

Please

Exchange Plaza, 'B' Wing, Ground Floor, NSE Building, Bandra Kurla Complex, Bandra (E), Mumbai - 400 051. Toll Free - 1800 425 5600 • Fax: 022-6772 0512

Website: www.principalindia.com

## SIP Registration Form

FOR EXISTING UNIT HOLDERS ONLY E-mail: customer@principalindia.com Funds Attention: No need to attach One Time Mandate again, if already registered / submitted earlier. Broker ARN Code For Office use only Sub-Broker Code | Sub-Broker ARN Code EUIN No. Principal Group Employee Code Micro SIP ARN-102495 E-145320 (Meri Punji IMF Pvt Ltd) ☐ 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. Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor. Sole/First Applicant's Signature Mandatory Investor Name: Folio No.: Payment Cheque Drawn Date Amount Details: No. on PAN/PEKRAN & KYC SIP Installment Scheme/Plan/Option/Sub-option SIP Cycle Date Frequency Start Month/Year Fnd Month/Year Perpetual No Amount (₹) 1<sup>st</sup> \_\_\_\_ 5<sup>th</sup> Monthly 15<sup>th</sup> \_\_ 25<sup>th</sup> Quarterly ☐ One Time Mandate is already registered in the folio. [No need to submit again].
☐ One Time Mandate is attached and to be registered in the folio. SIP Auto debit will start after mandate registration which takes Ten to Thirty days depending on NACH or ECS modalities. The total of all installments in a day should be less than or equal to the amount as mentioned in One Time Mandate already registered or submitted, if not registered. Declaration: Having read, understood and agreed to the contents of OTM Facility, the Scheme Information Document, Statement of Additional Information, key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of Principal Mutual Fund mentioned within, I hereby declare that the particulars given above are correct and express my willingness to make payments towards SIP instalments referred above through participation in NACH/ECS/Direct Debit. The ARN holder, where applicable, has disclosed to me/us all the commissions (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. Signature [as per Mutual Fund Records/Application] X First Unit Holder Signature (x) Second Unit Holder Third Unit Holder Signature (x)Signature (x)ISC Stamp SIP Acknowledgement through OTM facility. Principal Mutual Fund Investor Name: Folio No./Application No. Scheme Name: Plan: Option: Amount:

## Don't forget to fill the below mentioned details in the OTM Form above

- Account Number, Bank Name, IFSC/ MICR Code, Branch
- Mention the maximum amount per day
- Mention the amount in words and in figures, just as you would in a cheque
- Folio No. or Application No., Mobile No. and E-mail Id
- Your signature as per your bank account

## ONE TIME MANDATE (OTM)

Just register once and thereafter no more cheques/DD for investments or Debit mandate for new SIPs!



Principal*	Mandate Form for NACH/ECS/DIRECT DEBIT [Applicable for Lumpsum Additional Purchases as well as SIP Registrations]														OT!	M 🖣			
Funds	*UMRN											Date	D D	М	W	YY	Y		
Tick ( 🗸 )	*Sponsor Bank Code							ility (	Code										
MODIFY CANCEL	I/We, hereby authorize PRINCIPAL MUTUAL FUND										To d	To debit (tick ✓) SB / CA / CC / NRE / NRO / Other							
Bank A/c. N	umber:																		
With Bank					IFSC							or MICI	2						
An amount of R	upees (In Words)											₹	(In Figu	ıres)				1	
Frequency	☐ Mthly ☐ C	Qtly _	As & v	vhen pre	esented				DEBIT	TYPE		Fixed A	mount		Maxir	num A	mount	_	
Folio Number							Phor	ne No											
PAN Number							Ema	il ID											
PERIOD From D D D	M M Y Y Y Y M M Y Y Y Y	(x)_	Signatur	e of 1st A	ccount hold	der	( <u>x)</u>	Signa	ture of 2	nd Acco	unt ho	lder	<b>(x)</b> Sign	gnature o	f 3rd Ac	count h	nolder	-	P Si
This is to confirm	ntil cancelled that the declaration has been o	1	ead. under	as in bank	nade by me		2		Name a	s in ban	k recor	ds	3	Name	as in ba	ank reco	ords	-	
eclaration: I/We hereby declare that the particulars given on this mandate are correct and complete and ex make payments referred above through participation in NACH/ECS/Direct Debit/Standing Instructions. I/Werms of Mandate Facility offered by Principal Mutual Fund and as amended form time to time and of NACH/EC structions.							express m We hereb	xpress my willingness and authorize We hereby confirm adherence to the CS (Debits)/Direct Debits /Standing					Customer Information  Mobile:						
uthorisation to Banl nd that my/our paym	k: This is to inform that I/We have nent towards my/our investment	in Principal	l Mutual Fu	ınd shall be	e made fron	n my/our	above me	ntione	d bank a	count w	rith E	-mail ld:							

The above Mandate needs to be submitted only once for registration with or without SIP form. Once the mandate is registered, investor need not submit mandate again and can do lump sum investments, start new SIP registration, using Physical Forms.

authorize the bank to debit my account for any charges towards mandate verification, registration, transactions, returns, etc. as applicable.