

SIP Enrolment and Auto Debit Form For investments through ECS (Debit Clearing)/Standing Instruction

Channel Partner / Agent Information				Serial No: EQ
Agent's Name and ARN ARN-97821	Sub Broker ARN code	Sub Agent Code	EUIN E113814	For Office Use Only
Transaction charges For Rs. 10,000 and above: ""I/We hereby confirm that where the EUIN space has been left blank by me/us, the transaction is an "execution-only" transaction. Existing Investor-Rs. 100 New Investor-Rs. 150 Upfront commission shall be paid directly by the investor to the AMF1-registered distributors based on the investors' assessment of various factors including services rendered by the distributor.				
Existing Investor Information (Please fill in your Folio No.) Please note that applicant details and mode of holding will be as per existing Folio Number. If you want to change your bank details for your ongoing SIP, all you have to do is (1) tick the box (2) fill in the folio number (3) fill the SIP Auto Debit Bank details and (4) sign; highlighted by the symbol Folio No.				
details for your ongoing SIP, all you have to do is (Name of First/Sole Applicant	1) tick the box (2) fill in the folio number	(3) fill the SIP Auto Debit Bank details and (4)	sign; highlighted by the symbol A Folio No	
Name of First/Sole Applicant				
Permanent Account Number (PAN)		KYC co	mpleted 🗆 Yes 🗆 No Date of Birth	D D M M Y Y Y
Name of Guardian (in case of First / Sole Applicant is a Minor) / Contact Person – Designation (in case of non-individual Investors)				
Permanent Account Number (PAN)		KYC co	mpleted Yes No Date of Birth	D D M M Y Y Y Y
Name of Second Applicant				
D (012)		I I I I I I I I I I I I I I I I I I I	Let average by the	
Permanent Account Number (PAN) Name of Third Applicant		KYC co	mpleted ☐ Yes ☐ No Date of Birth	D D M M Y Y Y Y
Permanent Account Number (PAN)		KYC co	mpleted 🗆 Yes 🗆 No Date of Birth	D D M M Y Y Y Y
DEMAT Account Details (Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the application form)				
☐ National Securities Depository ☐ Central Depository Services (In		it Name	Beneficiary Account Number	
If Micro SIP, please tick	Yes (Micro SIP: Less than Rs 50,000 p	er person in any rolling 12-month period)	Declaration: I/We • having read and understood the cont Information Document • hereby apply for units as indicated	ents of the Statement of Additional Information/Scheme I in the application form • agree to abide by the terms,
If Micro SIP, supporting docume	nt/identification number:	Declaration: IWe • having read and understood the contents of the Statement of Additional Information/Scheme Information Document • hereby apply for units as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gits, directly or indirectly in making this investment • do not have any existing Micro SIPs which together with the current application will result in the total investments exceeding Rs. 50,000 at very the value of the different competing Schemes of various Mutual Trunds from amongst which the Scheme is being recommended to melus. Applicable to NRIs only: Please (Y) We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking		
Fund Name				
Plan ☐ Regular ☐ Direct Option ☐ Dividend Payout	☐ Dividend Re-Investr			
□ Dividend Sweep □ Growth channels or from funds in my/our Non-Resident External / Ordinary Account / FCNR Account on a □				
	ds D 1000 F		Basis Non-Repatriation Basis.	D D M M Y Y Y
SIP Frequency Weekly (Minimum amount Rs 1000 Every Wednesday) Monthly (Minimum amount Rs 250 Minimum No of installments 20) Quarterly (Minimum amount Rs 750 Minimum No of installments 7)			▲ Signature	
SIP Period SIP Starting		☐ Till further notice*	First / Sole	
D D M M	YYDDMMYY	3 1 1 2 2 0 3 1	Applicant / Guardian	
(*The date may be taken as 31/12/2031 in case the bank needs to input a specific date in their system) (refer Guide to investing through SIP) SIP Date for Monthly/Quarterly frequency only 1 7 14 20 25				
➤▲ SIP Auto Debit: Bank Account Details				
Name of Account Holder (as in bank account)			Samuel	
Name of the Bank			Second Applicant	
Branch & City				
Branch Address				
Account Number				
Cheque MICR No			Third	
	ings Current NRE ers		Applicant	
Authorisation & Signature of the Bank Account Holder				
To, The Branch Manager,				
I/We hereby declare that the particulars gi express my willingness to make paymen participation in ECS (Debit Clearing) / Direct If the transaction is delayed or not effected or incorrect information, I/We would not responsible. I/We will also inform Sundaran Asset Management Company Limited, abou account. I/We have read and agreed to mentioned overleaf.	ts referred above thorugh Debit / Standing Instruction. all of reasons of incomplete hold the user institution n Mutual Fund / Sundaram any changes in my back the terms and conditions	' Sole Applicant / Guardiar	n Second Applicant	Third Applicant