

NACH MANDATE INSTRUCTION FORM (Refer guidelines / Instruction over leaf before filling)

Corporate Office: 6th Floor, Sea Breeze Building, Appasaheb Marathe Marg, Prabhadevi, Mumbai - 400 025. | Tel: +91 22 6295 5000 Whatsapp message: +91 9920 21 22 23 | E-mail: help.investor@quant.in | help.distributor@quant.in | www.quantmutual.com

quant mutual

Name & Broker Code / ARN		oker / Sub	Agent AR	N Code	e *E				fication Num	per	Sul	o Broke	er / Sub	Agent	Code		APP N		ria C	ode**				
ARN-181211		RN-					-		682															
ease sign below in case the EUIN is lef mployee/relationship manager/sales pe Jb broker. ++ I/We, have invested in the ur investments under Direct Plan of all Sc	rson of the c	bove distrib	outor/sub b	oroker o	r notwiths	tandina	a the ac	dvice of i	in-appropriat	eness	if any, p	rovided	by the	emplove	e/relat	ionshir	o manaae	er/sales	s pers	on of t	the dis	stribut	or/ /	
First / Sole Applicant / Guardian Authorised Signatory				Second Applicant / Authorised Signatory									Third Applicant / Authorised Signatory]	
ront commission shall be paid directly I PPLICANT DETAILS	by the invest	tor to the AM	WFI registe	red dist	ributor bo	ised or	n the inv	vestor's	FOLIO	NO.			ding th	e servic	e rende	ered by	/ the distr	ributor.]
ime of Sole/1st holder ime of 2nd holder									_		Pekrn. Pekrn.												YC YC	
me of 3rd holder									PAN	No / P	PEKRN.											KY	ΥC	_
IITIAL INVESTMENT DETAILS neque/ DD No./Cash Deposit Slip N	0				channe	(Dama	-Was Data						DD (`h an a a	. ₹							l
Net Amount ₹	0.	Bank Na			Chequ	e / DD	0 / Casi	n Depo	sifion Date			Branc			DDC	.narge		ty:						
Depository Popository Participant Name DP ID No.	Demo	nt Mode	P	Physico	al Mode	e (Ref.	Instruc		. 24) Demat entral epository ecurities	De Pai	positor rticipan	y t Narr					is opted	.)						
mited Beneficiary Accour	L		Master	List IC	^MI)			1	mited on cum H		rget ID		+		ance		Deliver	ry Ins	truct	ion (Slin (-
providing Email-id, I understand the		_				line M					<u> </u>							,	noei		onp ([015]		
DETAILS (Refer Instruction No. 14. If																								ĺ
Scheme / Plan / Option Frequency						e)			Iment Per Please√any one					or Mont Half Yea	·	SIP A	mount	+ ^V	leek	ly an SIP	d For Date		ntly	
				Weekly Fortpightly					MM / YYYY	MM / YYYY				D	₹					For and Fortnightly ked day is				
Regular Plan 🗌 Direc	Plan			Quarte	arly									ate from		`					sday			
ARATION : //We would like to invest in a equent amendments thereto. //We have rea mpsum / systematic investment plan (SIP) iment. //We declare that the amount invest ed by the Government of India or any Stat	d, understood ransaction wi ed in the Sche utory Authorit	d (before fillin ill be debited eme is throug y. I accept ar	g applicatio from bank h legitimate nd agree to	Half Ye	and is/are details pro sonly and i nd by the :	oound b wided ir s not de aid Terr	by the de n my On esigned f ms and	s of the s etails of the e Time B for the pu Condition	ank Mandate urpose of contr ns including th	ddition IM inclu Form. I/ avention	uding deta /We have n or evasi cluding/ li	tion (SAI ils relatir not rece on of an miting q), Schen ng to var ived nor y Act / R uant Mu	ie Inform ious serv been in egulatior tual Fun	ation De ices. By duced b is / Rule: d liability	ocumer filling u y any re s / Noti y. I und	p this form ebate or g fications // erstand th	n I under jifts, dire Directior nat qMF	alter nation stand stand strly or ns or a may, o	Memo that th indire ny othe	randur e amo ctly, in er Appl bsolute	m (KIN ount tow makin licable e discr	N) and ward: g thi: Law: retion	ls is /s n,
LARATION : We would like to invest in a equent amendments thereto. I/We have rea mysum / systematic investment plan (SIP) threm.I. I/We declare that the amount invest ted by the Government of India or any Stat nituue any of the services completely or par il commission or any other model, payable rsigned and particulars given by me/us are onfirm that I am resident of India. I/We	uant d, understood ransaction wi ed in the Sche utory Authorit tially without a to him for th correct and co onfirm that I a FCNR Account	d (before filling ill be debited me is throug) y. I accept ar any prior noti he different c omplete. Furt im/We undert	g applicatio from bank h legitimate nd agree to ice to me. I competing S her, I agree on-Resident	Half Ye n form) of account sources be bour agree qu ichemes that the of Indiar	and is/are details pro- only and i nd by the uant can de of various transaction	bound b wided ir s not de acid Terr ebit from Mutual a charge y/Origin s made	by the de in my On esigned f ms and in my foli- l Funds f e (if appl in and I/W under th Secor	s of the S tails of the Time B for the pu Condition o for the rom ama icable) sh le hereby is folio wi	Statement of A he SAI, SID & K aank Mandate urpose of contr ns including th service charge ongst which th hall be deducte χ confirm that th ill also be from	ddition IM inclu Form. I/ avention lose exit as as ap le Schei ed from the fund:	iding deta /We have n or evasi- cluding/ li oplicable fi me is beir the subso s for subso	tion (SAI ils relatir not rece on of an miting q rom time ng recon ription a rription h), Schem ng to var ived nor y Act / R uant Mu to time nmende imount c ave bee	nth) le Inform ious serv been in egulatior tual Fun The ARt d to me, and the s n remitte	ation De ices. By duced b is / Rule: d liability l holder 'us. I he aid char d from a	ocumer filling u y any re s / Noti y. I und has dis reby de ges sho ubroad t ing cha	ht (SID), Ke p this form ebate or g fications // erstand th sclosed to calare that all be paid through no nnels or fra Third A	n I under jifts, dire Direction tat qMF me/us a to the ab- to the ab- to the d ormal ba- om fund	alter nation stand cetly or ns or a may, o cove inf istribu inking s in my	Memo that th indirec ny othe at its a commi formati tors. channe cour N	randur e amo ctly, in er Appl bsolute ssions on is g	m (KIN ount tov makin licable e discr (in the given b rom fu	1) and ward: g thi: Law: retion of form by the nds in	is /s n, m ie
ARATION : We would like to invest in a equent amendments thereto. We have rea mpsum / systematic investment plan (SIP) Imment. I /We declare that the amount invest ed by the Government of India or any Stat finue any of the services completely or par il commission or any other model, payable rsigned and particulars given by me/us are onfirm that I am resident of India. U We ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign	uant d, understooc ransaction wi ad in the Scheu utory Authorit filloll without to him for th correct and c onfirm that la FCNR Account /Guardinatory	J (before fillini ill be debited me is throug y. I accept ar any prior noti e different c e different c mp/lete. Furt mr/We are No t. I/We undert	g applicatio from bank h legitimate ad agree to icce to me. I a competing 3 her, I agree on-Resident lake that all a	Half Ye	and is/are details pro- sonly and in nd by the upant can do of various transaction Notionalital purchase	bound b wided ir s not de aaid Terr bit from Mutual n charge y/Origin s made	by the den n my On ssigned f ms and n my folii I Funds f e (if appl n and I/W under th Secon	is of the statis of the statis of the put condition of the put condition of the thereby is folio with the thereby seed S	Statement of A he SAJ, SID & K kank Mandate typose of contr is nicuding th service charge ongst which it hall be deduct v confirm that til ill also be from plicant ignatory	addition IM inclu Form. I/ aventio lose ex es as ap es che ed from he funds funds re	Iding deta /We have n or evasic cluding/ li poplicable fi me is beii the subso s for subso aceived fro	tion (SAI ils relatin not rece on of an miting q om time g recon ription a cription h), Schen ng to var ived nor y Act / R uant Mu a to time nmende imount o ave bee d throug	nth) ie Inform ious serv been in egulatior tual Fun The ARI d to me. ind the s n remitte h approv	ation Do ices. By duced b is / Rule: d liability holder us. I he aid char d from a ed bank	ocumer filling u y any re s / Noti has dis reby de ges sho abroad t ting cha	nt (SID), Kep p this form ebate or g fications / erstand th closed to acclare that all be paid through no nnels or fro Third A thorise	I under jifts, dire Directior bat qMF me/us of t the abo to the d ormal ba ormal ba ormal ba	alter nation stand stand stand atty or s or a may, o all the istribu inking s in my	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KI/V unt tov makin licable e discr ((in the e discr (in the given t rom fuu NR Accc	1) and ward: g this Law: retion by the nds ir ount.	is i
ARATION : We would like to invest in a equent amendments thereto. We have rea mpsum / systematic investment plan (SIP) imment. I /We declare that the amount invest ed by the Government of India or any Stat infune any of the services completely or par il commission or any other model, payable rsigned and particulars given by me/us are onfirm that I am resident of India. U We ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign signing this SIP enrolment form I/We ur the amount mentioned in One Time B	uant d, understooc ransaction with ad in the Sche utory Authoriti filloll without to bim for the correct and co onfirm that I a FCNR Account /Guardhi atorry heterstand the	d (before fillin; ill be debited eme is throug any prior notice any prior notice. Furt mr/We are Ne. t. //We undert	g applicatio from bank h legitimate ad agree to ice to me. I n competing S her, I agree on-Resident take that all of take that all of unt will be	Half Ye n form) c account sources be bour agree qu ichemes that the of Indiar additionc	and is/are details pro- sonly and i nd by the uant can do of various transaction Nationaliti al purchase	bound b wided ir s not de aaid Terr ebit from Mutual n charge y/Origin s made	by the den n my On esigned f ms and n my foli I Funds f e (if appl n and I/W under th Secon	s of the s tails of the e Time B for the pu Condition o for the from amore icable) st /e hereby is folio wi	Statement of A he SAJ, SID & K ank Mandate urgose of contry ropso et contry ropso et contry service charge ongst which it hall be deduck confirm that It il also be from plicant ignatory oned in One	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta /We have n or evasie cluding/ li oplicable fi me is beir the subsc s for subsc sceived fro	tion (SAI ils relatin not rece on of am miting q rom time ng recon ription o ription o ription o ription o date / I), Schen 1g to var ived nor y Act / R uant Mu to time nmende imount c iave bee d throug	nth) ie Inform ious serv been in egulatior tual Fun The ARI d to me. ind the s n remitte h approv	ation Do ices. By duced b is / Rule: d liability holder us. I he aid char d from a ed bank	ocumer filling u y any re s / Noti has dis reby de ges sho abroad t ting cha	nt (SID), Kep p this form ebate or g fications / erstand th closed to acclare that all be paid through no nnels or fro Third A thorise	I under jifts, dire Direction at qMF me/us of t the abo to the d ormal ba ormal ba ormal ba	alter nation stand stand stand atty or s or a may, o all the istribu inking s in my	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KI/V unt tov makin licable e discr ((in the e discr (in the given t rom fuu NR Accc	1) and ward: g this Law: retion by the nds ir ount.	is i
ARATION : We would like to invest in a equent amendments thereto. We have rea mpsum / systematic investment plan (SIP) ment. I /We declare that the amount invest ed by the Government of India or any Stat finue any of the services completely or par il commission or any other model, payable rsigned and particulars given by me/us are onfirm that I am resident of India. U We e ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign signing this SIP enrolment form I/We ur the amount mentioned in One Time B	uant d, understooc ransaction with ad in the Sche utory Authoriti filloll without to bim for the correct and co onfirm that I a FCNR Account /Guardhi atorry heterstand the	d (before fillin; ill be debited eme is throug any prior notice any prior notice. Furt mr/We are Ne. t. //We undert	g applicatio from bank h legitimate ad agree to ice to me. I n competing S her, I agree on-Resident take that all of take that all of unt will be	Half Ye n form) c account sources be bour agree qu ichemes that the of Indiar additionc	and is/are details pro- sonly and i nd by the uant can do of various transaction Nationaliti al purchase	bound b wided ir s not de aaid Terr ebit from Mutual n charge y/Origin s made	by the den n my On esigned f ms and n my foli I Funds f e (if appl n and I/W under th Secon	s of the s tails of the e Time B for the pu Condition o for the from amore icable) st /e hereby is folio wi	Statement of A he SAJ, SID & K ank Mandate urgose of contry ropso et contry ropso et contry service charge ongst which it hall be deduck confirm that It il also be from plicant ignatory oned in One	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta /We have n or evasie cluding/ li oplicable fi me is beir the subsc s for subsc sceived fro	tion (SAI ils relatin not rece on of am miting q rom time ng recon ription o ription h m abroa), Schen 1g to var ived nor y Act / R uant Mu to time nmende imount c iave bee d throug	nth) ie Inform ious serv been in egulatior tual Fun The ARI d to me. ind the s n remitte h approv	ation Do ices. By duced b is / Rule: d liability holder us. I he aid char d from a ed bank	ocumer filling u y any re s / Noti has dis reby de ges sho abroad t ting cha	nt (SID), Kep p this form ebate or g fications / erstand th closed to acclare that all be paid through no nnels or fro Third A thorise	I under jifts, dire Direction at qMF me/us of t the abo to the d ormal ba ormal ba ormal ba	alter nation stand stand stand atty or s or a may, o all the istribu inking s in my	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KI/V unt tov makin licable e discr ((in the given t rom fuu NR Accc	1) and ward: g this Law: retion by the nds ir ount.	ts is /s n, me in t.
ARATION: We would like to invest in a quent amendments thereto. We have rea mpsum / systematic investment plan (SIP) ment. I /We declare that the amount invest ed by the Government of India or any Stat tinue any of the services completely or par l commission or any other model, payable signed and particulars given by me/us are onfirm that I am resident of India. U /We e ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign igning this SIP enrolment form I/We ur the amount mentioned in One Time B Composition of the services of the services of the UMRN	uant d, understooc ransaction will ad in the Scheutory Authorit tially without to to him for the correct and co onfirm that I are FCNR Account / Guardia / Guardia / Guardia / Authory Authory / Aut	d (before fillin; ill be debited eme is throug any prior notice any prior notice. Furt mr/We are Ne. t. //We undert	g applicatio from bank h legitimate ad agree to ice to me. I n competing S her, I agree on-Resident take that all of take that all of unt will be	Half Ye n form) c account sources be bour agree qu ichemes that the of Indiar additionc	and is/are details pro- sonly and i nd by the uant can do of various transaction Nationaliti al purchase	bound b wided ir s not de aaid Terr ebit from Mutual n charge y/Origin s made	by the den n my On esigned f ms and n my foli I Funds f e (if appl n and I/W under th Secon	s of the s tails of the e Time B for the pu Condition o for the from amore icable) st /e hereby is folio wi	Statement of A he SAJ, SID & K ank Mandate urgose of contry ropso et contry ropso et contry service charge ongst which it hall be deduck confirm that It il also be from plicant ignatory oned in One	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta /We have n or evasie cluding/ li oplicable fi me is beir the subsc s for subsc sceived fro	tion ISAN is relating not rece on of ani miting q com time g recorr ription o ription o ription o date / 1 y trans	I), Schern I), Schern IV (I) (I) (I) (I) (I) IV (I) (I) (I) (I) (I) (I) IV (I) (I) (I) (I) (I) (I) (I) (I) (I) IV (I)	nth) ie Inform been in gulation tual Fun The ARI d to me, in remitte h approv asy - Inc ay.	ation Do ices. By duced b is / Rule: d liability holder us. I he aid char d from a ed bank	ocumer filling u y any r s / Noti has dia reby de ges sho ding cha Aut	nt (SID), Ke p this form restand the print fications // fications // erstand the print and through ne nnels or from Third. A horisee	I under iffs, dire interformat qMF me/us a qMF me/us to the d ormal ba ormal b	alter attion stand dcty or s or a may, c may, c and the ove inti istribu cove inti istribu co	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KIW) unt tov makin licable e discr (in the given t rom full NR Acc	N) and wards g this Laws ection by the nds ir ount.	ds is sis sis sis sis sis sis sis sis si
ARATION I: We would like to invest in a quent amendments thereto. We have rea mysum / systematic investment plan (SIP) ment. I /We declare that the amount invest ed by the Government of India or any Stat ntinue any of the services completely or par I commission or any other model, payable signed and particulars given by me/us are onfirm that I am resident of India. UWe of the Amount I am resident of India. We of the Amount I am resident of India. I we of the Amount I am resident of India. I we of the amount mentioned in One Time B Complete Complete Complete Sponsor Bank that and the Amount I amount I amount I amount Sponsor Bank Sponsor Bank	uant d, understooc ransaction will ad in the Scheutory Authorit tially without to to him for the correct and co onfirm that I are FCNR Account / Guardia / Guardia / Guardia / Authory Authory / Aut	d (before fillin; ill be debited ime is throug any prior notice any prior notice to mplete. Furt im/We are Net t. //We undert	g applicatio from bank h legitimate ad agree to ice to me. I n competing S her, I agree on-Resident take that all of take that all of unt will be	Half Ye n form) c account sources be bour agree qu ichemes that the of Indiar additionc	and is/are details pro- sonly and i nd by the uant can do of various transaction Nationaliti al purchase	bound b wided ir s not de aaid Terr ebit from Mutual n charge y/Origin s made	by the den n my On esigned f ms and n my foli I Funds f e (if appl n and I/W under th Secon	s of the s tails of the e Time B for the pu Condition o for the from amore icable) st /e hereby is folio wi	Statement of A he SAJ, SID & K ank Mandate urgose of contry ropso et contry ropso et contry service charge ongst which it hall be deduck confirm that It il also be from plicant ignatory oned in One	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta /We have n or evasi cluding/ li plicable fi me is beii the subsc stor subsc aceived fro	tion (SA) is relating not receiption of an imiting a groom time grecorr groom time grecorr groom time grecorr groom time groom time groom time groom time groom time groom time groom time groom time groom time groom time groom time groom time groom time groom time	I), Schern I), Schern II, Sc	nth) le Inform lous serv been in legulatior The ARI d to me. asy - Ind lay.	iation Dri ices. By Juced b Is / Rule: I holder Us. I he I holder Us. I he d from a ed bank	ocumer filling uj y any r s / Noti reby de ges shc ibroad t ing cha	ht (SID), Ke p this form probate or g fications // closed to the sector that horough nc nnelsoff through n	n Linder The Second Sec	alter attion stand dcty or s or a may, c may, c and the ove inti istribu cove inti istribu co	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KI/V unt tov makin licable e discr ((in the given t rom fuu NR Accc	N) and wards g this Laws ection by the nds ir ount.	ds is sys n, me in t.
ARATION : We would like to invest in a equent amendments thereto. We have rea mpsum / systematic investment plan (SIP) ment.I /We declare that the amount invest ed by the Government of India or any Stat finitue any of the services completely or par il commission or any other model, payable risgned and particulars given by me/us are onfirm that I am resident of India. U Wee ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign signing this SIP enrolment form I/We ur the amount mentioned in One Time B Control of the services completely or par- tion anager UMRN Sponsor Bank- Utility Code	uant (, understooc ransaction will al in the Schelutory Authoriti tilolly without = to him for th to him for th correct and co onfirm that I a FCNR Account / Guardin attory nderstand th ank Mandat	d (before fillin) ill be debited ime is throug y. I accept ar any prior not omplete. Furt mr/We are Net t. I/We underf	g applicatio from bank h legitimate nd agree to ice to me. 11 competing S her, I agree no-Resident lake that all competing unt will be the maxin	Half Ye n form) of account account sources be boun agree q chemes of Indiar debitec mum ar	early and is/are details pro- only and in details pro- detail	sound b is not de in not de iaid Territoria bit from Mutual a charge //Origin s made Bank (c t you w	y the de n my On issigned f ms and n my folia Funds f e (if app) under th Secon under th Secon uthori accound lik Ba	s of the 5 tatils of th e Time B Condition for the purchase is foliowing the hereby is foliowing the hereby is foliowing the hereby the hereby thereby the hereby thereby the hereby thereby thereby the hereby t	Statement of A he SAJ, SID & K ank Mandate rypose of contry rypose of contry rypose of contry service charge ongst which it hall be deduck confirm that It il also be from plicant ignatory oned in One est in scheme	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta We have n or evasis plicable fr me is beiling me is beiling for subsection ank Man MF on ar	tion ISAA is relating not rece on of ani miting q com time g recorr ription o ription o ription o com time g recorr ription o com time ription o com ti com time ription o com time ription o com time ription	I), Schern ng to var vived nor y Act / R uant ML to time mount d ave bee d throug	nth) le Inform lous serv been in legulatior The ARI d to me. asy - Ind lay.	iation Dri ices. By Juced b Is / Rule: I holder Us. I he I holder Us. I he d from a ed bank	ocumer filling uj y any r s / Noti reby de ges shc ibroad t ing cha	nt (SID), Ke p this form restand the print fications // fications // erstand the print and through ne nnels or from Third. A horisee	n Linder The Second Sec	alter attion stand dcty or s or a may, c may, c and the ove inti istribu cove inti istribu co	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KIW) unt tov makin licable e discr (in the given t rom full NR Acc	N) and wards g this Laws ection by the nds ir ount.	ds is /s n, mie in t.
ARATION : We would like to invest in a equent amendments thereto. We have rea mpsum / systematic investment plan (SIP) imment. I /We declare that the amount invest ed by the Government of India or any Stat infune any of the services completely or par il commission or any other model, payable rsigned and particulars given by me/us are onfirm that I am resident of India. U We e ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign signing this SIP enrolment form I/We ur the amount mentioned in One Time B	uant d, understooc ransaction will ad in the Scheutory Authorit tially without to to him for the correct and co onfirm that I are FCNR Account / Guardia / Guardia / Guardia / Authory Authory / Aut	d (before fillin; ill be debited ime is throug any prior notice any prior notice to mplete. Furt im/We are Net t. //We undert	g applicatio from bank h legitimate nd agree to ice to me. 11 competing S her, I agree no-Resident lake that all competing unt will be the maxin	Half Ye n form) of account account sources be boun agree q chemes of Indiar debitec mum ar	d from the nount that	sound b is not de in not de iaid Territoria bit from Mutual a charge //Origin s made Bank (c t you w	by the den n my On esigned f ms and n my foli I Funds f e (if appl n and I/W under th Secon	s of the 5 tatils of th e Time B Condition for the purchase is foliowing the hereby is foliowing the hereby is foliowing the hereby the hereby thereby the hereby thereby the hereby thereby thereby the hereby t	Statement of A he SAJ, SID & K ank Mandate urgose of contry ropso et contry ropso et contry service charge ongst which it hall be deduck confirm that It il also be from plicant ignatory oned in One	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta We have n or evasis plicable fr me is beiling me is beiling for subsection ank Man MF on ar	tion (SAI) is relatir not rece mining q record right g record right n date y trans	I), Schern ng to var vived nor y Act / R uant ML to time mount d ave bee d throug	nth) le Inform lous serv been in legulatior The ARI d to me. asy - Ind lay.	iation Dri ices. By Juced b Is / Rule: I holder Us. I he I holder Us. I he d from a ed bank	ocumer filling uj y any r s / Noti reby de ges shc ibroad t ing cha	ht (SID), Ke p this form probate or g fications // closed to the sector that horough nc nnelsoff through n	n Linder The Second Sec	alter attion stand dcty or s or a may, c may, c and the ove inti istribu cove inti istribu co	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KIW) unt tov makin licable e discr (in the given t rom full NR Acc	N) and wards g this Laws ection by the nds ir ount.	ds is sys n, me in t.
ARATION: We would like to investing a squent amendments thereto. I/We have rea mpsum / systematic investment plan (SIP) ment. I/We declare that the amount invest ed by the Government of India or any SId attribution or any other model, payable signed and particulars given by me/us are onfirm that I am resident of India. ☐ I/We out is constrained and the statematic of India. ☐ I/We out rNon-Resident External /Ordinary Accounts/ First / Sole Applicant Authorised Sign signing this SIP enrolment form I/We ut the amount mentioned in One Time B the amount mentioned in One Time B Sponsor Bank Utility Code bit (tick ✓) ☐ SB ☐ CA	uant (, understooc ransaction will al in the Schelutory Authoriti tilolly without = to him for th to him for th correct and co onfirm that I a FCNR Account / Guardin attory nderstand th ank Mandat	d (before fillin; II) be debited ime is througy y I a ccept ar any prior noti the different c omplete. Furt im/We are No. I./We underf an at the amove e should be 	g applicatio from bank h legitimate nd agree to ice to me. 11 competing S her, I agree no-Resident lake that all competing unt will be the maxin	Half Yé n form (account account sources be bound agree qu chemes be bound agree qu chemes debitect num an addition addition	early and is/are details pro- only and in do y the yont can do of various transactio Nationalit purchase d from the nount tha	sound b rn of de rn of de aidi Terri bit from Mutual a charge //Origin s made	y the de n my On issigned f ms and n my folia Funds f e (if app) under th Secon under th Secon uthori accound lik Ba	s of the 5 tatils of th e Time B Condition for the purchase is foliowing the hereby is foliowing the hereby is foliowing the hereby the hereby thereby the hereby thereby the hereby thereby thereby the hereby t	Statement of A he SAJ, SID & K ank Mandate rypose of contry rypose of contry rypose of contry service charge ongst which it hall be deduck confirm that It it also be from plicant ignatory oned in One est in scheme	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta We have n or evasis plicable fr me is beiling me is beiling for subsection ank Man MF on ar	tion (SAI) is relatir not rece mining q record right g record right n date y trans	I), Schern ing to varived noir vived noir varived noir varived noir vived	nth) le Inform lous serv been in legulatior The ARI d to me. asy - Ind lay.	dividual	ocumer filling u y any r s / Noti y. I und has dis reby de ges sho de ges sho de de ges sho de ges sho de de ges sho de ges sho de de ges sho de ges sho de ges sho de ges sho de ges sho de ges sho de ges sho de de ges sho de de de de de de de de de de de de de	nt (SID), Ke p this form erstand the provide of erstand the provide through ne nnels or for third. A horisee date Form Date Mc all Funct all	n Linder The Second Sec	alter attion stand dcty or s or a may, c may, c and the ove inti istribu cove inti istribu co	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KIW) unt tov makin licable e discr (in the given t rom full NR Acc	N) and wards g this Laws ection by the nds ir ount.	ds is ys n, me in t.
ARATION: We would like to invest in a squent amendments thereto. We have rea mpsum / systematic investment plan (SIP) ment. I. We declare that the amount invest ed by the Government of India or any Stat finitue any of the services completely or par il commission or any other model, payable signed and particulars given by me/us are onfirm that 1 am resident of India. ☐ I/We et ur Non-Resident External /Ordinary Account/ First / Sole Applicant Authorised Sign signing this SIP enrolment form I/We ut the amount mentioned in One Time B Composed Sign UMRN Little Code Little Code Little Code the amount mentioned in One Time B Composed Sign Code Little Code Little Code Little Code bit (tick ✓) SB CA Bank	uant (, understooc ransaction will al in the Schelutory Authoriti tilolly without = to him for th to him for th correct and co onfirm that I a FCNR Account / Guardin attory nderstand th ank Mandat	d (before fillin; II) be debited ime is througy y I a ccept ar any prior noti the different c omplete. Furt im/We are No. I./We underf an at the amove e should be 	g applicatio from bank h legitimate ad agree to competing S her, I agree pon-Resident lake that all unt will be the maxir	Half Yé n form (account account sources be bound agree qu chemes be bound agree qu chemes debitect num an addition addition	early and is/are details pro- only and in do y the yont can do of various transactio Nationalit purchase d from the nount tha	sound b rn of de rn of de aidi Terri bit from Mutual a charge //Origin s made	y the de n my On issigned f ms and n my folia Funds f e (if app) under th Secon under th Secon uthori accound lik Ba	s of the 5 tatils of th e Time B Condition for the purchase is foliowing the hereby is foliowing the hereby is foliowing the hereby the hereby thereby the hereby thereby the hereby thereby thereby the hereby t	Statement of A he SAJ, SID & K ank Mandate rypose of contry rypose of contry rypose of contry service charge ongst which it hall be deduck confirm that It it also be from plicant ignatory oned in One est in scheme	Addition M inclu Form. <i>b</i> avention iose exx is as a present ed from the Scheit funds re	ding deta We have n or evasis plicable fr me is beiling me is beiling for subsection ank Man MF on ar	tion (SAI) is relatir not rece mining q record right g record right n date y trans	I), Schern ing to varived noir vived noir varived noir varived noir vived	nth) e Inform ious serv- been in gulation gulation gulation tual Fun The ARF agulation tual Fun The ARF agulation tual Fun The ARF agulation tual Fun the ARF agulation tual Fun tual Fun the ARF agulation tual Fun tual Fun Fun Fun Fun Fun Fun Fun Fun Fun Fun	dividual	ocumer filling uj y any r s / Noti reby de ges shc ibroad t ing cha	nt ISID), Ke p this form factors // factors // erstand th through nc nnels or front through nc nnels or front date Form Date Market Date all Funct all Func all Fu	n Linder The Second Sec	alter attion stand dcty or s or a may, c may, c and the ove inti istribu cove inti istribu co	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randur e amo etty, in er Appi bsolut ssions on is <u>c</u> els or fr	m (KIW) unt tov makin licable e discr (in the given t rom full NR Acc	N) and wards g this Laws ection by the nds ir ount.	ds is ys n, me in t.
ARATION: We would like to investing a squent amendments thereto. We have rear mpsum / systematic investment plan (SIP) ment. I /We declare that the amount invest ed by the Government of India or any SId at normalization or any other model, payable signed and particulars given by me/us are onfirm that I am resident of India. □ I/We or the amount invested SIgn isigning this SIP enrolment form I/We ur the amount mentioned in One Time B Comparison of the ansate Utility Code bit (tick ✓) □ SB □ CA Bank count Of Rupees	uant	d (before fillin; II) be debited ime is througy y I a ccept ar any prior noti the different c omplete. Furt im/We are No. I./We underf an at the amove e should be 	g application from bank h legitimate ad agree to ice to me. I i competing S her, I agree pon-Resident face that all of the second second pon-Resident face that all of the second second face that all of the second second face that all of the second second face that all of the second second second second face that all of the second second second second face that all of the second second second face that all of the second second second second face that all of the second second second second second face that all of the second second second second second face that all of the second secon	Half Yé n form (account account sources be bound agree qu chemes be bound agree qu chemes debitect num an addition addition addition	early and is/are details pro- only and in do y the yont can do of various transactio Nationalit purchase d from the nount tha	vound bi s not de s not de bit from Mutual c charge Autual Bank (t you w Ise C ank	y the de n my On issigned f ms and n my folia Funds f e (if app) under th Secon under th Secon uthori accound lik Ba	s of the 15 tatalis of th e Time B Condition o for the promote and the condition of the promote and the condition of the promote and the set of inverse the nereby mode and the promote and the promote and the promote and the promote and the promote and the promote and the promote and th	Statement of A he SAJ, SID & K ank Mandate rypose of contry rypose of contry rypose of contry service charge ongst which it hall be deduck confirm that It it also be from plicant ignatory oned in One est in scheme	ddition: M inclu Form. I. avention ose exvected from tunds ree firme Bases of ql	ding deta We have n or evasis plicable fr me is beiling me is beiling for subsection ank Man MF on ar	tion (SAL) ils relatir not rece milting q orom time ing precorription o motion of an implicit on the second second second the second se	I), Schern ing to varived nois viced nois variant Mu variant M	nth) e Inform ious serv- been in gulation gulation gulation tual Fun The ARF agulation tual Fun The ARF agulation tual Fun The ARF agulation tual Fun the ARF agulation tual Fun tual Fun the ARF agulation tual Fun tual Fun Fun Fun Fun Fun Fun Fun Fun Fun Fun	dividual	ocumer filling u y any r s / Noti v. I und has dis reby de ges sho ding cha A ut A ut s S Man	nt ISID), Ke p this form factors // factors // erstand th through nc nnels or front through nc nnels or front date Form Date Market Date all Funct all Func all Fu	I under tiffs, direction of the second secon	alter action stand action so ra mat so ra action so ra action	Memo that th indiree ny othe at its a commi iormati tors. channe / our N	/edne randuu e amo e amo e amo ssions ssions els or fr queste	esday m (KIWunt fox unnt fox m (KIWunt fox unnt fox m (KIWunt fox makin licable e discr i (in the given t e discr i (in the given t room fuu NR Accc ed to r) and ward: ig this istore	
LARATION II //We would like to invest in a gequent amendments thereto. //We have real margements systematic investment plan (SIP) tranent. I //We declare that the amount invest ted by the Government of India or any Stat ted by the Government of India or any Stat ted by the Government of India or any Stat ted by the Government of India or any Stat signed and particulars given by me/us are confirm that I am resident of India. □ //We due to any of the services completely or part of the services completely or part of the services completely or part of India. □ //We due to any of the services completely or part of the services completely of the amount mentioned in One Time B sectors and the service of the	uant	d (before fillin) ill be debited me is througy y I a ccept ar any prior noti momplete. Furt mr/We are No. t. I/We undert an an tat the amore e should be SB-N Na Maximun Folio	g applicatio from bank h legitimate and agree to care to me. I of competing S her, I agree on-Resident take that all unt will be the maximum set the maximum NRE [ame of competing NRC.	Half Ye n form) co account sources be boundagree qu account sources account ac	d from the nount that the nount that the nount that the nount that the nount	wided ir not de s not de	y the de n my On sisigned f ms and n my folio I Funds f e (if appl e (if appl under th Secon uthori account accound lik Ba Dther	s of the 15 tatalis of the Formation of the purchase condition of the purchase (condition of the purchase (condition of the purchase) seed S t mentication of the purchase t menti	Statement of A he SAJ, SID & K ank Mandate urpose of contr is including the service charge ongst which the ill also be from plicant ignatory oned in One est in schemu e hk A/c Reference	ddition: Minclu Form. I. vavention oose exv es Scheue Scheue ed from re funds re fime Bid ses of qu y re 2	ding deta We have n or evasi- functional details and the subsc sor subsc- ceived fro ank Man MF on ar	tion ISAL ils relatir not rece yoom time org record ription of an mabrod date / I y trans	necessity of the second	nth) e Inform ious serv been in guldation that Fun ARM to me. asy - Inc asy	ation D. ices. By Juced b is / Rule is / Rule to / Rule id char id char d from a d from	ocumer filling u y any r s / Noti has dis reby de ges she ibroad t Autor s Manu- s Manu- s Manu- s Manu- s Sch	nt (SID), Ke ke p this form rebele or greater fications // fications // fications // fications // fications // fications // thore are the paid thore are the paid	I under the second seco	alter	Memoo Memo Memoo Memoo Memo Memoo Memoo Memo Memoo Mem	Vedne randuu er Appi bsoluti ssions on is c els or fir RE/FC	esday m (KIWunt to, unt to, un)) and ward: Law: etion a form ount. γ CA	
LASATION I LASATION I VWe would like to invest in a equent amendments thereto. VWe have rea impsum / systematic investment plan (SIP) timent. I /We declare that the amount invest ted by the Government of India or any Stat particulars given by me/us are confirm that I am resident of India. □ I /We out First / Sole Applicant Authorised Stat signing this SIP enrolment form I/We und the amount mentioned in One Time B CONTINUE OF CONTINUE standard Content form I/We und the amount mentioned in One Time B CONTINUE the amount mentioned in One Time B CONTINUE the amount mentioned in One Time B CONTINUE the amount of SIP CONTINUE totict (tick ✓) □ SB □ CA Bank □ mount Of Rupees □	uant	d (before fillin) ill be debited me is througy y I a ccept ar any prior noti momplete. Furt mr/We are No. t. I/We undert an an tat the amore e should be SB-N Na Maximun Folio	g applicatio from bank h legitimate ad agree to care to me. I of competing S her, I agree on-Resident take that all unt will be the maxin set the maxin NRE [ame of competing NRC.	Half Ye n form) co account sources be boundagree qu account sources account ac	d from the nount that the nount that the nount that the nount that the nount	wided ir not de s not de	y the de n my On sisigned f ms and n my folio I Funds f e (if appl e (if appl under th Secon uthori account accound lik Ba Dther	s of the 15 tatalis of the Formation of the purchase condition of the purchase (condition of the purchase (condition of the purchase) seed S t mentication of the purchase t menti	Statement of A he SAJ, SID & K ank Mandate urpose of contr is including the service charge ongst which the ill also be from plicant ignatory oned in One est in schemu e hk A/c Reference	ddition: Minclu Form. I. vavention oose exv es Scheue Scheue ed from re funds re fime Bid ses of qu y re 2	ding deta We have n or evasi- functional details and the subsc sor subsc- ceived fro ank Man MF on ar	tion ISAL ils relatir not rece yoom time org record ription of an mabrod date / I y trans	necessity of the second	nth) e Inform ious serv been in guldation that Fun ARM to me. asy - Inc asy	ation D. ices. By Juced b is / Rule is / Rule to / Rule id char id char d from a d from	ocumer filling u y any r s / Noti has dis reby de ges she ibroad t Autor s Manu- s Manu- s Manu- s Manu- s Sch	nt (SID), Ke ke p this form rebele or greater fications // fications // fications // fications // fications // fications // thore are the paid thore are the paid	I under the second seco	alter	Memoo Memo Memoo Memoo Memo Memoo Memoo Memo Memoo Mem	Vedne randuu er Appi bsoluti ssions on is c els or fir RE/FC	esday m (KIWunt to, unt to, un)) and ward: Law: etion a form ount. γ CA	