

Systematic Investment Plan Form

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We have read and understood the contents of the SAV SID of the above referred Scheme(s) of Kotak Mahindra Mutual Fund. IWe hereby apply for allotment / purchase of Units in the Scheme(s) indicated as abgree to abide by the terms and conditions applicable there to. IWe hereby declare that I We authorized to make this investment in the above mentioned Scheme(s) and that the amount invested in the Schemoly declare that I we authorized to make this investment in the above mentioned Scheme(s) and that the amount invested in the Schemoly declare that I we authorized to make this investment in the above mentioned Scheme(s) and that the amount invested in the Schemoly that the scheme in the above mentioned by provisions of Income Tax Act, Anti Morey Lour (provision of Income Tax Act, Anti Morey Lour (provision may for the provisions of Income Tax Act, Anti Morey Lour (provision may for the provisions of Income Tax Act, Anti Morey Lour (provision may for the provisions of Income Tax Act, Anti Morey Lour (provision of Income Tax	Optional) (Please refer instructions overleaf)			
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Third Account Holder (x) To be signed by All Applicant's if mode of operation is "Joint". (As in Bank Records) Debit Mandate Form NACH/ ECS/ Direct Debit UMRN	rms and conditions applicable there to. I/We hereby declar ces only and is not designed for the purpose of any contravt to rany other applicable laws enacted by the Government of our lovestment Advisor, and/or banks. I/We have neither rece	e that I /We authorized to make this ention or evasion of any Act, Rules, Re India from time to time. I/We hereby a lived not been included by any rebate o	investment in the above mentioned gulations, Notifications or Direction uthorize Kotak Mahindra Mutual Fu coifts, directly in making this investo	Scheme(s) and that the amount invested in the Scheme(s) is us of the provisions of Income Tax Act, Anti Money Laundering und, its investment Manager and its agents to disclose details of pent. By ticking microsing. IWe bereby declare that our total SIP
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To 3 1 1 2 2 0 9 9 (X) Signature Primary Account holder (X) Signature of Account holder (X) Signature of Account holder	it of mandate processing charges by the bank v			(v)

Inis is to confirm that the declaration has been carefully read, understoods 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.