



Application form for registration of :
Systematic Investment Plan (SIP), Systematic Transfer Plan (STP) and
Systematic Withdrawal Plan (SWP)

Table with 6 columns: Distributor ARN, Sub Distributor ARN, Internal sub Code/Sol ID, Employee Code, EUIN, Serial No./Date, Time & Stamp

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.

* I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Table for Signatures: Signatures, First/Sole Applicant/Guardian, Second Applicant, Third Applicant

1. Investor and Investment details. Please check wherever applicable.

Sole/First Investor Name (as appearing in ID proof)

PAN No. Folio No. (For Existing Investor)

Scheme Name: Plan: Regular Direct Option: Growth Dividend

Sub-option/Frequency of Dividend:

Mode of dividend: Payout Re-investment Sweep

Switch: To Scheme Plan Option

2. Systematic Investment Plan (SIP). Refer point no. I of Terms & Conditions for SIP/STP/SWP

Each SIP Amount (Rs.) Frequency: Daily Monthly Quarterly

SIP Frequency Date: 1st 5th 10th 15th 20th 25th of the month

From To or No. of installments or perpetual.

The minimum investment per day is Rs. 500/- for a minimum of 30 installments continuously for all business days

3. Systematic Transfer Plan (STP). Refer point no. II of Terms & Conditions for SIP/STP/SWP

Switch: To Scheme Plan Option

Dividend Sweep: To Scheme Plan Option

Each STP Amount (Rs.) Frequency: Daily Weekly Monthly Quarterly

Date: 1st 5th 10th 15th 20th 25th of the month/quarter

Enrolment Start End or No. of installments

#Only offered under ILIQF, IUSTF & ISTBF

4. Systematic Withdrawal Plan (SWP). Refer point no. III of Terms & Conditions for SIP/STP/SWP

Each SWP Amount (Rs.)

Enrolment Start End or No. of installments

5. Declaration

I/We hereby, declare that the particulars given above are correct and express my willingness to make payments referred above through participation in National Automated Clearing House (NACH)/Auto Debit.

This is to inform that I/We have registered for Auto Debit Facility and that my payment towards my investment in IDBI Mutual Fund shall be made from my/our bank account registered with IDBI Mutual Fund.

First Unit Holder's Signature Second Unit Holder's Signature Third Unit Holder's Signature



tick (v) CREATE MODIFY CANCEL

UMRN Date Sponsor Bank Code Utility Code

I/We hereby authorize IDBI Mutual Fund to debit (tick) SB/CA/EE/SB-NRE/SB-NRO/Other

Bank A/c Number

With Bank Name of customers bank IFSC or MICR

an amount of Rupees

FREQUENCY Mthly Qly H-Yrly Yrly As & When presented DEBIT TYPE Fixed Amount Maximum Amount

Reference-1 FOLIO NO. Mobile

Reference-2 E-Mail ID

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 the bank.

PERIOD From To Or Signature of the account holder Name of the account holder

This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account, based on the instructions as agreed and signed by me.