

# SIP & SIP-TOP UP REGISTRATION / RENEWAL



ARN- 106392 / RIA / PMRN Code# <b>BLUECHIP STOCKS</b>	ARN- Sub-Distributor Code	<b>E-107715</b>	Internal Code for Sub-broker/ Employee
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#By mentioning RIA/PMRN code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of Bandhan Mutual Fund.  
 Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. XIII). - I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Signature of First / Sole Applicant /  
Guardian / Authorised Signatory

**TRANSACTION CHARGES** (Please tick any one of the below) (Refer Instruction No. S)

I am a first time investor in mutual funds (₹ 150 will be deducted) OR 
  I am an existing investor in mutual funds (₹ 100 will be deducted)

Applicable for transactions routed through a distributor who has 'opted in' for transaction charges. Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investors' assessment of various factors including service rendered by the distributor.

Please Tick (✓)  SIP Registration  SIP Renewal  SIP with Top-up Registration  SIP - Change in Bank Details

Please mention relevant SIP details below and also in the Bandhan Common Mandate (Bandhan OTM).

**UNIT HOLDER INFORMATION**

Existing Folio Number  PAN

Name of the First Holder

Scheme  Plan  Option

**SYSTEMATIC INVESTMENT PLAN DETAIL (SIP DETAIL) Debit date except 29<sup>th</sup>, 30<sup>th</sup> & 31<sup>st</sup>**

Frequency Please (✓)  Weekly - Date will be 7<sup>th</sup> / 14<sup>th</sup> / 21<sup>st</sup> / 28<sup>th</sup> (Default date 7<sup>th</sup>)  Monthly (Default date 10<sup>th</sup>)  Quarterly (Default date 10<sup>th</sup>)

SIP Day  SIP Period From  To  OR  30 Years Installment Amount (₹)  in figures

**SIP TOP-UP** (Optional) (Refer IV (viii)) Registration for this facility is subject to the investor's bankers accepting the mandate for this registration.

Frequency  Half Yearly  Yearly\* (Default) Amount ₹  in figures  (The Top-up amount should be Rs. 500 and multiples of Rs. 500 thereafter)

For SIP applications received during NFO, the SIP will start only after 30 days from the NFO allotment date.

**INITIAL SIP INSTALLMENT PAYMENT THROUGH (Please provide cheque for initial SIP Amount and fill below OTM for subsequent SIP instalments.)**

My existing OTM registered to be used for initial & subsequent SIP instalments  (OR)

Cheque No.  Cheque Date  Cheque Amount  Bank & Branch Name

**DEMAT ACCOUNT DETAILS (Applicable ONLY for investors who are willing to hold their investment in DEMAT form)**

NSDL: Depository Participant (DP) ID (NSDL only)	Beneficiary Account Number (NSDL only)	CDSL: Depository Participant (DP) ID (CDSL only)
<input type="text"/>	<input type="text"/>	<input type="text"/>

I/We have read, understood and agree to comply with the terms and conditions of the Statement of Additional Information, Scheme Information Documents and Key Information Memorandum of the Scheme(s), Foreign Account Tax Compliance Act and Common Reporting Standards, statutory requirements prescribed by SEBI, AMFI, Prevention of Money Laundering Act, 2002 (PMLA), Privacy Policy of Bandhan AMC Limited available on the website of Bandhan Mutual Fund www.bandhanmutual.com and all applicable rules and regulations and hereby confirm that I/We have not received nor been induced by any rebate or gifts, directly or indirectly, to make this investment. I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs. 50,000 in a year. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. For NRIs / PIOs / FPIs only: I / We confirm that I am / we are Non Resident Indians / Person(s) of Indian Origin / Foreign Portfolio Investors but not (i) United States persons as per applicable Regulations or (ii) residents of Canada, and I / we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary / FCNR Account maintained in accordance with applicable RBI guidelines. I/We hereby provide my/our consent to Bandhan AMC Limited for (i) collecting, storing and usage of personal information for the purposes of processing my/our application and providing the services to which I/we have subscribed and for the purposes of meeting legal and regulatory requirements; (ii) receiving updates on promotional material and transaction related communication via mail, telecall, SMS, etc.

First / Sole Applicant / Guardian / Authorised Signatory  Second Applicant  Third Applicant



**Bandhan One Time Mandate (OTM)**

UMRN  Date

Sponsor Bank Code  Utility Code

Tick (✓)  I/We hereby authorize Bandhan Mutual Fund to debit tick (✓)  SB  CA  CC  SB-NRE  SB-NRO  Other

Bank A/c number  with Bank  IFSC  or MICR

an amount of Rupees  ₹

FREQUENCY  Monthly  Quarterly  Half Yearly  Yearly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

PAN / Application No.  Mobile No.

Reference  Email ID

I agree for the debit mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule for charges of the bank.

**PERIOD**

From	D	D	M	M	Y	Y	Y	Y
To	3	1	1	2	2	0	5	0

Or  Until Cancelled

Signature of Primary Account Holder  Signature of Account Holder  Signature of Account Holder

1.  Name as in bank records 2.  Name as in bank records 3.  Name as in bank records

- This is to confirm the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account, based on the instructions as agreed & signed by me.
- I have understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorised the debit.