

MUTUAL FUNDS

Aditya Birla Sun Life Mutual Fund



**ADITYA BIRLA
CAPITAL**

PROTECTING INVESTING FINANCING ADVISING

One Time Debit Mandate Form NACH / Auto Debit

[Applicable for Lumpsum Additional Purchases as well as SIP Registrations]

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM.)

Request for Registration Registration Cancellation Date DDMMYYYY

Existing Investor Folio No. Application No.

1. FIRST / SOLE APPLICANT INFORMATION (MANDATORY)

Mobile No. Email Id.

NAME OF FIRST / SOLE APPLICANT Mr. Ms. M/s.

NAME OF THE GUARDIAN (In case of minor) Mr. Ms. M/s.

RELATIONSHIP OF GUARDIAN

NAME OF THE SECOND APPLICANT Mr. Ms. M/s.

NAME OF THE THIRD APPLICANT Mr. Ms. M/s.

FIRST APPLICANT PAN* (Mandatory) SECOND APPLICANT PAN* (Mandatory) THIRD APPLICANT PAN* (Mandatory)

KYC Mandatory KYC Mandatory KYC Mandatory

GUARDIAN/ POA HOLDER PAN* (Mandatory) KYC Mandatory I have attached cancelled copy of cheque

I/We understand that this Facility enables the Unit Holder/s of Aditya Birla Sun Life Mutual Fund ('Fund') to transact with in a simple, convenient and paperless manner by submitting OTM - One Time Mandate registration form to the Fund which authorizes my/our bank to debit my/our account up to a certain specified limit per day, as and when we wish to transact with the Fund, without the need of submitting cheque or fund transfer letter with every transaction thereafter. I/We understand that having registered for this Facility it enables starting a Systematic Investment Plan (SIP) or invest lump sum amounts in any Open Ended Scheme of the Fund by sending instructions through Transaction forms, Online facility, Short Messaging Service ('SMS') or any other mode as specified by AMC from time to time. I/We confirm that details provided by me/us are true and correct. I/We have read and understood the Scheme Information Document / Statement of Additional Information and Key Information Memorandum, Addendum issued from time to time of the Scheme(s) of Aditya Birla Sun Life Mutual Fund.

Signature(s) Name of First Unit Holder First Applicant

Name of Second Unit Holder Second Applicant

Name of Third Unit Holder Third Applicant

(To be signed by All Applicants if mode of operation is Joint)

DEBIT MANDATE-ONE TIME MANDATE / NACH / AUTO DEBIT [Applicable for Lumpsum Additional Purchases as well as SIP Registrations] Please attach a cancelled cheque/cheque copy.

UMRN DDMMYYYY

(tick✓) CREATE MODIFY CANCEL

Sponsor Bank Code Office use only Utility Code Office use only

I/We hereby authorize: **ADITYA BIRLA SUN LIFE MUTUAL FUND** to debit (tick✓) SB / CA / CC / SB-NRE / SB-NRO / Other

Bank A/c No. Bank Name & Branch IFSC OR MICR

an amount of Rupees ₹

FREQUENCY Monthly Quarterly Half Yearly Yearly As & when presented DEBIT TYPE Fixed Amount Maximum Amount

Reference 1 Folio No: Mobile

Reference 2 Appln No: Email:

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of bank.

PERIOD From to or Until Cancelled

1. Sign 2. Sign 3. Sign

Name as in bank records (mandatory) Name as in bank records (mandatory) Name as in bank records (mandatory)

Declaration: This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing Aditya Birla Sun Life Mutual Fund to debit my account based on the instructions as agreed and signed by me. I have understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to Aditya Birla Sun Life Mutual Fund or the bank where I have authorised the debit.

Acknowledgement Slip (To be filled in by the Investor)

ONE TIME DEBIT MANDATE FORM NACH / AUTO DEBIT

Application / Folio No. Request for Registration Cancellation

Received from Mr. / Ms. Date : / / Collection Centre / ABSLAMC Stamp & Signature

