

SYSTEMATIC INVESTMENT PLAN (SIP) APPLICATION FORM

(Please read instructions carefully before filling up the form)

Application No.

- ☐ New Registration
☐ Micro SIP
☐ Change in Bank Account
☐ Cancellation

ARN-97821

Sub-Broker's ARN No.

Registrar's Serial No.

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.

For Direct Application please write the word "DIRECT" in Distributor & Sub-Broker Box.

Existing investors of Taurus Mutual Fund wanting to make an SIP investment will need to fill up ONLY the SIP Application Form quoting their Folio/Account Number. However, new investors are required to fill up the Common Application Form as well as the SIP Application Form.

APPLICANTS INFORMATION (MANDATORY)

Folio No. (For existing Unitholder)		Common Appn. form No. (For new investor)	
Name of the First Applicant	Mr. Ms. M/s		
PAN**		Enclosed (please ✓) <input type="checkbox"/> PAN proof <input type="checkbox"/> Please attach KYC acknowledgement letter <input type="checkbox"/>	
(Applicable for Micro SIP) DOB	D D M M Y Y Y Y	Photo ID Document	Document No. (If Any)
Name of the Second Applicant	Mr. Ms. M/s		
PAN**		Enclosed (please ✓) <input type="checkbox"/> PAN proof <input type="checkbox"/> Please attach KYC acknowledgement letter <input type="checkbox"/>	
(Applicable for Micro SIP) DOB	D D M M Y Y Y Y	Photo ID Document	Document No. (If Any)
Name of the Third Applicant	Mr. Ms. M/s		
PAN**		Enclosed (please ✓) <input type="checkbox"/> PAN proof <input type="checkbox"/> Please attach KYC acknowledgement letter <input type="checkbox"/>	
(Applicable for Micro SIP) DOB	D D M M Y Y Y Y	Photo ID Document	Document No. (If Any)

**KYC is Mandatory if amount of purchase is Rs. 50,000 or more irrespective of mode of holding

SIP INVESTMENT DETAILS

Sr. No.	*Cheque / DD Favouring Scheme Name	Plan / Option	Amount invested (Rs.)	DD charges	Net Amount paid (Rs.)	Type of Account #
1.						
2.						
3.						
4.						

*All purchases are subject to realization of cheque/DD # (Type of Account : Saving / Current / NRE / NRO / FCNR / NRSR)

Amount (Rs.) In figures	Amount (Rs.) In words
Payment Mechanism SIP (Please ✓ any one only)	Auto Debit Facility (Please complete the SIP Auto Debit Facility Form) <input type="checkbox"/> Cheques (Please provide the details below) <input type="checkbox"/>
Total No. of Cheques	Cheque Nos. from To
Drawn on Bank	
Branch	A/C No.
Frequency (Please ✓)	Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> SIP Date (Please ✓) 1st <input type="checkbox"/> 5th <input type="checkbox"/> 10th <input type="checkbox"/> 15th <input type="checkbox"/> 28th of the month
No. of months/quarters	Total Amt. of SIP
Period of enrolment (MM/YY)	From M M Y Y Y Y To M M Y Y Y Y

DECLARATION AND SIGNATURE(S)

Having read and understood the contents of the Scheme Information Document & Statement Additional Information of the schemes and subsequent amendments thereto including the sections on 'Prevention of Money Laundering and Know Your Customer', I/We hereby apply to the Trustees of Taurus Mutual Fund for units of the scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the PMLA. I/We have not received and will not receive nor will be induced by any rebate or gifts, directly or indirectly, in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of 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. I/We further declare that the amount invested by me/us in the above scheme of Taurus Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time. It is expressly understood that I/we have the express authority from our constitutional documents to invest in the units of the above scheme and the AMC/Trustee/Fund would not be responsible if the investment is thereto and the investment is contrary to the relevant constitutional documents. I/We authorise this Fund to reject the application, revert the units credited, restrain me/us from making any further investment in any of the schemes of the Fund, and take any appropriate action against me/us in case the cheque(s)/payment instrument is/are returned unpaid by my/our bankers for any reason whatsoever. Applicable to NRIs only: I/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 approved banking channels or from funds in my /our* Non-Resident External / Ordinary Account / FCNR Account. Please ✓ ☐ Repatriation basis ☐ Non-Repatriation basis * Please strike out whichever is not applicable.

1st Applicant	2nd Applicant	3rd Applicant
Place		Date

ACKNOWLEDGEMENT SIP (To be filled in by the investor)

ARN-97821

TAURUS Mutual Fund

TAURUS MUTUAL FUND

305, Regent Chambers, 208, Jammalal Bajaj Marg, Nariman Point, Mumbai-40021

APPLICATION. No.

Name	SIP Application for purchase of units of
Address	

Acknowledgement is subject to realization of cheque/draft. All future communication in connection with the application should be addressed to the Registrar Karvy Computershare Private Limited: H No. 8-2-596, Avenue 4, Street No. - 1, Banjara Hills, Hyderabad-500034

Signature & Stamp