



# Auto debit form-NACH/OTM Registration

UMRN

Date

Tick (✓)

Sponsor Bank Code  FOR OFFICE USE

Utility Code  FOR OFFICE USE

CREATE	<input type="checkbox"/>
MODIFY	<input type="checkbox"/>
CANCEL	<input type="checkbox"/>

I/We, hereby authorize  Taurus Mutual Fund

To debit (tick ✓)  SB / CA /CC SB-NRE /SB-NRO /Other

Bank a/c Number:

With Bank

IFSC

or MICR

An amount of Rupees

₹

FREQUENCY  Mthly  Qtly  H-Yrly  Yrly  As & when presented

DEBIT TYPE  Fixed Amount  Maximum Amount

Unique ID

Phone No.

Reference 2

Email ID

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

PERIOD

From

Signature Primary Account Holder

Signature of Account Holder

Signature of Account Holder

To

Or  Until cancelled

- Name as in bank records
- Name as in bank records
- Name as in bank records

- 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, based on the instruction 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 or the bank where I have authorized the debit.