Deutsche Mutual Fund

SYSTEMATIC INVESTMENT PLAN (SIP) FORM (Please use separate SIP Form for investing in each Scheme / Plan)

Deutsche Asset & Wealth Managemen

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BROKER INFORMATIO BROKER NAME & ARN	N SUB-BROKER ARN		FMP	LOYEE UN	IOLIE	SII	B-BROKER (ODE	Applica	tion No.						
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										A	ррисаис	JII Date 6	THITE			
pfront commission shall be paid direc IWe hereby confirm that the EUIN stributor/sub broker or notwithstandi	box has been intentionally le	eft blank by r	ne/us a	s this trans	saction	is executed witl	nout any inte	raction o	or advice by	the emp	loyee/rel	lationship			person (of the al
First / Sole Applicant / Guar	dian	Second /	Applica	int		-	Third A	pplicant				Powe	er of Atto	orney H	older	
EXISTING FOLIO NUMBE	R			КУС 🗆	Yes	☐ No. Com	mon Applica	ition Fori	m No. (for N	ew Inve	stor)					
SIP AUTO DEBIT (ECS) F.	ACILITY FORM Regist	ration cu	n Ma	ındate Fo	orm fo	or ECS (Deb	it Clearin	g)								
New SIP Registration - by exist	ing investor Change in B	ank Account	for an e	existing inve	estor wi	ith DMF Ne	w SIP Regist	ration - b	y new invest	or (Also	attach th	ne new Ap	plication	n Form	duly filled	d & sign
SIP/ENROLLMENT DETA	ILS															
Scheme Name Deption (Please ✓) ☐ Growth ☐ Dividend Mode (Please ✓) ☐ Rein	vestment Payout Ai	mount per S	P Insta	allment Rs		Plan (Please ✓) □ Daily		F		Mor	thly	Quarte	erly [Half Y	early [Ann
SIP Dates (for option other than dain n case of valid application received ubcribes to units of a plan other the For Daily SIP please refer to key so	without indicating any cho an the single plan, then by o	ice of Option	ns/Divid	dend Mode	e, it will		_	M M	einvestmen	Y Y	To ault, for	M M all Scher	ne(s)/Pla	Y Y an(s). Ir	case th	ne inves
☐ Micro SIPs (Please ②) (Investme		s. 50,000/- p	er annı	um under S	SIP regi	istration)					(Re	equired o	only in c	ase of F	'AN not	provide
	Photo Identificatin E	Oocument Ty	/ре (Ма	andatory)					I	D Card N	lo. / Ref	ference N	10.			
1st Applicant																
2nd Applicant																
3rd Applicant																
ECS DEBIT BANK ACCOU	JNT DETAILS (MAND	ATORY)														
/We hereby authorise Deutsche A account by ECS (Debit Clearing) for			estmer	nt Manage	r to De	utsche Mutual	Fund acting	through	their auth	orised se	ervice p	roviders	to debit	my/ou	followi	ing ban
Name of the Account Holder as in I	Bank Records															
Account No					Ad	ccount Type (Pl	ease ✓) □	Savings	s 🗆 Currer	nt \square N	RE 🗆 I	NRO 🗆	FCNR	Oth	ers	
Bank Name						Bank City					PIN Cod	de				
Branch Address														т т		
MICR Code			This	is a 9 digit	numbe	er next to your	Cheque No.	IFS	C Code							
PAYMENT MECHANISM	Option I : Through Ch	eques To	tal Che	eques		Cheq	ues Nos. F	rom		Ш	\Box	То		\Box	Ш	\Box
rawn on Bank								Branch								
Option II : Debt through Auto Dompleted Application Form, SIP A										and sub	sequent	installm	ent amo	ounts sh	ould be	the san
AUTHORISATION OF TH This is to inform I/We have regis our below mentioned bank acco providers and representative car Account No.	stered for the RBI's Electron unt number with your bank.	ic Clearing S I/We autho	Service rise De	(Debit Cleautsche Ass	, aring) a set Mar	and that my/ou	payment to									
SIGNATUR	E/S AS PER DEUTSCHE MU	JTUAL FUNE)					SIGN	NATURE/S A	AS PER E	BANK RI	ECORDS				
First/Sole Account Holder								First/Sole Account Holder								
Second Account Holder							Second Account Holder									
Third Account Holder						Third Account	Holder									
CKNOWLEDGEMENT SLIP	(To be filled in by the								lication No.							
OKINO WEEDGEIVIENT SEIF													Co	ollection	Centre	Stamp
eceived from Mr./Ms./M/s.															ignature	
n application for SIP enrolment in the S an	Scheme															
tal Amount (Rs.)																
rawn on									Monthly _	Quarte	rly 🔲 ۱	Weekly				