


NSE Mutual Fund Platform

UMRN

F	O	R	O	F	F	I	C	E	U	S	E	O	N	L	Y
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Date

--	--	--	--	--	--	--	--	--	--

Sponsor Bank Code

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Utility Code

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Tick(✓)
 CREATE ☒ I/We hereby authorize NSE Clearing - New Mutual Fund Platform to debit tick (✓) ☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Others
 MODIFY ☐
 CANCEL ☐

Bank A/c number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

with Bank

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 IFSC

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 or MICR

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

an amount of Rupees

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 ₹

FREQUENCY ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ Yearly ☒ As & when presented
 DEBIT TYPE ☐ Fixed Amount ☒ Maximum Amount

IIN

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Mobile No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mandate ID

F	O	R	O	F	F	I	C	E	U	S	E	O	N	L	Y
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Email ID

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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

PERIOD
 From

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 To

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 Or ☒ Until Cancelled

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

- This is to confirm the declaration 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 & signed by me.
- I have understood that I am authorised to cancel/amend this mandate by a appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorised the debit.

PLEASE DO NOT SUBMIT THE FORM WITHOUT THE ENTRY IN THE SYSTEM.

Write
Name of your Bank
(as in Cheque/pass book)

Mandatory

Write
Your Bank a/c no.
(as in Cheque/pass book)

Mandatory

Mention any one of
Your bank code IFSC or
MICR code
(as in Cheque/pass book)

Mandatory

Tick
Bank account type

Mandatory

Mention the date


NSE Mutual Fund Platform

UMRN

F	O	R	O	F	F	I	C	E	U	S	E	O	N	L	Y
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Date

--	--	--	--	--	--	--	--	--	--

Sponsor Bank Code

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 MODIFY ☐
 CANCEL ☐

Bank A/c number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

with Bank

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 IFSC

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 or MICR

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

an amount of Rupees

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 ₹

FREQUENCY ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ Yearly ☒ As & when presented
 DEBIT TYPE ☐ Fixed Amount ☒ Maximum Amount

IIN

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 Mobile No.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mandate ID

F	O	R	O	F	F	I	C	E	U	S	E	O	N	L	Y
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

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

PERIOD
 From

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 To

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 Or ☒ Until Cancelled

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Write
Payment Start date

Mandatory

Sign as per Bank records
(Sign of all account holders
primary & Joint required)

Mandatory

Write
Name of Bank account
holders - as per bank records
(All signatories name required)

Mandatory

Write Mandate Amount
(In both figure & words)
To be debited

Mandatory

Mandatory columns to be filled

① Date in DD/MM/YYYY format	② Select the Account type	③ Customer's bank account number
④ Name of the bank	⑤ IFSC code of customer bank	⑥ Amount in Words
⑦ Amount in figures	⑧ ACH start date	⑨ Name(s) of the customer(s) and Signature(s)