## SBI MUTUAL FUND Investment Manager: SBI Funds Management Pvt. Ltd. A PARTNER FOR LIFE (A Joint Venture between SBI & AMUNDI) 191, Maker Towers E; Cuffer Parade, Mumbai - 400 005. Tel.: 022-22180221-27, www.sbimf.com SIP ECS/DIRECT DEBIT FACILITY: REGISTRATION CUM MANDATE FORM ulsorily alongwith Con aring date) EUIN\* e through SIP ECS/Direct Debit Facility must complete this fo lication should be submitted atleast 30 days before the 1° ECS/Dire New Investors subscribing to the s non Application For cation should be so Branch Code ARN & Name of Distributor Sub-Broker Code Reference No. (Employee Unique Ident E029058 ARN-3852 Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor perior commission shall be paid directly by the investor to the AMFI registered distributors based on the investors' assessment or various factors including the service rendered by the distributor of the paid that the EUIN box has been intentionally left blank by medius as this in execution-only 'transaction without any interaction or advice by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction THANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENTS ONLY (SEE NOTE 16) In case the subscription amount is Rs. 10,000/- or more and if your Distributor has oped to receive Transaction Charges, Rs. 150 (for first time mutual fund investor) or Rs. 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested. Please ( ✓) SIP Registration SIP - Change in Bank Details SIP Renewal INVESTOR DETAILS (For Existing Investor please mention Folio Number. For New Applicants please mention the Common Application Form Number) Folio No./Application No. Name of 1st Applicant Name of Father/Guardian in case of Minor PAN DETAILS First Applicant / Guardian Second Applicant Third Applicant Mandatory Enclosures Mandatory Enclosures Mandatory Enclosures PAN Proof KYC Acknowledgement PAN Proof PAN Proof KYC Acknowledgement KYC Acknowledgen PAN Exempt KYC Ref no (PEKRN for Micro investments) SIP DETAILS (ECS in select cities or Direct Debit in select banks only) (SEE NOTE 12 &13 ) SIP with Cheque SIP without Cheque Scheme Name Regular Direct Option (Please 🗸 ) Bonus Growth Dividend Dividend Facility (Please ✓ ) Reinvestment Payout First SIP Cheque No. Each SIP Amount (Rs.) (Note: Cheque should be drawn on bank account mentioned below No of SIP 20<sup>th</sup> 25<sup>th</sup> 30h (For February, last business day) 10<sup>th</sup> 15<sup>th</sup> Frequency Monthly Quarterly D M M From SIP Period OR 3 years 5 years 10 years 15 years Perpetual (Select any one) TOP-UP SIP (SEE NOTE 12 &13) Top-up Frequency (Please √ any one) Top up Amount Rs. (in multiples of Rs. 500 only) Half - Yearly Annual DECLARATION: I/We hereby, authorize the AMC and their authorised service providers, to debit my/our following bank account directly or by ECS for collection of payments. BANK PARTICULARS (as per bank records) Name of 2nd Holder Name of 3rd Holder **Branch Name** and Address City

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DECLARATION'S SIGNATURE: (We hereby declare that the particulars given above are correct and express my willingness to make payments referred above to debit my/our account directly or through participation in ECS. If the transaction is delayed or not effected for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform AMC, about any changes in my/our bank account. (We confirm that the aggregate of the lump sum investment (fresh purchase & additional																									
purchase) and SIP installments in rolling 12 monitis period or financial year i.e. April to March does not exceed Rs. 50,000/- (Rupees Fifty Thousand) (applicable for "Micro investments" only). The ARN holder has disclosed to mejus all the commissions fin the form of trail commission or any other model, payable to him for the different competing. Schemes of various Mutual Funds from amongst which the Scheme is being recommended to mejus We have read and agreed to the terms and conditions mentioned in SID/KIM.																									
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This is to inform you that I/We have registered for making payment towards my investments in SBIMF by debit to my /our above account directly or through ECS. I/We hereby authorize you																									
to honour such payments for which I/We have signed and endorsed the Mandate Form.  Further, I authorize my representative (the bearer of this request) to get the above Mandate verified. Mandate verification charges, if any, may be charged to my/our account.																									
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All purchases are subject to realisation of cheques.