

This is to confirm that the declaration has been carefully read, understood & made by me/us

SIP Re				Internal C	ode for Sub-broker/				
Distributor Co		Sub-Distributor Code	ARN-		Employee	E	UIN No.		
ice by the empl he employee/re	rm that the EUIN box has been intentiona loyee/relationship manager/sales person elationship manager/sales person of the c	of the above distributor or notwith distributor and the distributor and the distributor has n	an execution-only transaction w istanding the advice of in-appropri iot charged any advisory fees on th	ateness, if any, provided its transaction.	First Holder	Second Holder	Third Holder		
NIT HOLD	ER INFORMATION								
xisting Fol	lio Number	1	Name of the First Ho	older					
YSTEMAT	IC INVESTMENT PLAN DETA	AILS							
lame of the	e Scheme				Plan	Opt	ion		
nitial SIP In	nstallment Amount Rs.		CI	neque No	Bank	« Name			
	onthly SIP Date (10, if no date is n	nentioned)	SIP Enroll	ment Period		SIP Installment Amount (Rs.)			
SIP Installments	Standard (any date of the month)	D D Standar	d From M M Y	Y Y Y To	M M Y Y Y	5,000	10,000 25,000		
Insta	Default (10th of every month)	Default	From M M Y	Y Y Y To	1 2 2 0 9 9	any other amount	1,50,500		
undertake to I nplete or inco hereby ackno epresenting, I red at your en	late of such redemption subject to applic keep sufficient funds in the funding acco rrect information, I/We would not hold the owledge and confirm that the informatic I/we shall be liable for it. I/We also under nd. I/We hereby authorise you to disclos	unt on the date of execution of star Mutual Fund or the bank responsi In provided above is/are true, cor take to keep you informed immed	nding instruction. I/We hereby dec ible. I/We further undertake that an rect and complete to the best of r diately in writing about any change	lare that the particulars ( y changes in my/our Ban ny/our knowledge and b es/modification to the ab	given above are correct and con k details will be informed to the belief. In case any of the above pove information in future and a	Mutual Fund immediately. specified information is foun also undertake to provide any	nd to be false or untrue or misleadi other additional information as m		
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## ECS Autosave Form for Systematic Investment Plan (SIP) with TOP-UP (Form 2B) Application No.

Distributor (	Code A	RN-		Sub-E	Distributor Code	ARN-			ode for Sub-broker/ Employee	EUIN No.				
I/We hereby con advice by the em by the employee/	ıfirm that the nployee/relat /relationship	EUIN b ionship manage	ox has been intent manager/sales per er/sales person of	tionally left blank rson of the above the distributor ar	k by me/us as this is an e distributor or notwithsi nd the distributor has no	"execution-only" transition and ing the advice of charged any advisor	ansaction witho f in-appropriater ory fees on this t	out any interaction or ness, if any, provided rransaction.	First Holder	Second Ho	older	Third Holder		
ECS Aut	tosave	Deb	it Mandate	e for SIP	with TOP-UP									
I/We hereby	, authoris	se IDF		ıd or their aı	onic Clearing Serv uthorised service 3.				mpany Limited to	o debit my/our bank a	ccount by EC	S (Debit Clearing) /		
UNIT HOL	DER INF	ORM	ATION			-								
Existing F	olio Num	nber				Name of the	e First Hold	er						
			ENT PLAN D	ETAILS										
	Name of the Scheme								Plan		Option			
M			(10, if no date	is mentioned)	SIP Enrollmen			Period		5,000	SIP Installment Amount (Rs.) 5,000 10,000 25,000			
SIP	(an	andard iy date fault	i of the month)	D D						5,000 50,000 any othe	1,00,00			
	(10	)th of e	very month)		Delault	Default From M M Y Y			T   Y   Y   To   1   2   2   0   9					
-UP	SIP Top-up (Optional)  Top-up Amount (Rs.)  (The Top-up amount should be Rs. 500 and multiples of Rs. 500 thereafter)													
SIP TOP-UP	,	efer J ( ease 🗸	vii) ′ to avail this fa	acility)	SIP Top-up Fre	SIP Top-up Frequency: Half-yearly Yearly (Default Top-up option is Yearly)								
B R	Registratio	n for th	nis facility is su	bject to the ir	l nvestor's bankers a	ccepting the mai	ndate for SIP	Top-up registration	on.					
BANK DET	TAILS (Ce	entralis	ed Bank Accou	ınt (CBS) Nur	mber is mandatory	for ECS and Dire	ect Debit. End	close a blank canc	elled cheque or cop	y thereof)				
Name of	the Acco	unt H	older											
Name of	the Bank								Branch					
Account	Number								City					
Account '	Туре		Current	Savir	ngs NF	RO	NRE	FCNR	Others	(ple	ease specify)			
MICR Co	de					(Please enter	the 9 digit	number that app	pears after the ch	eque number)				
Having read a issued till dat that the amou Laws, Anti M received nor II constitutive c In the event " applicable NA I/We undertal for reasons of I/We hereby a misleading or additional infinformation a governmenta The ARN holo before micro-inv Rs. 50,000/- i For NRIs / PIC Securities Ac Securiti	and undersi e, I/we here unit investee loney Laun have been i documents, Know Your AV prevailin ke to keep si fincomplete acknowled or misrepres formation a ass and whe all or statutoi der has disk mended to r vestments ( in a year. DS / FPIs on tt of 1933, c	tood the by appl d in the S dering L nduced / author Custom g on the ufficient e or inco ge and c enting, enting, n provic ry or jud closed t me / us. only: I/ ly: I / W or as def	e contents of the y contents of the y contents of the y cheme(s) is thraws, Anti Corrup by any rebate or isation(s). I/We file!" process is not date of such red funds in the fund rrectinformation, onfirm that the in I/we shall be liab be required at yo ded by me/ us to icial authorities / o me / us all the owner was all the confirm that I/we I/we I/we I/we I/we I/we I/we I/we	Statement of A of Systematic I ough legitimate ution Laws or ar gifts, directly o urther confirm to completed by emption subject emption subject of the completed by emption subject of the completed by the complete b	inditional Information Investment Plan (SIP) is sources only and dor ny other applicable law rindirectly in makingt that I am not /we are ny me / us to the satisfact to applicable exit loa the date of execution of thold the Mutual Fund of ided above is/are true so undertake to keep ereby authorise you tend, its Sponsor, Assel ax/revenue authorise in the form of trail com we any other existing i	(SAI) of IDFC Muttass indicated above so not involve and its not involve and its as applicable to its investment. I/W of prohibited from a stion of the Mutual d and undertake suit standing instruction the bank responsite correct and compour informed immedisclose, share, in Management Cores and other investing instructions and other investing instructions or any other investing instructions of the investing instruction of the investing instructions of the investing in the serson (s) of Indian in the serson (s) of Indian in the sign, as amended in the serson (s) of Indian in the serson	ual Fund, Schei a and agree to a sis not designed me/us from tir We am/are eligi accessing capi Fund, I / we he uch other actio on. I/We hereby ible. I/We furth ollete to the besi ediately in writ remit in any fo mpany, Truster gation agencie her mode), pay schemes of IDF Origin / Foreigr from time to tir	me Information Doci biblide by the terms, or if for the purpose of the ne to time. I / We cor bible Investor(s) as pe Ital markets under an reby authorise the M n with such funds tha declare that the partier or undertake that any to fmy/our knowledging about any chang rm, mode or manne es, their employees, s without any obligat yable to him for the d for Mutual Fund whice an Portfolio Investors I ne or residents of Ca	ument (SID) and Key In onditions, rules and reg he contravention of any firm that the funds inver the scheme related do y order/ruling/judgmer utual Fund, to redeem that may be required by the culars given above are changes in my/our Banly expended and belief. In case an es/modification to the r, all / any of the inform agents / service provion of advising me/us o lifferent competing Scheh together with this probut not United States penada, and that I / we ha	correct and complete. If the k details will be informed to the ny of the above specified info above information in future nation provided by me/us, iders, other SEBI registered	KIM) of the schemere (s) and the SI obtifications or Dir ally belong to me, or its of the control of the contro	me(s) and the Addenda IIP I/We hereby declare rections of the Taxation / us and I/we have not sinvestment as per the r of the applicant, at the expedical provides and I/we have not sinvestment as per the r of the applicant, at the expedical provide and III mediately. It to be false or untrue or like to provide any other larges, updates to such or any Indian or foreign st which the Scheme is investments exceeding		
SIGNATUF	RE/S AS	PER II	DFC MUTUAL	FUND (MA	ANDATORY)			SIGNATURE/S	AS PER BANK RE	CORDS (MANDATO	RY)			
Sole / 1st applicant/ Guardian Authorised Signatory									icant/ orised Signatory					
2nd applicant/ Authorised Signatory								2nd applicant/ Authorised Sign	natory					
3rd applicant/ Authorised Signatory								3rd applicant/ Authorised Signatory						
FOR OFFIC	CE USE C	ONLY (	Not to be fille	ed in by Inve	estor)									
Recorded	on							Scheme Co	ode					
Recorded	by							Credit Acco	ount Number					
Rank use	Mandate	Ref I	Nο					Customer F	Ref No					