One Time Bank Mandate (NACH/OTM/Direct Debit Mandate Form)

UNIFI MUTUAL FUND

UMRN FOR OFFICE USE ONLY | D D M M Y Y Y Y

Tick (✓)

CREATE	☐
MODIFY	☐
CANCEL	☐

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

I/We hereby authorize Unifi Mutual Fund to debit bank a/c type (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 Amount in words ₹ In figures

Frequency ☒ Weekly ☒ Monthly ☑ As and when presented **Debit Type** ☒ Fixed Amount ☑ Maximum Amount

PAN **Phone No.** +91

Reference Folio Number **Email ID**

PERIOD

D D M M Y Y Y Y

D D M M Y Y Y Y

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

As per the NPCI circular dated October 31, 2023, effective April 1,2024, the mandate can be for a maximum duration of **40 years from the date of application.**

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.

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

Systematic Investment Plan Form

UNIFI MUTUAL FUND

Distributor's ARN/RIA Code/PMRN #Z	ARN / RIA / PM Name	Sub-Broker's ARN	Sub-Broker's Code**	EUIN***

** As allotted by ARN holder *** Employee Unique Identification Number

Declaration for "Execution-only" transactions (only where EUIN box is left blank)

I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or not withstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

#By mentioning RIA/PMRN code, I/ We authorize you to share with the Investment Adviser/ Portfolio Manager the details of my/our transactions in the scheme(s) of Unifi Mutual Fund.

Signature(s) to be signed by all Applicants

Sole/First/Guardian/Authorized Signatory/POA | Second Applicant | Third Applicant

☐ **Existing OTM** **Folio No.** _____ **Sole/First Applicant** (Mr/Ms/Mrs/M/s) _____

Details of SIP Investment

Scheme 1 _____ **Plan** ☐ Regular ☐ Direct **Option** Growth

Investment Amount (In figure)$ _____ **(in words)** _____

SIP Frequency ☐ Weekly (Only for Unifi Flexi Cap Fund) ☐ Monthly **SIP Date**$ D D **SIP Start Date**$ M M Y Y Y Y **SIP End Date**^ M M Y Y Y Y

Scheme 2 _____ **Plan** ☐ Regular ☐ Direct **Option** Growth

Investment Amount (in figure)$ _____ **(in words)** _____

SIP Frequency ☐ Weekly (Only for Unifi Flexi Cap Fund) ☐ Monthly **SIP Date**$ D D **SIP Start Date**$ M M Y Y Y Y **SIP End Date**^ M M Y Y Y Y

$Please refer to scheme Key Information Memorandum(KIM)/Scheme Information Document (SID) for minimum amount & frequency. | ^Maximum Duration: 40 years

Details of DP Account

If you wish to hold your investment in dematerialized mode, please furnish the below details and enclose a copy of the Client Master/Transaction Cum Holding Statement/ Cancelled delivery , instruction slip that you may have received from your Depository.

DP Name _____

NSDL DPID I N **CDSL DPID**

Signature(s) as per Unifi Mutual Fund Records (in case you have existing folio) (Mandatory)

Signature of Sole/First Applicant /Guardian | Signature of Second Applicant | Signature of Third Applicant

ISC Date Time Stamp Reference No.

Acknowledgment – SIP Form

UNIFI MUTUAL FUND

Folio No _____ **Name of the Investor** _____

Scheme Name, Plan & Option _____ **SIP Amount** _____

Fixed SIP Amount _____

Guidelines for Filling Up The SIP Form

Following fields need to be filled mandatorily

1. Date: In format DD/MM/YYYY
2. Bank A/c Type: Tick the relevant box
3. Fill Bank Account Number
4. Fill name of customer's bank
5. IFSC / MICR code: Fill respective code
6. Mention Maximum Amount
7. Reference : Mention Folio Number/PAN
8. Telephone Number (Optional)
9. Email ID
10. Period: Starting date and the ending date
11. Signature as per bank account of NACH registration (not more than 40 years) in the format (DD/MM/YYYY)
12. Name: Mention Holder Name as Per Bank Record

One Time Mandate (OTM) is an authorization to the bank issued by an investor to debit their bank account up to a maximum limit as provided by the investor in the OTM mandate. This would facilitate debits for all purchases initiated by the investor up to maximum limit from the bank account provided in the section.

1. To avail this facility the investor of the fund shall be required to submit one time mandate, filled in with all the details in the designated mandate form. Please attach a cancelled cheque copy.
2. Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the one updated in the application form/ existing in the folio, the details provided on the mandate will be updated at the time of creation of folio/in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
3. 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.
4. 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 Unifi Mutual Fund.
5. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
6. Utility Code of the Service Provider will be mentioned by Unifi Mutual Fund
7. Tick on the respective option to select your choice of action and instruction.
8. The numeric data like Bank account number, Investors account number should be left padded with zeroes.
9. Please mention the Name of Bank and Branch, IFSC / MICR Code also provide An Original Cancelled copy of the cheque of the same bank account registered in One Time Mandate.
10. Amount payable for service or maximum amount per transaction that could be processed in words. The amount in figures should be same as the amount mentioned in words, in case of ambiguity the mandate will be rejected.
11. For the convenience of the investors the frequency of the mandate will be "As and When Presented"
12. Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking.
13. Unifi MF may amend the above terms and conditions, at any time without prior notice to investors and such amended terms and conditions will there upon apply to and will binding on the investors.
14. For period selection investor has option to mention end date.
15. The validity of the mandates can be only for a maximum duration of 40 years or below from the Start Date.

Instructions for SIP Form

I. DISTRIBUTOR INFORMATION

a. Please mention 'DIRECT' in case the application is not routed through any one distributor.

b. Pursuant to SEBI circular dated September 13, 2012, mutual funds have created a unique identity number of the employee/ relationship manager/ salesperson of the distributor interacting with the investor for the sale of mutual fund products, in addition to the AMFI Registration Number (ARN) of the distributor. This Employee Unique Identification Number is referred as "EUIN". EUIN aims to assist in tackling the problem of mis-selling even if the employee/relationship manager/salesperson leaves the employment of the distributor or his/her sub broker. Quoting of EUIN is mandatory in case of advisory transactions.

c. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided, in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIN of the Sales Person (if any) in the "EUIN" column.

d. Distributors are advised to ensure that they fill in the RIA code, in case they are a Registered Investment Advisor.

e. Investors are requested to note that EUIN is applicable for transactions such as Purchases, Switches, Registrations of SIP / STP and EUIN is not applicable for transactions such as Instalments under SIP/ STP / SWP / Reinvestments, Redemption, SWP Registration.

f. EUIN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ARN-14/12-13 dated July 13, 2012.

g. Please tick the box provided for EUIN declaration in this section in case the ARN is mentioned in the distributor section and the EUIN is left blank.

II. General Instructions

1. SIP through NACH/OTM Facility is available on all dates except on 29th, 30th and 31st of the month . In case these days are non-business days for the scheme, then SIP will be processed on the next business day.
2. The investor agrees to abide by the terms and conditions of NACH facility of NPCI.
3. The end date of SIP registration for unitholders (other than Minor holders) will be considered as the end date of NACH mandate or the end date mentioned by the investor whichever is earlier.
4. Investor will not hold AMC / Trustee / Unifi MF and its service providers responsible if the transaction is delayed or not effected by the Investor's Bank or if debited in advance or after the specific SIP date due to various reasons or for any bank charges debited by his banker in his account towards NACH Registration / Cancellation / Rejections.
5. The AMC/ Trustee/ Unifi MF reserves the right to reverse allotments in case the NACH/OTM is rejected by the bank for any reason whatsoever.
6. The AMC/ Trustee/ Unifi MF 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 the facility of NACH/OTM and takes full responsibility for the same.
7. The AMC/Trustee reserves the right to discontinue or modify the SIP facility at any time in future on a prospective basis.
8. The AMC/ Trustee reserves the right to discontinue the SIP in case of Direct Debit through NACH routes are rejected by the investor bank for any reasons.
9. For scheme related details, please refer to the Scheme Information Document (SID) / Key Information Memorandum (KIM) and the addendum issued from time to time.
10. The AMC/ Trustee reserves the right to reject any application without assigning any reason thereof.
11. The AMC will endeavor to have the cancellation of registered SIP mandate within 2 business days from the date of receipt of the cancellation request from the investor. The existing instructions/mandate would continue till the date that when it is confirmed the SIP has been cancelled.
12. For intimating the change in bank particulars, please use the NACH/OTM Form to modify transaction limit or add / remove banks from the NACH/OTM facility. Also, fill-up all the relevant details as applicable. Requests for any changes / cancellation in the NACH Bank Mandate request should be submitted at least 30 Business days in advance.
13. Where a onetime mandate is already registered in a folio for a bank account, the Unit Holder(s) will have to fill only the SIP Registration Form and there is no need of a separate cheque to be given along with the SIP Registration Form.
14. SIP Frequency – Unifi Dynamic Asset Allocation Fund (Monthly – Min. amount – ₹ 500/–, Min. no. of instalments – 12) | Unifi Flexi Cap Fund (Weekly & Monthly – Min. amount – ₹ 500/–, Min. no. of instalments – 12) | Unifi Liquid Fund (Monthly – Min. amount – ₹ 1000/–, Min. no. of instalments – 12)
15. **Any Day SIP**: Investors can choose any preferred date except for 29th, 30th and 31st of the month as Monthly SIP debit date and any day except Wednesday for weekly SIP debit.(Only for Unifi Flexi Cap Fund).
16. SIP start date shall be at a gap of minimum 15 days prior to the date of first debit date.

The following applications will be considered as **'Not In Good Order' (NIGO)** and are liable to be rejected:

- If folio number mentioned in the SIP form does not match Folio Number mentioned in NACH/OTM registration mandate Form.
- If the folio number mentioned in the NACH/OTM mandate registration form does not match with our record, the NACH/OTM mandate will not be registered.
- If the SIP period mentioned in SIP via NACH/OTM form is beyond the NACH/OTM validity period or NACH/OTM validity period expired.

17. In case of minor application, AMC will register standing instructions till the date of minor attaining majority, though the instructions may be for a period beyond that date. Prior to minor attaining majority, AMC shall send advance notice to the registered correspondence address advising the guardian and the minor to submit an application form along with prescribed documents to change the status of the account to 'major'. The account shall be frozen for operation by the guardian on the day of minor attains the age of majority and no fresh transactions will be permitted till the documents for changing the status are received

UNIFI MUTUAL FUND

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