ING		STMENT FORM		h dana dilana da		
1. AGENT INFORMATION	This form should be submitted along with the Cor	mmon Application form. Please read the	instructions carefully	2. EXISTING L		OFFICE USE ONLY
Broker Code / Name (AMFI registered mer	mbers only) Sub Broker Code:		ase left blank,	Folio No.		Receipt Date / Time
ARN Code:	ARN of Sub Broker:	(EUIN)	low confirmation			
I/We hereby confirm that the EUIN box has be or notwithstanding the advice of in-appropria	een intentionally left blank by me/us as this is an "ex ateness, if any, provided by the employee/relationsh	ecution-only" transaction without any in hip manager/sales person of the distribute	teraction or advice by or and the distributor	/ the employee/relati has not charged any	onship manager/sa advisory fees on th	les person of the above distribution is transaction.
irst / Sole .pplicant/ MAND Guardian	Second Applicant	MANDATORY		Third Applicant	MAI	NDATORY
	e investor to the AMFI registered Distributors base including the service rendered by the distributor.	d New Investor (Investing first t	ime in Mutual Fund	l) 🗌 Existing Ir	ivestor	
3. UNIT HOLDER INFORMATION				, .		
Name of First / Sole Applicant*	Mr. 🗌	Ms. M/s.	AME			Date of Birth
Mobile			Email			
Statement in physical copy please tick at the appropria PAN/PEKRN & KYC Mandatory* (Please provided attested PAN/PEKRN card cc Enclosed (✓)	the AMC will send the account statement, annual report at ate place in the application form. On request, the AMC will First / Sole Applicant*	I change the mode of sending the account sta Secon	ddress is given by the u tement. The frequency in ad Applicant*	unit holder in the applic. mentioned above is ap	ation form. In case the blicable only for email	aily Weekly Monthly investor wants to receive the Acco account statements. Third Applicant* KYC Acknowledgment attach
5. CANCELLATION Ush to canc	el my SIP					
6. SIP TRANSACTION DETAILS	SIP MICRO SIP					rect if investing directly with the ate direct in the ARN column of
Scheme		Plan			the application	forms. Please read SID /
	Dividend Distributor Direct				Addendum for o	
SIP Date 1^{st} 10^{th} 15^{th} 27^{th}						
IP Amount (per installment): 7. FIRST CHEQUE DETAILS		Frequency	Monthly (Quarterly (Jan, A	or, July, Oct)	* Default Op
			Sovings 🗖 Cu		□ NRO □	FCNR Others
Cheque Amount		Account Type	Savings 🗌 Cu	irrent 🗌 NRE		
heque Number						
heque Date	YTYTY	Bank Branch				
	standard cheques shall be acceptable.	.) Branch City				
8. BANK ACCOUNT DETAILS FOR	AUTO DEBIT (Mandatory)					
Name of 1st Account Holder						
Name of 2nd Account Holder						
Name of 3rd Account Holder		1				
Bank Name:		Bran	ch Name:			
Bank City:	Account No.:	manife a community of community of a second se				
Digit MICR Code:	leaf fro	provide a copy of cancelled cheque (Ma m an ECS/Direct Debit eligible bank	Accou	ınt Type 🔲 Savi	ngs 🗌 Current	NRE NRO FC
9. DECLARATIONS & SIGNATURE	ICR code next to Cheque number) (S)					
We hereby declare that the particulars given above are correct and ex We will also inform ING Mutual Fund, about any changes in my bank a	press my willingness to make payments referred above to debit my/our ac account. I/We have read and agreed to the terms and conditions mentioner	ccount directly or through participation in ECS. If the transact	ction is delayed or not effected	at all for reasons of incomplet	e or incorrect information. I/	We would not hold the user institution response
We have not received nor have been induced by any rebate or gifts d being recommended to me/us. I confirm I do not have any existing Mi nereby agree and undertake to pay a transaction charge of Rs.100/- (i	press my willingness to make payments referred above to debit mylour ac account. I/We have read and agreed to the terms and conditions mentionen tired/yr oridiretizin i making these investments. The ARN holder has adjost icro SIPs which together with the current application will result in aggregate in size, scatsing investors of the mutual fund) or Rs. 150- (in case of ew SIPs such transaction charge shall be applicable only if the total committee of such charges and the applicable only if the total committee of the such charge shall be applicable only if the total committee	losed to me/us all the commissions (in the form of trail comr e investments exceeding Rs. 50,000/- in a financial year or r investors of the mutual fund) per subscription of Rs. 10000	nission or any other mode), pa rolling period of 12 months. //- & above and that such trans	yable to him for the different c action charge, if any, shall be	ompeting Schemes of vario deducted by the AMC from t	us Mutual Funds from amongst which the Sch he subscription amount and paid to the distril:
nd thể balance shall be invested. I further acknowledge that in case of	SIP, such transaction charge shall be applicable only if the total commitme	ent through SIP amounts to Rs. 10,000/- &above and in suc	h cases the transaction charge	e shall be recovered in 4 instal	ments. (Not applicable in ca	ase of direct investments).
Signature (s)		~			~	
	/Sole Unit holder / Guardian	Second Unit ho				Third Unit holder
The ARN holder has disclosed to me/us all the commissions 10. BANKER'S ATTESTATION (For	s (in the form of trail commission or any other mode), payable to	o him for the different competing Schemes of vario	us Mutual Funds from am	ongst which the Scheme	s being recommended	to me/us.
TO. DANKER SATESTATION (FO		1				
Certified that the signature of account hold the Details of Bank account are correct as		Number	Signature of au	uthorised Official	from Bank (Ban	k stamp and date)
11. AUTHORISATION OF THE BAN	NK ACCOUNT HOLDER (To be filled an	nd signed by investors)				
To, The Branch Manager						
3ank	Bra	nch			Date	D M M Y Y Y
Sub: Mandate verification for A/c. No.						
	for making payment towards my investments in IN					
Thanking you, First/Sole	ed the Mandate Form. Further, I authorize my represe	Second		Third	auon onarges, il any	, may be charged to my/our acco
Yours sincerely Unit holder / Guardian		Unit holder		Unit holde	X	
	J					
	DWLEDGEMENT SLIP be filled in by the investor)	INVESTMENT FORM	N	Applic	ation No.: S	
Received from Mr./Mrs./Ms.			an application fo			through ECS/Direct Del
Folio No.:	SIP Details			Direct Debit		OFFICIAL
		heque Date <u></u>	Bank Name:			Collection Centre's Stamp & Receip Date & Time
Scheme Name:	SIP Amount (per installment)				Г	

	on Botano	Eco / Biloot Bobit	Collection Centre's Stamp & Receipt
Oshama Nama	Cheque No.	Bank Name:	Date & Time
Scheme Name:	SIP Amount (per installment)		
Ontion		Account No.:	
Option	SIP Date 1 st 10 th 15 th 27 th Frequency : Monthly Quarterly		
Sub-Option:	SIP Period M_M_Y_Y_Y_Y To M_M_Y_Y_Y_Y	Account Type: Savings Current NRE	Allaharankia arkitatika
Please retain this slip duly acknowledged by th	e Official Acceptance Point till you receive your Account Statement.	NRO FCNR	Allotment is subject to realisation of ECS Installment

62

12. SELF AT TESTED DOCOEMENTS OF THE FIRST HOLDER: (please \checkmark as applicable)	
Voter ID card	D card issued to employees of scheduled commercial / state / district co-operative banks.
Government / Defence ID card	Senior citizen / Freedom fighter ID card issued by government.
Driving License	Cards issued by universities / deemed universities or institutes under statues like ICAI, ICWA,
Passport	ICSI.
Photo Ration Card	Permanent retirement account no. (PRAN) card issued to new pension system (NPS) subscribers by CRA (NSDL).
Photo Debit card	
Employee ID cards issued by companies registered with registrar of companies	Any other photo ID card issued by central government / state governments / municipal authorities / government organisations like ESIC / EPFO.

Photo identification issued by Bank Managers of scheduled commercial banks / Gazatted

Officers / Elected Representatives to the legislative assembly /parliament

KYC Acknowledgment

General Instruction

The SIP Investment Form should be filled in English and in block letters only. Please tick (\checkmark) in the appropriate box where boxes have been provided. The SIP Investment form, complete in all respects should be submitted at any of the ING Mutual Fund branch or at official point of acceptance of transaction(s) of Computer Age Management Services (Pvt) Ltd. (CAMS).

INSTRUCTIONS & INFORMATION ON SYSTEMATIC INVESTMENT PLAN

New investors who wish to enroll for SIP are required to fill the SIP Investment form along with the common application form. New investors are advised to read the Scheme Information Document(s) of the respective Scheme(s) carefully before investing. The Scheme Information Document(s)/Key Information Memorandum(s) of the respective Scheme(s) are available with the ING Mutual Fund branches / Brokers / Distributors and also displayed on our website www.ingim.co.in. The common application form number must be compulsorily mentioned in the Systematic Investment Form.

Existing unit holders need not fill the Common Application Form. However they must compulsorily mention their Folio Number in the Systematic Investment Form. Existing unit holders should note that unit holder's details and mode of holding is mandatory (Single, Joint, Anyone or Survivor) will be as per the existing folio number.

Irrespective of the investment amount, mention your PAN/PEKRN details and enclose a photocopy of the PAN/PEKRN proof attested for all applicants including POA holder. In case of a minor, please furnish PAN/PEKRN details and proof of PAN/PEKRN of the Guardian. KYC Acknowledgment should be attached for all investors. If Date of Birth (DOB) not provided application liable to be rejected.

Systematic Investment Details

oystematic investment betails	
Schemes where SIPs are allowed	Please refer Scheme Information Document
Frequency	Monthly or Quarterly
Choice of Dates / Months	1st,10th, 15th and 27th of every month / Jan, Apr, July, Oct
Default Date	If no choice is made, the default date will be 10th
Minimum Investment	Rs.1000/- in monthly and Rs.3000/- in quarterly (In multiples of Rs. 100, except for Tax Saving Scheme which is Rs. 500 in monthly & Rs. 1500/- in Quarterly & in multiples of Rs. 500 thereafter)
Minimum Period	6 cheques for monthly and 4 cheques for quarterly
Default Period	If the period is not mentioned, the default period will be for 3 years
Load	As per scheme structure.

Units will be allotted on the above application dates. In case the date falls on a Non-Business Day or falls during the book closure period the immediate next Business Day will be considered for the purpose of determining the applicability of NAV subject to the realisation of the cheques.

SIP Auto Debit - Terms and Conditions

Payment to be made by current dated cheque drawn on any bank which is situated at and is a member of the banker's Clearing House located at the place where the SIP investment form is submitted. No Cash, Money Orders or Postal Orders will be accepted. In case if the cheque is from NRE account, please furnish a NRI declaration / attached cancelled cheque copy from your banker.

The bank account details provided for ECS / Direct Debit should be that of the First SIP cheque only. The bank branch through which the SIP auto debit takes place should participate in local MICR Clearing.

It is mandatory to provide the 9 digit MICR Code which appears on the right side of the cheque number on the cheque leaf along with a cancelled cheque leaf from an ECS / Direct Debit eligible bank.

Any cancellation or modification should be submitted 30 days prior to the next auto debit date. Any modification should be accompanied with a new SIP form duly filled in and carrying the revised SIP request details.

Extension of SIP needs to be accompanied with a cancelled cheque leaf only if the debit bank account details remain the same as per the first SIP. If 3 consecutive SIPs fail, the SIP will automatically stand terminated. Incorrect, incomplete or ambiguous forms are liable to be rejected.

The investor agrees to abide by the terms and condition of ECS / Direct Debit facility of the Reserve Bank of India as applicable at the time of investment and as may be modified from time to time at a later stage.

Investors will not hold ING Mutual Fund, its registrars, banks and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP due date to various clearing cycle of ECS. ING Mutual Fund, its registrars, banks and other service providers shall not be responsible and liable for any damages/compensation for any loss, damage etc. incurred by the investor. The investor assumes the entire risk of using this facility and takes full responsibility.

DECLARATION AND SIGNATURES

a) Signatures can be in English or in any Indian language. Thumb impressions must be attested by a Magistrate/Notary Public under his/her official seal. In case of HUF, the Karta will sign on behalf of the HUF. Similarly, for the Association of Persons (AOP) the application must be signed by the Authorised Signatory. b) Applications on behalf of minors should be signed by their Guardian. c) If the application form is signed by a Power of Attorney (PoA) holder, the form should be accompanied by a notarized photocopy of the PoA. Alternatively, the original PoA can be submitted, which will be returned after verification. d) In case of corporates or any non-individual investors, a list of authorized signatories should be submitted along with the application form.

I hereby agree that AMC shall in case where multiple purchase / additional purchase / switch-in transactions aggregating to Rs. 2 lakh or more are submitted by me / us for the same transaction date /Net Asset Value (NAV) applicability date, then all such multiple applications will be aggregated and will be considered as a single transaction for considering NAV applicability date.

LIST OF BANKS WITH DIRECT DEBIT FACILITY (All Branches)

Axis Bank (Please fill 15 Digit Bank Account Numbers Only), IDBI Bank (Please fill between 13-16 Digit Bank Account Numbers Only), ING Vysya Bank, IndusInd Bank (Please fill between 13-16 Digit Bank Account Numbers Only), Kotak Mahindra Bank, Bank Of Baroda (Please fill 14 Digit Bank Account Numbers Only), Punjab National Bank (Please fill 16 Digit Bank Account Numbers Only), Bank Of India (Please fill 15 Digit Bank Account Numbers Only), Bank Of India (Please fill 15 Digit Bank Account Numbers Only), Union Bank Of India (Please fill 15 Digit Bank Account Numbers Only) State Bank of India , Citi Bank, Corporation Bank

LIST OF ECS LOCATIONS

Delhi	Dehradun	Surat	Gwalior	Mangalore	Chennai	Coimbatore	Haldia
Ludhiana	Gorakhpur	Mumbai	Jabalpur	Udipi	Pondicherry	Kolkata	Asansol
Amritsar	Agra	Goa	Raipur	Hubli	Trichy	Bardhaman	Cuttack
Jalandhar	Jaipur	Pune	Hyderabad	Gadag	Madurai	Durgapur	Raichur
Chandigarh	Bhilwara	Sholapur	Tirupati	Bijapur	Salem	Siliguri	Bikaner
Shimla	Udaipur	Kolhapur	Vijaywada	Bélgaum	Erode	Bhubaneshwar	Gangtok
Jammu	Jodhpur	Nasik	Nellore	Davangere	Thirupur	Guwahati	Dargeeling
Kanpur Allahabad Varanasi	Rajkot Jamnagar Ahmedabad	Aurangabad Nagpur	Vizag Kakinada Bangalore	Shimoga Tumkur Mandya	Calicut Trichur Cochin	Patna Dhanbad Jamshedpur	Anand Bhavnagar Kota
Lucknow	Baroda	Indore Bhopal	Mysore	Gulbarga	Trivandrum	Ranchi	Tirunelveli

ING Investment Management (India) Pvt. Ltd.

601A, 6th floor, Trade Centre, Opp MTNL Telephone Exchange, Bandra Kurla Complex, Bandra (E), Mumbai- 400051 T : 1800 200 2267/1800 419 2267 / 022 4082 7999 / 3385 7999 W: www.ingim.co.in E: information@in.ing.com