



**PayEezz Mandate Registration Form**

<b>ARN</b>	
<b>EUIN</b>	

Please read all the instructions carefully before filling the form

Please fill in ENGLISH and in BLOCK LETTERS with black ink

Fields marked with (\*) are mandatory and if not filled, the form is liable for rejection

The PayEezz registration form can be submitted for registration at the time of CAN opening (or) independently as a Non-Commercial Transaction (NCT) (or) along with CTF-SIP form.

The PayEezz mandate will be registered under the NACH or ECS or SI or Direct Debit at the discretion of MFU or its appointed Payment Aggregator depending upon the customers bank.

**A. \* UNITHOLDER INFORMATION** (If you have a CAN, please fill in the details):

Common Account Number (CAN)	OR	If you have submitted a CAN Regn Form (CRF), please mention the primary holder PAN/PEKRN or the CRF No below:	
		PAN/PEKRN	CRF No.
Name of the First/Sole Holder		please specify	

**B. \* Group Order Reference Number (GORN) /MFU Mandate Reference Number (MMRN):** (Distributor / MFU / POS user to write the system generated GORN/MMRN below):

GORN	please specify GORN here	MMRN	please specify MMRN here
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**C. \* Authorization of the Bank Account Holder (to be signed by the investor):**

To, The Branch Manager \_\_\_\_\_ (Name of the Bank)

This is to inform you that I/We have registered for making payment towards my / our investments in Mutual Funds through MF Utilities India Pvt Ltd by debit to my/our account directly or through ECS (Debit Clearing). I / We hereby authorize you to honour such payments and have signed and endorsed the Mandate Form. Further, I/We hereby authorize to honour my / our 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 have read and agree to comply with the terms and conditions mentioned overleaf and be bound by the same. I / We hereby declare that the particulars given above are true and correct and agree to make payments referred. I / We will also inform MF Utilities India Pvt Ltd about any changes in my / our bank account.

1st Account Holder's Signature (As in Bank Records)	2nd Account Holder's Signature (As in Bank Records)	3rd Account Holder's Signature (As in Bank Records)
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**BANKER'S ATTESTATION (FOR BANK USE ONLY)**

Certified that the signature of account holder and the details of Bank account and its MICR code are correct as per our records

Signature of Authorized Official from Bank (Bank Stamp and Date)	Bank Account Number
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**D. \* Declaration and Signature(s):-**

I / We hereby confirm and declare that the information provided by me / us is accurate. If the transaction or the Mandate registration cannot be processed due to incomplete or incorrect information provided by me / us, I / We would not hold MF Utilities India Pvt Ltd or its authorized service providers responsible.

Date :   /    /       Place : \_\_\_\_\_

Sign Here	Sign Here	Sign Here
Sole/First Applicant / Guardian / POA Holder	Second Applicant	Third Applicant

**E. DEBIT MANDATE:**

	<b>MF Utilities</b>	<b>Mandate Registration Form - NACH / ECS / SI / Direct Debit</b>	DATE <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Tick (✓)	UMRN	<input type="text"/> UMRN to be specified here	
<input checked="" type="checkbox"/> CREATE	Sponsor Bank Code	<input type="text"/> for office use only	Utility Code <input type="text"/> for office use only
<input checked="" type="checkbox"/> MODIFY	I/We hereby authorize	<input type="text"/> MF UTILITIES INDIA PVT LTD	to debit (✓) <input type="text"/> SB / CA / CC / SB-NRE / SB-NRO / Other
<input checked="" type="checkbox"/> CANCEL	Bank Account Number	<input type="text"/>	
	With Bank	<input type="text"/> SPECIFY BANK NAME	IFSC <input type="text"/> or MICR <input type="text"/>
	an amount of Rupees	<input type="text"/> SPECIFY AMOUNT (in words) ₹ <input type="text"/>	
	Frequency	<input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Half-Yearly <input checked="" type="checkbox"/> Yearly <input checked="" type="checkbox"/> As and when presented DEBIT TYPE <input checked="" type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount	
	CAN #	<input type="text"/> SPECIFY CAN	Phone # <input type="text"/> SPECIFY LANDLINE OR MOBILE NUMBER
	GORN	<input type="text"/> SPECIFY GROUP ORDER REFERENCE NUMBER GENERATED BY MFU	Email ID <input type="text"/> SPECIFY EMAIL ID
	I/We agree for the debit of mandate processing charges by the bank whom I am/We are authorizing to debit my/our account as per latest schedule of charges of the bank.		
	PERIOD	Signature of Primary Account Holder Signature of Second Account Holder Signature of Third Account Holder	
	From <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1. <input type="text"/> Name as in Bank Records 2. <input type="text"/> Name as in Bank Records 3. <input type="text"/> Name as in Bank Records	
	To <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(OR) <input type="checkbox"/> Until Cancelled	

This is to confirm that the declaration has been carefully read, understood and made by me/us. I am/We are authorizing the User entity / Corporate to debit my/our account, based on the instructions as agreed and signed by me/us.  
I/We have understood that I am/We are authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate of the bank where I/We have authorized the debit.

**ACKNOWLEDGEMENT SLIP** (to be filled in by the investor). For any queries please contact the nearest MFU "Point of Service" or call us at 1800-266-1415 (Toll Free) or +91 22 3952 6363.

**MF UTILITIES INDIA PVT. LTD.,** Address: 103-105, 1st Floor, Orion Business Park, Ghodbunder Road, Kapurbawdi, Thane (West) - 400 610, India

Received from Mr. / Ms. M/s. \_\_\_\_\_ an application for PayEezz registration.

<b>POINT OF SERVICE STAMP &amp; SIGNATURE</b>
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## GENERAL TERMS AND CONDITIONS

1. The PayEezz Mandate can be registered at the time of CAN Registration or independently or along with SIP Registration.
2. The PayEezz mandate will be registered under the best suited mode i.e. NACH or ECS or SI or Direct Debit at the discretion of MFU or its appointed Payment Aggregator.
3. Once the mandate is registered successfully, MFU will communicate to the investor/s the PayEezz Reference Number (PRN) and the mode under which the mandate is registered.
4. Investors can quote the PRN for their Lump sum or SIP investments thereafter and the payment will be debited to the customers account.
5. A PayEezz Mandate can only be registered for the Bank Account already registered under the CAN. 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 for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to verification with the relevant CAN data as well as third party verification.
6. Where the cancelled cheque or a copy of the cheque does not mention the bank account holders' name(s), investor should provide self-attested bank pass book copy / bank statement / bank letter to substantiate that the first unit holder is one of the joint holders of the bank account. In case of a mismatch, it will be deemed to be a 3rd party account and the mandate registration may not be accepted.
7. Please note that in the event of a mismatch between the bank account details mentioned in the mandate form and as appearing in the proof of account submitted, the registration may not be accepted for processing.
8. **AUTHORISATION BY BANK ACCOUNTHOLDER(S)**
  - (a) - Please indicate the name of the bank & branch, bank account number.
  - (b) - If the mode of operation of bank account is joint, all bank account holders would need to sign at the places marked.
9. Applications incomplete in any respect are liable to be rejected. MFU / AMC / Service Provider shall have absolute discretion to reject any such Application Forms.
10. In case the investor's bank chooses to cross verify the mandate with him/her as the bank's customer, investor would need to promptly act on the same. MFU / AMC / Service Provider will not be liable for refusal to register the mandate by investors bank / branch or any transaction failures or any charges that may be levied by the Bank / Branch on investor / applicant.
11. MFU / AMC or other service providers shall not be responsible and liable for any damages / compensation for any loss, damage etc. incurred by the investor. The investor assumes the entire risk of using this facility and takes full responsibility.
12. **DECLARATION & SIGNATURES**

This section needs to be signed by the applicant(s)/ unit holder(s) at the places marked as per the mode of holding recorded with us (i.e. 'Single', 'Anyone or Survivor' or 'Joint').

## TERMS AND CONDITIONS FOR ECS CLEARING

1. The cities / banks / branches in the list may be modified/updated/changed/removed at any time in future entirely at the discretion of respective Mutual Fund without assigning any reasons or prior notice. If any city / bank / branch is removed, SIP instructions for investors in such city / bank / branch via (ECS) (Debit Clearing) / Direct Debit route will be discontinued without prior notice.
2. **List of Cities for SIP ECS facility:**

Agra, Ahmedabad, Allahabad, Amritsar, Anand, Asansol, Aurangabad, Bangalore, Bardhaman, Baroda, Belgaum, Bhavnagar, Bhilwara, Bhopal, Bhubaneswar, Bijapur, Bikaner, Calicut, Chandigarh, Chennai, Cochin, Coimbatore, Cuttack, Darjeeling, Davangere, Dehradun, Delhi, Dhanbad, Durgapur, Erode, Gadag, Gangtok, Goa, Gorakhpur, Gulbarga, Guwahati, Gwalior, Haldia, Hubli, Hyderabad, Indore, Jabalpur, Jaipur, Jalandhar, Jammu, Jamnagar, Jamshedpur, Jodhpur, Kakinada, Kanpur, Kolhapur, Kolkata, Kota, Lucknow, Ludhiana, Madurai, Mandya, Mangalore, Mumbai, Mysore, Nagpur, Nasik, Nellore, Patna, Pondicherry, Pune, Raichur, Raipur, Rajkot, Ranchi, Salem, Shimla, Shimoga, Sholapur, Siliguri, Surat, Thirupur, Tirunelveli, Tirupati, Trichur, Trichy, Trivandrum, Tumkur, Udaipur, Udipi, Varanasi, Vijaywada, Vizag
3. Applications for SIP ECS facility would be accepted only if the bank branch participates in local MICR/ECS clearing.
4. In case the investor's bank chooses to cross verify the ECS debit mandate with him/her as the bank's customer, investor would need to promptly act on the same. MFU / AMC / Service Provider will not be liable for any transaction failures due to rejection of the transaction by investors bank / branch or its refusal to register the SIP mandate or any charges that may be levied by the Bank / Branch on investor / applicant.

## INSTRUCTIONS TO FILL THE NACH / ECS / SI / DIRECT DEBIT MANDATE

1. UMRN Code, Sponsor Code, Utility Code, Reference 1 & Reference 2 fields are for official use only. Please do not write anything in these boxes/spaces.
2. The following information has to be mandatorily filled in the Mandates. In case any of these fields are not filled, the mandate is liable for rejection.
  - (a) Please tick the appropriate Account Type and furnish the Bank Account Number from which the SIP instalment/s is/are to be debited.
  - (b) Please mention the Bank Name, 11 Digit IFSC code, 9 Digit MICR Code of your Bank in the appropriate boxes provided for the purpose. The MICR code is the number appearing next to the cheque number on the MICR band at the bottom of the cheque. In the absence of these information, Mandate registration is liable to be rejected.
  - (c) Please mention the maximum amount that can be debited using this mandate. The amount needs to be mentioned both in words as well as numbers.
  - (d) Please mention your Mobile Number and Email Id on the mandate form.
  - (e) Please provide the Start and End date for the period which the Mandate should be active. If you do not wish to provide an End Date, please tick the check box for 'Until Cancelled'.
3. **SIGNATURES**

The mandate needs to be signed by all the account holders in line with the mode of holding recorded with the investor's bank. The Account holders names have to be written as per their mode of holding in Account.