

## **SIP AUTO DEBIT FACILITY**



New Investors are requested to fill-in the scheme application form also.

REGISTR	ATION C	UM MANDA	TE FORM FO	R ECS (Del	bit Clearing	/ Standing Instructi	on / Direct [	Debit Facility in se	elect banks only	j)	
First SIP cheque and subsequent via Auto Debit in select cities only. (Please attach copy of cheque / cancelled cheque)											
New Registration	with TMF		_	k Account	for existi	ng Registration w	ith TMF	☐ MICRO	SIP (refer ins	t. <b>E)</b>	
Agent Code ARN-385			anch Code	ad Distributor		Sub-Broker / ARN Code			N Code E0:		
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.  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 distrit not charged any advisory fees or	outor or noty n this transac	vithstanding the a tion.	advice of in-appro	opriateness, if	any, provide	d by the employee/rel	ationship mana	ager/sales person of			
TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Inst. A15 and please tick (<) any one)  I confirm that I am a First time investor across Mutual Funds.  (Rs. 150 deductible as Transaction Charge and payable to the Distributor)  (Rs. 100 deductible as Transaction Charge and payable to the Distributor)											
In case the purchase / subscription amount is Rs. 10,000 or more and your Distributor has opted to receive transaction charges, the same are deductible as applicable from the purchase / subscription amount and payable to the Distributor. Units will be issued against the balance amount invested (Refer Instruction A15).											
			alance amount in	vested (Refer	Instruction A	15).					
Sole / First Investor Name	_	JE I AILS									
Folio/Application No.		Existing Investors please mention Folio Number. New applicants please mention the application form number.									
Scheme											
Plan											
Option and Sub Option SIP AND BANK DETAIL	S										
Each SIP Installment Amo					Freque	ency Monthly (De	fault)	Quarterly 🔲	Status:	□RI □ NRI	
Amount in words						,, , .					
First SIP Cheque De	tails: C	heque No.:				Cheque Amo	unt in `				
Cheque Date :/	/SI	P Dates: Pleas	se mention th	e date	in v	vords		day of the	month. e.g. fo	r SIP on 10th	
please mention 1 0	Tenth day	of the month	[please refe	r instruction	n 12 for an	y day SIP] Default	10th (Tenth)	)	_		
SIP Period: Start From	n M M	YYYY		e (please tic	K V ) E	Default 1 2	2 0 9 9	SIP End Da	M M	Y Y Y Y	
(Note: Cheque should be Mutual Fund (TMF) and the	ir authorise		provided bel		allow min	imum one month					
PARTICULARS OF BA		OLINT									
Account holder Name	THE ACC										
as in Bank Account Bank Name											
						City					
Branch Name											
Account Type Savings	Curre	nt Cash	Credit NR	O NRN	R NRE	9 Digit MICR Code	(Mandatory	for ECS)			
Core banking A/c no. (in figures)											
I/We hereby declare that the particulars given above are correct & complete & express my willingness to make payments referred above through participation in ECS/Direct Debit/											
Standing Instruction. I/We will also inform TAML, about any changes in my bank account. I/We have read & agreed to the terms & conditions mentioned overleaf.  This is to inform I/We have registered for RBI's Electronic Clearing Service (Debit Clearing) Direct Debit/Standing Instruction Facility & that my payment towards my investment in Tata											
Mutual Fund shall be made from to get it verified & exec		elow mentione	d bank account	with your ba	nk. ľ/We au	thorize the represent	ative carrying	this ECS/Direct D	ebit/Standing In	struction mandate	
I/We acknowledge that no separate intimation will be received from the Bank in case of non-execution of the instructions for any reasons whatsoever.  To - The Trustee, Tata Mutual Fund, Mumbai. Having read & understood the contents of SAI/SID/KIM of Tata Mutual Fund Scheme/s, I/We hereby apply for the respective Units of Tata											
Mutual Fund Scheme/s at NA	V based resa	ale price & agree	e to abide by te	rms, conditio	ons, rules &	regulations of scheme	e/s. For Micro	SIP: I/We hereby	declare that I/M	e do not have any	
existing Micro SIP's which tog SIGNATURE/S	jetner with i	tne current appi	ication will resu	it in aggregat	te investmer	its exceeding 50,00	u/- in a year.				
AS PER TATA MUTUAL FUND											
RECORDS	-1- /4 0		. C:					2-4 0			
,,,,,,,,		count Holder's	s Signature		and Accour	nt Holder's Signatu	re	Srd Accol	ınt Holder's S	gnature	
To - Branch Manager,	HE BAINN	EK	Bank, I/We	undertake t	o keep suffi	cient funds in the fund	ding account o	on the date of exec	cution of standin	g instruction. If the	
transaction is delayed or not of date of debit to my/ our accord	effected at a unt happens	Il for reasons of to be a non bus	incomplete or iness day as per	incorrect info	ormation, I/ Fund. execu	We would not hold I tion of the SIP will ha	Tata Mutual Fu	und or the above r day of holiday & al	nentioned Bank lotment of units	responsible. If the will happen as per	
the Terms & Conditions listed of its obligations under this Ag	l in the KIM/	SID/SAI of the N	∕lutual Fund. Th	e above mer	itioned Bank	shall not be liable for	r, nor be in de	efault by reason of	, any failure or o	delay in completion	
fog, war, lightening, earthqual beyond Bank's reasonable cor	ke, change o	of Government p	oolicies, Unavail	ability of abo	we mention	ed Bank's computer:	system, force	majeure events, o	or any other cau	se of peril which is	
Standing Instruction entered I mandate varification & transaction	by Tata Mut	ual Fund with t	he Bank & I/we	are also bor	und by the	terms thereof. I/We	also authorize	the Bank to debi	t my account fo	r charges towards	
	Dodnie	od dde to misan	noient failes as	пррисцые.							
SIGNATURE/S AS PER BANK											
(MANDATORY)		1st Account Holder's Signature			2nd Account Holder's Signature (as in bank records)			3rd Account Holder's Signature (as in bank records)			
		in bank record e signed as pe		operations	-	ders to sign if the r	node of oper	•	In Dank record	is)	
BANKER'S ATTESTATION (FOR BANK USE ONLY)											
Certified that the signature o	f A/c holder	and the details	mentioned in 'F	articulars of	Bank A/c' al	bove and its MICR co	de are correc	t as per our recor	ds		
Signature of Bank Manager	with name	Employee code	Rank Soal and	Contact Nue	nher		Rank	Account Number			
FOR OFFICE USE ONI							Dank	, account reuniber			
Recorded on						Scheme Code					
Recorded by					-	Credit A/c Numbe	r				
Bank use Mandate Ref. No	D				_	Customer Ref. No					