIP and / or Lumpsum payments) in all the folios associated with my PAN mentioned above any mode of transaction available to me time to time from LIC Mutual Fund.
- I give my consent to LIC Mutual Fund Limited and its agents to contact me over phone, SMS, email or any other mode to address my investment related queries and/or receive communication pertaining to transactions / non-commercial transactions / promotional / potential investments and other communication/ material irrespective of my blocking preferences with the Customer Preference Registration Facility.
- The above signatures have to be as per the bank records.
- The above mentioned PAN holder has to be first unit holder in folio/s and one of the holder in the below mentioned bank account.

UMRN \_\_\_\_\_ Bank use \_\_\_\_\_ Date 

D	D	M	M	Y	Y	Y	Y
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Utility Code \_\_\_\_\_ Bank use \_\_\_\_\_  Create  Modify  Cancel

Sponsor Bank Code \_\_\_\_\_ Bank use \_\_\_\_\_ I/We authorize LIC Mutual Fund

To debit (tick ✓)  SB  CA  CC  SB-NRE  SB-NRO  OTHER

Bank a/c Number \_\_\_\_\_

With Bank \_\_\_\_\_ Name of the customers bank \_\_\_\_\_ IFSC/MICR \_\_\_\_\_

an amount of Rupees \_\_\_\_\_ ₹ \_\_\_\_\_

Debit Type  Fixed Amount  Maximum Amount

Frequency  Monthly  Quarterly  Half Yearly  Yearly  As & when Presented

Reference 1 \_\_\_\_\_ PAN No. \_\_\_\_\_ Reference 2 \_\_\_\_\_ All Schemes of LIC Mutual Fund

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 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.

Form 

D	D	M	M	Y	Y	Y	Y
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 Maximum period of validity of this mandate is 40 years only

To 

D	D	M	M	Y	Y	Y	Y
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Maximum period of validity of this mandate is 40 years only Phone No. \_\_\_\_\_

⊗ SIGN HERE Signature of primary account holder	⊗ SIGN HERE Signature of account holder	⊗ SIGN HERE Signature of account holder
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\_\_\_\_\_  
Name as in bank records

**MANDATORY FIELDS :** • Instrument Date • Account Type • Bank A/c number (core banking a/c no only) • Bank name • IFSC code or MICR code (as per the cheque / pass book) • Amount (in words & in figures) • Period start date and end date • Account holder signature • Account holder name as per bank records



(To be filled by the investor)

Investor Name \_\_\_\_\_

PAN No. \_\_\_\_\_

Stamp & Signature