SIP & SIP-Top up Registration Form / Renewal Form (For Existing Investors) Form 2



Distributo	r Name: Meri Punji IMF	Pvt Ltd	Application No.								
	ode ARN-102495	Sub-Distributor Code	ARN-	Intern	al Code for Sub- Employee	broker/		EUIN No.	E-145320		
/We hereby confi	m that the EUIN box has been intention loyee/relationship manager/sales persoi elationship manager/sales person of the	ally left blank by me/us as this is and of the above distributor or notwiths distributor and the distributor has no	n "execution-only" transaction standing the advice of in-approp t charged any advisory fees on	without any interactionateness, if any, prothis transaction.	on or vided First I	Holder	Second H	older	Third Holder		
, , , ,	DER INFORMATION										
Existing Fo	lio Number		Name of the First	Holder							
Please Tick	. ,		Top-up Registration	SIP -	Change in Bank	Details	Please provide cop SIP details in the fo		cheque and mention rele andate.		
SYSTEMAT Name of th	TC INVESTMENT PLAN DET				DI	an		Option			
	Installment Amount Rs.			Cheque No.			Name	. Option			
	Monthly SIP Date		SIP Period	T							
	(10, if no date is mentioned)	From M M	From M M Y Y Y Y			SIP Top-up (Optional) (Refer J (viii))			(Please ✓ to avail this facili		
<u>~</u>		To M M		Top-up Amount (Rs.)				(The Top-up amount should be Rs. 50 and multiples of Rs. 500 thereafter)			
	instalment Amount (Rs.)	1 2	OR 2 0 9 9 end date is Dec 2099	SIP Top-up Frequency: Half-yearly Yearly (Default Top-up option is Yearly Registration for this facility is subject to the investor's bankers accepting the mandate for SIP Top-up registration.							
lemption subject to de undertake to kee pormation, I/We won fe hereby acknowle it. I/We also under nit in any form, mo widers, other SEB1 & ARN holder has d rmicro-investment NRIs / PIOS / FPIs mmodity Futures initalined in accorda SIGNATUR	pur Customer" process is not completed by applicable exit load and undertake such oth ap sufficient funds in the funding account or uld not hold the Mutual Fund or the bank resp adge and confirm that the information provid take to keep you informed immediately in wide or manner, all / any of the information pregistered intermediaries or any Indian or for isclosed to me/us all the commissions (in the sonly: I/We confirm that I am / we are Non Frading Commission, as amended from time unce with applicable RBI guidelines. E/S AS PER IDFC MUTUAL Applicant / Guardian / Author	er action with such funds that may be re the date of execution of standing instructions libe. I/We further undertake that any ed above Is/are true, correct and complifting about any changes/modification to ovided by me/ us, including all change eign governmental or statutory or judic ne form of trail commission or any other yo ther existing investment in the scher tesidents Indians / Person(s) of Indian of the totime or residents of Canada, and the FUND (MANDATORY)	quired by the Law. uction. I/We hereby declare that the changes in my/our Bank details we tet to the best of my/our knowled of the above information in future is, updates to such information as ala authorities / agencies, the tax/r mode), payable to him for the diff mes of IDFC Mutual Fund which to Drigin / Foreign Portfolio Investors hat I / we have remitted funds fro	ne particulars given abo rill be informed to the M ge and belief. In case an and also undertake to p is and when provided b evenue authorities active rernt competing Schen gether with this proposs but not United States p	ove are correct and computual Fund immediately. y of the above specified in rovide any other addition y me/ us to the Mutual Funder investigation agences of various Mutual Funde investment will result in ersons within the meaning	olete. If the trans offormation is fo al information a ind, its Sponso ies without any ds from among a aggregate invent	saction is delayed or not e und to be false or untrue o us may be required at your r, Asset Management Cor obligation of advising me, jst which the Scheme is be estments exceeding Ns. Gi n (S) under the United Stat n my / our Non-Resident	ffected at all for re r misleading or mis end. I/We hereby npany, Trustees, tl /us of the same. eing recommended 0,000/- in a year. es Securities Act of	asons of incomplete or inco srepresenting, I/we shall be authorise you to disclose, s heir employees, agents / se it o me / us. f 1933, or as defined by the		
(x)		(x)				(x)					
			ACH N	landate							
	UMRN		for official u	ISE				Date D	D M M Y		
Tick(✓)	Sponsor Bank Code	Sponsor Bank Code for official use					for official u	for official use			
CREATE MODIFY X	I/We hereby authorize	IDFC Mutual F	und to	debit (tick ✓)	SB C	A CC	SB-NRE	SB-NRO	Other		
ANCEL X	Bank a/c number										
ith Bank	Name of cust	omers bank	IFSC			0	r MICR				
n amount o	f Rupees						₹				
REQUENCY Mthly Qtly XH-Yrly XYrly XAs & when prese					ed DEBIT TYPE 🗵 Fixed Amount 🗹 Maximum Amount						
eference 1 Folio No. / Application No.				Phon	Phone No.						
eference 2		Scheme Name		Emai	I ID						
-	oit of mandate processing charges	by the bank whom I am author	izing to debit my account a	s per latest sched	ule of charges of the	bank.					
From To		1.(x) Signa	ture as per Bank	2. (x)	Signature as	per Bank	3. (x)	Signatu	re as per Bank		
	Until cancelled	Nar 1.	ne (Mandatory)	2	Name (Man	datory)	3	Name	(Mandatory)		

This is to confirm that 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 and signed by me. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the user entity / corporate or the bank where I have authorized the debit.