PAN Based One Time Mandate (OTM) Registration Form

IPRU TOUCH

ICICI PRUDENTIAL MUTUAL FUND
TARAKKI KAREIN!

The Transaction facilities offered through IPRUTOUCH form are applicable for Individual, Sole Proprietor & HUF.

PAN / PEKRN										Date:	D	D	M	M	Y	Y	Y	Y

1st Holder's Name	
2nd Holder's Name	
3rd Holder's Name	

I/We hereby request you to register me/us for availing the facility of 'I-PRU TOUCH' and carrying out transactions of additional purchase/ redemption/switch in my/our abovementioned folio through Call Centre and/or also authorize the distributor(s) to initiate the above transactions on my/our behalf. In this regard, I/we also authorize ICICI Prudential Asset Management Company Ltd. (AMC), on behalf of ICICI Prudential Mutual Fund (Mutual Fund) to call/email on my/our registered mobile number/email id for due verification and confirmation of the transaction(s) and such other purposes.

MOBILE No.		Email ID:	

This mobile number will be used as registered mobile number for verification and confirmation of transactions.
(If details provided here are different from the details provided earlier, new details will be updated in our records)

I/We hereby request you to register for NACH facility through OTM Mandate Form.

I/We hereby declare that particulars given above are correct and complete. I/We have read and understood the Terms and Conditions applicable to this facility and that I/we shall abide by the same at all times. Terms and Conditions of this facility as may be amended from time to time are available on our website www.icicipruamc.com. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information or non-confirmation/verification of the transaction due to any reason, I/We shall not hold AMC, Mutual Fund, its sponsors, representatives, service providers, participant banks responsible in this regard.

The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV.

Signature of 1st Holder	Signature of 2nd Holder	Signature of 3rd Holder

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PAN Based OTM

UMRN FOR OFFICE USE ONLY Date

Sponsor Bank Code FOR OFFICE USE ONLY Utility Code FOR OFFICE USE ONLY

Tick (✓)
CREATE ☐
MODIFY ☐
CANCEL ☐

I/We hereby authorize ICICI PRUDENTIAL ASSET MANAGEMENT COMPANY LIMITED to debit (tick ✓) ☐SB ☐CA ☐CC ☐SB-NRE ☐SB-NRO ☐Other

Bank a/c number

with Bank Name of customers bank IFSC or MICR

an amount of Rupees Maximum Amount (Rupees in words) ₹

FREQUENCY ☒ ~~Mthly~~ ☒ ~~Qtly~~ ☒ ~~H-Yrly~~ ☒ ~~Yrly~~ ☑ As & when presented DEBIT TYPE ☒ Fixed Amount ☑ Maximum Amount

PAN Mobile No.

Reference APPLICATION NUMBER 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.

PERIOD
From
To
Or ☒ ~~Until Cancelled~~

Sign: Sign: Sign:

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

Declaration: I/We hereby declare that the particulars given on this mandate are correct and complete and express my willingness and authorize to make payments referred above through participants in NACH/SI/any other mode as may be preferred by the AMC from time to time. I/We hereby confirm adherence to the terms of this facility offered by ICICI Prudential Asset Management Company Limited (the AMC) as specified in Terms & Conditions under Registration of OTM/PAN Based Mandate Facility and amended from time to time and of NACH (Debits). **Authorization to Bank: This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account. I/We have understood that I/we authorized to cancel/amend this mandate by appropriately communicating/amendment to the User entity/corporate or the or the bank where I have authorized the debit.** This is to inform that I/we have registered for this facility and that my/our investment in ICICI Prudential Mutual Fund shall be made from my/our above mentioned bank account with your Bank and to debit my/our account for any charges towards mandate verification, registration, transactions, transactions, returns, etc, as applicable.

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ACKNOWLEDGEMENT

Investor Name:

Folio No:

DATE, STAMP & SIGNATURE