

## Canara Robeco Mutual Fund

Investment Manager : Canara Robeco Asset Management Co. Ltd.  
Construction House, 4th Floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001.  
Tel.: 6658 5000 - 5010, 6658 5086 Fax: 6658 5012 / 13 www.canararobeco.com

## Systematic Investment Plan (SIP) Auto Debit Facility/STP/SWP/MICRO SIP

BrokerName / ARN	Sub Broker Code / ARN	Employee Unique Identification Number	Bank Serial No. /Branch Stamp/Receipt Date
ARN-97821		E113814	

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.

☐ EUN: I/We hereby confirm that the EUN 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 inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fee on this transaction.

☐ Signature of 1st Applicant / Guardian

☐ Signature of 2nd Applicant

☐ Signature of 3rd Applicant

## Registration cum mandate form for ECS (Debit clearing / Auto debit)

First Investment in SIP vide a cheque and subsequent investments via Auto Debit, available in select cities only.

- ☐ New SIP Registration by existing investor ☐ Change in Bank Account for an existing Investor with Canara Robeco Mutual Fund  
☐ New SIP Registration by new investor (also attach the new application form duly filled & signed)

## Investor and investment details

Sole / First Investor Name	
PAN No. (Refer Instruction No.10)	
Folio No.	
Scheme	
Plan	
Option & Sub Option	

## SIP and Bank details

Each SIP Amount (₹)		Frequency	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
First SIP Cheque No.:		Cheque date should be either 01st, 05th, 15th, 20th, 25th of the month/quarter. (Note: Cheque should be drawn on bank details provided below)	
SIP Auto Debit Dates:	<input type="checkbox"/> 01st <input type="checkbox"/> 05th <input type="checkbox"/> 15th <input type="checkbox"/> 20th <input type="checkbox"/> 25th of the month/quarter		
REGULAR SIP:	SIP Period : Start from Month <input type="text"/> Year <input type="text"/> End On Month <input type="text"/> Year <input type="text"/>		
PERPETUAL SIP:	SIP Period : Start from Month <input type="text"/> Year <input type="text"/> Until further instruction		

I/We hereby authorize Canara Robeco Mutual Fund and their authorized service providers (M/s. Tech Process Solutions Ltd.), to debit my/our following bank account by ECS (Debit Clearing) / auto debit to account for collection of SIP payments.

## Systematic Transfer Plan (STP)

I/We would like to switch to the following: From Scheme/Option		To Scheme/Option	
<input type="checkbox"/> Fixed Amount ₹		OR <input type="checkbox"/> Capital Appreciation. Frequency	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> 01st <input type="checkbox"/> 05th <input type="checkbox"/> 15th <input type="checkbox"/> 20th <input type="checkbox"/> 25th of the month/quarter
Period : Enrolment Period From	/ / (dd/mm/yy)	To	/ / (dd/mm/yy)

## Systematic Withdrawal Plan (SWP)

<input type="checkbox"/> Fixed Amount ₹		OR <input type="checkbox"/> Capital Appreciation Scheme Name/Option	
Frequency	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> 01st <input type="checkbox"/> 05th <input type="checkbox"/> 15th <input type="checkbox"/> 20th <input type="checkbox"/> 25th of the month/quarter		
Period : Enrolment Period From	/ / (dd/mm/yy)	To	/ / (dd/mm/yy)

## Particulars of bank account

Account Holder Name as in Bank Account			
Bank Name		Branch	
City		PIN code	
Account Number		Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Cash Credit
IFSC Code (RTGS/NEFT)		9 Digit MICR Code	

(Please enter the 9 digit number that appears after your cheque number)

## DECLARATION

I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in ECS/Auto Debit. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information. I/We would not hold the user institution responsible. I/We will also inform Canara Robeco Mutual Fund about any changes in my bank account I/We have read and agreed to the terms and conditions mentioned overleaf.

First Account Holder's Signature

Second Account Holder's Signature

Third Account Holder's Signature

## For office use only (not to be filled in by investor)

Recorded on		Scheme Code	
Recorded by		Credit Account Number	
Bank use Mandate Ref. No.		Customer Ref. No.	

## Authorisation of the Bank Account Holder (to be signed by the Account Holder)

This is to inform that I/We have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Auto Debit Facility and that my payment towards my investment in Canara Robeco Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorize the representative, (M/s. Tech Process Solutions Ltd.) carrying this ECS/Auto Debit to account mandate form to get it verified and executed.

Bank Account Number

First Account Holder's Signature  
(As in Bank Records)

Second Account Holder's Signature  
(As in Bank Records)

Third Account Holder's Signature  
(As in Bank Records)