

## SIP AUTO DEBIT (ECS) FACILITY FORM

| APPLICAN  | T'S INFORMATION  |  |  |  |   |  |   |   |  |   |  |   |   |  |
|---|--|--|--|--|---|--|---|---|--|---|--|---|---|--|
| Application<br>(For New A   |  |  |  |  | OR  | Folio<br>(For  | No.<br>Existing Unit hold   | ers)  |  |   |  |   |   |  |
| ☐ Mr. ☐ M   | ls.  M/s  Minor (  | Others   | Name of Sole   | e / First Applic   | cant (First / Midd  | le / Last Name)  |   |   |  |   |  |   |   |  |
| ☐ Mr. ☐ M   | ls.  M/s Others  |  | Name of Seco   | ond Applicant  |   |  |   |   |  |   |  |   |   |  |
| ☐ Mr. ☐ M   | Is. M/s Others   |  | Name of Thir   | rd Applicant   |   |  |   |   |  |   |  |   |   |  |
| ☐ Mr. ☐ M   | Is. M/s Others   |  | Name of Gua  | ırdian (in case  | e of Minor) OR Cor  | ntact Person (ir   | case of Non-indiv   | idual Inv   | estors) /  | POA Ho  | lder   |   |   |  |
| Mode of Ho  | olding (please ✓)  | SingleJoint#   | Anyone or Su   | rvivor (# Defa   | ault, in case of more   | than one applicar  | it and not ticked)  |   |  |   |  |   |   |  |
| E-Mail  |  |  |  |  |   |  |   |   |  |   |  |   |   |  |
| Fire  | st / Sole Applicant - Proo   | f Enclosed (✓) F   | PAN KYC Letter   | Second App   | plicant - Proof Enc   | losed (✓)  | PAN KYC Letter  | Third   | Applicant  | t - Proof   | Enclosed   | i (✓)   | PAN   | KYC Letter   |
| PAN   |  |  |  |  |   |  |   |   |  |   |  |   |   |  |
| Gua   | ardian** - Proof Enclosed  | l (✓) F  | PAN KYC Letter   | PoA Holder   | r - Proof Enclosed  | (✓)  | PAN KYC Letter  | PoA H   | older - Pr   | roof Encl   | osed (✓)   | )   | PAN   | KYC Letter   |
|   |  |  |  |  |   |  |   |   |  |   |  |   |   |  |
|   |  |  |  |  | 2nd 🗌 3rd App   | licant   |   | 1s  | t 2nd  | d 🗌 3rd   | d Applica  | ant   |   |  |
| ** If the So  | ole / First Applicant is   | a Minor then s   | tate Guardian's  | PAN Number   | •   |  |   |   |  |   |  |   |   |  |
|   |  |  |  |  |   |  |   |   |  |   |  |   |   |  |
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|   |  |  |  |  |   |  |   |   |  |   |  |   |   |  |
| ECS / STA   | ANDING INSTRUCT  | ION DEBIT BA   | ANK ACCOUNT  | DETAILS (  | MANDATORY)  | (Please read   | Terms & Conditio  | ns)   |  |   |  |   |   |  |
| I / We  |  | A/c Holder as in   |  |  | -   |  | lutual Fund/BNP P   |   |  | _   |  |   |   |  |
| authorised  | service providers, to de   | bit my/our follow  | wing bank accoun   | nt by ECS (Deb   | oit Clearing) / Dire  | ect Debit / Stan   | ding Instruction fo   | collect   | on of SIF  | payme   | nts as p   | er Terms  | and Cor   | nditions   |
| Name of Ba  | ank & Branch   |  |  |  | City  |  | A/c N   | o   |  |   |  |   |   |  |
| A/c. Type (F  | Please ✓) Savings  | Current (  | Cash Credit. 🗆 N   | NRE □NRO   | 9 Digit MICR Co   | ode  |   | Man   | datory F   | -nclosur  | re 🗆 <b>c</b>  | opv of Ca   | ancelled  | d Cheque   |
| rve. Type (I  | tease V) savings   |  | easii cicaiti  | 11110  | J DIGIT WHICH C   |  |   |   | aatory L   |   |  | opy of co   |   |  |
| Cahama  |  |  |  |  |   |  |   |   |  |   | _  |   |   |  |
| Scheme  |  |  |  |  |   | Ontion   |   |   |  |   |  |   |   |  |
| Plan  |  |  |  |  |   | Option   |   |   | 1.   |   |  |   |   |  |
| Plan  | ebit Date (Please✓ any   | v one only):   | Lst 7th 1  | 15th   | th (of the month)   |  | Frequency   |   | Ins  | stalmen   |  | nt  ₹   |   |  |
| Plan  | _  | one only): 1   | Lst  | 15th   |   |  | Frequency   |   | Ins  |   |  | nt <b> </b> ₹   |   |  |
| Plan SIP Auto De  |  | From M   | Lst7th:  |  | M M / Y   |  | Frequency   |   | Ins  |   |  | nt <b> ₹</b>  |   |  |
| Plan SIP Auto De  | Period Regular   | From M   | Lst  | Y Y To   | M M / Y   | )<br>  Y   Y   Y   | Frequency   |   | Ins  |   |  | nt <b> </b> ₹   |   |  |
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