## **OTM - NACH Update/ Cancellation Form**

WHI	TFN	٨K		UN	IRN										Bank us	S@									Da	te	D D	M	М	Υ	Y
CAPITAL	MUTUAL	. FUND		Spc	nsor	Bank	ınk Code						Bank		se						X	X CREA		ΙΈ		X MODIF		<b>′</b>		CANCEL	
			Uti	lity C	ode								Bank use							I/We autho		hereby orize WhiteOak Ca		apital Mutual Fund		ınd					
To Debit (tid	:k <b>√</b> )	) [	SE	3 [	CA		СС	; [	SB	-NRE	[	SB	-NRO		Othe	Ba	ank A	A/c													
With Bank		Name o										f customers bank								IFSC / MICR											
An Amount	Of R	Rupe	es																						₹						
DEBIT TYPI	PE X Fixed				noun	t	✓ Maximum An				Amou	nount Ff			REQUENCY			X Mth	nly	X	Qtly		X H-Y	rly	ıY 🗶	rly	<b>✓</b>	As &	when p	rese	nted
Reference 1						Folio No.					).						Reference 2				S					cheme Name					
1. 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. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. am authorizing the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. 3. 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.															y me/us. ellation /																
				PER	OD																										
From	D	D	М	Μ	Υ	Y	Υ																								
То	D	D	D M M Y Y Y Y									Signature Of Primary Assount He						older Signature (				Of Joint Account Holder			r	Signature Of Joint Account Holder				loldor	
Or	X Until Cancelled									_	Signature Of Primary Account Ho						JEI	Signature (			Of Joint Account Holder			-	Olgitature Of John Accoun				unti	loidei	
Phone No.									1. Name Of Primary Account Hold							r 2. Name Of				Of Joint Account Holder				3. Name Of Joint Account Holder							
																		_													

## INSTRUCTIONS TO FILL OTM - NACH UPDATE/ CANCELLATION FORM

- 1. This form is to be used only for Updating and Cancellation of existing NACH form.
- 2. Update option is only for updating the "Debit Amount"
- 3. The following fields are required and should match with the mandate registered in our records:
  - · Date: In format DD/MM/YYYY
  - · Bank A/c Type: Tick the relevant box
  - · Fill Bank Account Number
  - · Fill name of Destination Bank
  - IFSC / MICR code: Fill respective code
  - · Mention Maximum Amount
  - · Mention Folio Number
  - · Mention Application Number
  - · Period: Starting date of NACH registration (in format DD/MM/YYYY)
  - · Telephone Number (Optional)
  - Email ID
  - · Signature as per bank account
  - · Name: Mention Holder Name as Per Bank Record
- 4. In case of cancellation, future instalments of all SIPs registered under the said mandate will also stand to be ceased. Unit holders are requested to send mandate cancellation request at least 15 days in advance duly signed. Any debit towards purchase or SIP instalments during the intervening period may be processed and Unit holder(s) account would be debited.
- 5. On successful modification (updation) or cancellation you will receive a confirmation from WhiteOak Capital MF
- 6. 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 WhiteOak Capital MF
- 7. Utility Code of the Service Provider will be mentioned by WhiteOak Capital MF
- 8. Tick on the respective option to select your choice of action and instruction.
- 9. The numeric data like Bank account number, Investors account number should be left padded with zeroes.
- 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. The mandate will be valid till 31/12/2099
- 13. Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking.