



Registration for I-PRU TOUCH



(The Transaction facilities offered through IPRUTOUCH form are not applicable for NRIs/Overseas Investors.)

FOLIO No.													Date:	D	D	M	M	Y	Y	Y	Y
1 st Holder's Name																					
2 nd Holder's Name																					
3 rd 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:												
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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.

Signature of 1 st Holder	Signature of 2 nd Holder	Signature of 3 rd Holder
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ONE TIME MANDATE (OTM) FORM

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 TO BE MENTIONED												₹					
FREQUENCY	<input checked="" type="checkbox"/> Mthly	<input checked="" type="checkbox"/> Qtly	<input checked="" type="checkbox"/> H-Yrly	<input checked="" type="checkbox"/> Yrly	<input checked="" type="checkbox"/> As & when presented	DEBIT TYPE	<input checked="" type="checkbox"/> Fixed Amount	<input checked="" type="checkbox"/> Maximum Amount										
Folio No.													Mobile No.					
Reference	NOT REQUIRED IF FOLIO NUMBER IS MENTIONED												Email ID					
PERIOD																		
From					Signature Primary Account holder				Signature of Account holder				Signature of Account holder					
To																		
Or	<input type="checkbox"/> Until Cancelled				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 participation in NACH/ECS. I/We hereby confirm adherence to the terms of OTM facility offered by ICICI Prudential Asset Management Company Limited (the AMC) and as amended from time to time and of NACH/ECS (Debits). **Authorisation to Bank:** This is to inform that I/we have registered for ECS / NACH (Debit Clearing) facility and that my/our payment towards my/our investment in ICICI Prudential Mutual Fund shall be made from my/our above mentioned bank account with your Bank. I/We authorize the representatives of the AMC carrying this mandate form to get it verified and executed. I/We authorize the bank to debit my account for any charges towards mandate verification, registration, transactions, returns, etc, as applicable. 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. This is to confirm that the declaration/terms & conditions have been carefully read, understood and made by me/us.

Registration for I-PRU TOUCH



ACKNOWLEDGEMENT

Investor Name: _____

Folio No: _____

DATE, STAMP & SIGNATURE

Mandatory fields in OTM form as per NPCI:

- Bank account number and Bank name
- IFSC and/or MICR Code
- Mobile no & Email ID
- Folio number or application number
- Signatures as per bank records
- Mandate start date, end date or until cancelled
- Account type to be selected
- Name as per bank records
- Transaction type to be selected.
- Maximum amount to be mentioned.