COMMON APPLICATION CUM AUTO DEBIT/NACH MANDATE FORM

Investors must read the Key Information Memorandum, the instructions and Product Labeling on cover page before completing this Form.

The application form should be completed in English and in **BLOCK LETTERS** only.



	nformation (Investo	rs applying unde	er Direct Plan must menti	on "Direct" in ARN column)			FOR OFFICE USE ONLY
ARN/RIA Code	ARN/RIA	Name	Sub Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Unique Identification Number (EUIN)	(TIME STAMP)
FUND Declaration (anh. where	FILIN have in left his	-mlr)					
	EUIN box has been roker or notwithsta	intentionally lef anding the advic	t blank by me/us as this e of in-appropriateness,	transaction is executed w if any, provided by the en	ithout any interaction ployee/relationship	n or advice by the employe manger/sales person of the	e/relationship manager/sales person e distributor/sub broker.
First / Sole						_	
	Applicant / Guard			Second Applicant		Th	ird Applicant
RANSACTION CHARGES n case the purchase/subscri ubscription amount and pay egistered Distributor) based	ption amount is Rable to the Distrib	Rs. 10,000 or mo utor. Units will b	ore and your Distributo be issued against the ba	r has opted in to receive lance amount invested. L	Transaction Charge Ipfront commission the ARN Holder.	es, the same are deductib shall be paid directly by the	le as applicable from the purchase/ ne investor to the ARN Holder (AMFI
EXISTING UNIT HOLDE	R INFORMATIO	N (IF YOU HAVE	E EXISTING FOLIO, PLE			<u> </u>	
Folio No.				I ne details in ou	ır records under the	tollo number mentioned al	ongside will apply for this application.
MODE OF HOLDING (PI	ease tick (✓)	Single	Joint	Anyone or Survivor			
UNIT HOLDER INFORM		C.N.C. (1		DATE OF BIRTH@			of of date of birth@ Please (🗸) Attached
Mr. Ms. M/s. Nationality	PPLICANT (In case	e of Minor, there	e snall be no joint holds	PAN#/PEKRN#	DD MM	YYYY	
KYC/CKIN No.			[Please tick	(✓)] (Mandatory) Prod			
Status of First / Sole Ap	plicant [Please	tick (✔)] 🗌 In				nership (UBO) Self Certification	Form]) (Mandatory)
Resident Individual	NRI-Repatriation [NRI-Non Re	patriation Partnershi	p Trust HUF	AOP PIO	Company FIIS Min	
				dia FPI Sole Pro	· · —		Others(please specify)
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Nationality			Designation		C	ontact No.	
PAN# / PEKRN			KYC/CKIN N	0.		[Please tick	(🗸)] (Mandatory) 🔲 Proof Attache
Relationship with Minor@ P	. ,		Court appointed Legal	Guardian	Proof of relationship w	vith minor@Please (✔) ☐ A	ttached @ Mandatory
MAILING ADDRESS OF FIF	RST / SOLE APPLI	CANT (Mandato	ory) 				
CITY			STA	TE		PIN	CODE
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6. ADDITIONAL KYC DETAILS, If	any Contd.								
Gross Annual Income Range (in Rs.)	1 st Applicant	2 nd Applicant	3 rd Applicant	Guardian	Gross Annual Income Range (in Rs.)	1 st Applicant	2 nd Applicant	3 rd Applicant	Guardian
Below 1 lac					10-25 lac				
1-5 lac					25 lac - 1 cr				
5-10 lac OR Networth in Rs. (Mandatory					> 1 cr	as on 1			
for Non Individual) (not older than 1	year)					43 011	DD MM	YYYY	
7. FATCA & CRS INFORMATION (al including Sol	le Proprietor)	Self Certifi	cation)		DD IMIM	1111	
The below information is requing Address Type: Residential Is the applicant(s)/ guardian's If Yes, please provide the following	ired for all a I or Busines Country of E ng informatio /hich you are	pplicant(s) / gua s Residentia Birth / Citizensh n [mandatory]	ardian I	☐ Registon Resi	ered Office (for address mentio	Yes] No	s appearing in	Folio)
[TIN or other, please specify]									
Country of Tax Residency 3									
Tax Payer Ref. ID No. 3									
Identification Type [TIN or other, please specify]									
	individual is	a citizen / green	card holder of	USA. ^ In	case Tax Identification Number is	not available,	kindly provide i	ts functional ed	uivalent.
8. POWER OF ATTORNEY (PoA)									
Name of PoA Mr. Ms. M/s. PAN#/PEKRN#			KYC/CKIN	l No.		[F	Please tick (✓)] (N	Mandatory) 🔲 i	Proof Attached
# Please attach Proof.	THE EIDST	/ SOLE ADDLIC	ANT /Familiary		and the lateral March 17 has been a fitted from	V1		()	
BANK ACCOUNT DETAILS OF For unit holders opting to hold units in a						t/sole applicant m	ust be pre-printed o	n the cheque.)	
Bank Name	domat ionii, pic	base crisare trial tr	le bank account i	TINGO WIGH GIG	demar account is mentioned here.				
Branch Name					Bank City				
Account Number									
MICR Code			(Th	e 9 digit code	appears on your cheque next to the c	heque number)			
Account Type (Please ✓) ☐ Sa	avings	Current	NRO 🗌 NR	E FC	NR Others (please specify)			_	
IFSC Code***				*** M	andatory for Credit via NEFT / RTGS (11 Character co	de appearing on y	our cheque leaf.	
I/We want to receive the redemption /	dividend procee	eds (if any) by way of	a demand draft in		ı do not find this on your cheque leaf, p credit / credit through NEFT system / credi				
10. PAYMENT DETAILS	<u> </u>						•		
Payment Mode: Please (✓	′) 🗌 CI	heque 🔲 D	D 🗌 RTGS	☐ NEF	T				
Cheque/DD/RTGS/NEFT/FT N	No.				Cheque / DI	D / RTGS / NE	EFT Date D	D M M Y	YYY
Amount in ₹ (Figures)			Amount	in ₹ (words	3)				
11. INVESTMENTS & SIP DETAILS									
LUMPSUM SIP (SIP through Post Dated Cheques SIP through Auto Debit) Scheme Name: PLAN: Direct Plan Existing/Regular Plan OPTIONS: Growth Dividend (Payout Reinvestment Sweep) (Frequency:) SIP Frequency Monthly Quarterly SIP Date of your choice: (Except 29, 30, 31) (Default 15+) Cheque Nos. From									
Enrolment Period From M M Default Frequency/Date Start of the er If SIP amount does not debit on the ment				to debit my/o					
12. STP DETAILS Name of 'Source' Scheme/Plan/	Ontion								
Name of 'Target' Scheme/Plan/C									
For Systematic Transfer Plan (S (Please (🗸) any one)	TP) Am	ount of Transfe	r per Installme	nt: Rs.					
(Refer Instruction No. II)		Daily						No. of Insta	
		Weekly						No. of Insta	
					(Please (✓) any one)] 2	8 15	23	No. of Insta	allment:
In case of multiple registrations,	please fill up	p separate Enro	olment Forms.	+ Default	Frequency/Date/Day				
13. SWP DETAILS									
Scheme Option (✓) Growth Withdrawal Amount ₹	Dividend	d Frequency X No. of Ir		onthly	Quarterly Withdrawal Dat Withdrawal From D D M	MYY	n	15th	23rd
(First Installment) (Last Installment)									
0.1		01		Particu	ilars				
Scheme Name / Plan / Option / Sub- Payout Option	-option /	Cheque / DD / UTF	Payment Instru R No. / Date	ument /	Drawn on (Name of Bank and	l Branch)	Amou	nt in figures (Rs	s.)

14. L	JNIT H	OLDING OPTION DEMA	T MODE*	PHYSICAL MOD	E (Default)													
*0	Demat A	ccount details are mandatory if the inve	stor wishes to hold the	units in Demat Mode														
	NSDL	DP Name		DP	ID I N						eficiary ount No.							
	CDSL	DP Name			Beneficiary Account No.										T			$\overline{1}$
 *Ir	nvestor	I opting to hold units in demat form, may	provide a copy of the [t details	s as sta	ited in	n the a	pplication	n form.							
15. N	NOMIN	ATION (Mandatory for new folios	of Individuals wh	ere mode of holdi	ng is single) (For	Units	in No	n-De	mat	Form)								
	[Please	(✓) and sign] I/We do not wish	to Nominate															
		_																
		First / Sole Applicant / G	uardian		Second Applicar	nt				_		Third	d Applic	ant				
	I/We	e wish to nominate as under:		(OR													
	Name	e and Address of Nominee(s)	Relationship with	Date of Birth	Name and Addr	ess of (Guardia	an			ature of No onal)/Guar				units v	on (%) vill be	share	
	rvame	and Address of Nonlinec(s)	Applicant	(to be furnish	ed in case the Nomir	nee is a	minor)				inee (Man			each Nominee (should aggregate to 100				
		Nominee 1																
		Nominee 2																
		Nominee 3																
16. C	DECLA	RATION & SIGNATURE/S																
		n/are not prohibited from accessing cap eign laws. I/We hereby confirm and decl		order/rulling/judgment	t etc., of any regulation	n, inclu	iding SI	EBI. I	/We c	onfirm tha	at my appli	ication	is in cor	nplian	nce wit	h appl	icable	Indian
	(3) The Cond (4) Than (5) I/We (7) Fun forer (6) I/We (7) The variet (7) I/We will debit to requests date of the variet transact liable for a mandate commiss to me/ust	eme(s) is through legitimate sources only information given in/with this application pany Limited (AMC)/Fund and undertate in the event, the above information and the hereby authorize you to disclose, shad, its Sponsor/s, Trustees, Asset Manaign statutory, regulatory, judicial, quasign will indemnify the Fund, AMC, Trustee ARN holder (AMFI registered Distributo bus Mutual Funds from amongst which the HEREBY CONFIRM THAT I/WE HAN THIS INVESTMENT. She to inform you that I/we have register mylour above mentioned bank accounts received through to debit mylour accessecution of standing instruction. I here it inon, I would not hold Indiabulls Mutual ition, will happen next working day and it, nor be in default by reason of, any find the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and or severally indemniful the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and or severally indemniful the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and or severally indemniful the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and or severally indemniful the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and or severally indemniful the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and or severally indemniful the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and the more severally indemniful the properties of the above mentioned Banks reasonablinder this mandate, on any ground what k and, jointly and the more severally indemniful the properties of the above mentioned bank and indemniful the more severally indemniful the more severally indemniful the more severally indemniful the more severally indemniful t	on form is true and cooke to inform the AMC/If d/or any part of it is /ar re, remit in any form/m gement Company, its udicial authorities/ager, RTA and other interm r) has disclosed to me/ne Scheme is being recorder to the search of the amount reby declare that the paraunt with the amount reby declare that the paraunt of units will hallotment of units will hallotment of units will hallotment of units will be accorded by the control and which has to ever. I/We shall not beneficiaries and acknown any other mode), paraundia only:	rect and further agre- rund/Registrars and T e found to be false / u anner/mode the abov employees, agents a ncies including but not ediaries in case of an us all the commissions ommended to me/us. ED/COMMUNICATEI ual Fund through their hereby approve to ra quested, for due remi culars given above a date of debit to my/o appen as per the Ter letion of this service, change of Governmer s the effect of preven have any claim again against all claims, ac signatories/ beneficiar owledged at your cot yable to him for the d	e to furnish such oth ransfer Agent (RTA) intrue/ misleading, I/V re information and/or nd third party service t limited to Financial I y dispute regarding the first of the form of trail of the first	er furthin writinin within writinin writinin within writinin we will be a provide a provide a provide above provide above the work of the	er/addi g abour g abour la g abour la lable from the from	tional t any t tany t t	inforn chan, the coining the c	mation as ge in the insequence of change ed interm J-IND) etc. attive for it with you are mentioned bulls le or in postem, for emention and pursuages and indimay but he with Funds from the insequence of the change	may be r nformation ees arising s/updates leed aries for without a on of my/orable to hir ATIVE YIE my/our pay in branch. Let to keep not effected iabulls Mr. Mutual Fuart, by an ce majeur eed Bank. Int to the r expenses e revoked drawal. Thom among	equired furnish therefir that me that m or sing ny intiruur tran n/them siLD BY ment hill be h	If by the hed from own. If by the hed from own. If by by be price upda mation/a sactions for the or or the form of the form of the hed of the hed of the hed of the hed or	India an time ovide time ovide time ovide time ovide time ovide time time time time time time time tim	bulls A to tim d by n submit to me nt com menticize you e func k holid httionec k holid httionec k ne cau e or cau e or cau e or cau e is be e is be	Asset I Parallel Para	o the any I Sche STRIE eneficie enour a countrie or in cution shall motor election of the shall are the shall are the shall are the shall energy energy expensive expe	Mutual ndia or mes of sutton mes or debit, ll keep of their ing the all the lended
		r NRIs / PIO/OCIs only:																
		nfirm that my application is in complian		•														
	Please	(✓) Yes No If Yes, (•	Repatriation ba	asis Non-repatria	tion basis													
			(Please write Applic	ation Form No. / Folio	SIGN HER		heque /	Dem	nand [)raft / Pay	ment Insti	rument	.)					
	SIGN	ATURE(S)																
		First / Sole Applicant / Guardian / PC	A Holder		Second Applican	t							Thir	d App	licant			
		E USE ONLY Not to be filled I	y the Investor															
	rded o				Schem		<u> </u>											
	Recorded by Bank use Mandate Ref. No.				Credit A/c No. Customer Ref. No													

CHECKLIST

- Please ensure that your Application Form is complete in all respect and signed by all applicants:
 - Name, Address and Contact Details are mentioned in Full. Status of First/Sole Applicant is correctly indicated. Bank Account Details are entered completely and correctly.
 - Permanent Account Number (PAN) of all Applicants is mentioned irrespective of the amount of purchase and proof attached (if not already validated) OR PAN Exempt KYC Reference Number (PEKRN) in case of PAN exempt investment and Aadhar copy of all holders.
 - Please attach proof of KYC Compliance status if not already validated.
 Appropriate Plan / Option is selected.
 - If units are applied by more than one applicant, Mode of operation of account is indicated.
- with a rour investment Cheque/DD is drawn in favour of 'the Specific Scheme' dated, signed and crossed 'A/c Payee only'. Application Number / Folio No. is mentioned on the reverse of the Cheque/DD.
- Documents as listed below are submitted along with the Application Form (as applicable to your specific case).

	Documents	Individual	Companies / Trusts / Societies / Partnership Firms / LLP / Flls*	FPI	NRI/ OCI/ PIO	Minor	Investments through Constituted Attorney
1.	Board/Committee Resolution/Authority Letter		1				
2.	List of Authorised Signatories with Specimen Signature(s) @		1	✓			1
3.	Notarised Power of Attorney						1
4.	Account Debit Certificate in case payment is made by DD from NRE / FCNRA/c. where applicable				1		
5.	PAN Proof	1	/	/	1	✓*	/
6.	KYC Acknowledgement Letter / Print out of KYC Compliance Status	/	/	/	1	√ *	1
7.	Proof of Date of Birth					1	
8.	Proof of Relationship with Guardian					1	
9.	PIO / OCI Card (as applicable)				1		
10.	Certificate of registration granted by Designed Depository Participant on behalf of SEBI			1			
11.	Ultimate Beneficial Owner		1	1			1
12.	FATCA & CRS	1	✓	1	1	1	1

[@] Should be original or true copy certified by the Director / Trustee / Company Secretary / Authorised Signatory / Notary Public, as applicable.

}

ONE TIME BANK MANDATE

(NACH/Direct Debt Mandate Form) (Applicable for Lumpsum Additional Purchases as well as SIP Registration)

Tlck (✓) UMRN	For Office Use Only		Date D D M M Y Y
CREATE MODIFY		For Office Use Only	Utility Code	For Office Use Only
CANCEL	I/We, hereby authorize In	diabulls Mutual Fund	To debit (tick	SB CA CC SB-NRE SB-NRO Other
Bank A/c	Number	Destination E	Bank Account Number	
With Ban	k Destination Bank Na	ame IFSC		or MICR
An amou	nt of Rupees			₹
FREQUE	NCY X Mthly X Q	t ly X H-Yrly X Yrly ✓ As & w	hen presented D	EBIT TYPE X Fixed Amount ✓ Maximum Amoun
Uniq ID			Phone No.	
Referenc	e 2		Email ID	
I agree for	the debit of mandate processing charge	es by the bank whom I am authorizing to debit n	ny accounts as per latest schedule o	changes of the bank.
PERIOD_		_1		
From	D D M M Y Y Y	Signature Primary Account holder	Signature Primary Acco	unt holder Signature Primary Account holder
To [3 1 1 2 2 0 9 9] -		
Or [Until cancelled	1. Name as in bank records	2. Name as in bank record	Name as in bank records

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 instruction as agreed and signed. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorized the debit.

^{*} For FIIs, copy of SEBI registration certificate should be provided. # If PAN/PEKRN/KYC proof of Minor is not available, PAN/PEKRN/KYC proof of Guardian should be provided.

OTM INSTRUCTIONS: TERMS & CONDITIONS

- Investors who have already submitted an OTM form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account. However, such investors if wish to add a new bank account towards OTM facility may fill the form.
- Other investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned.
- Registration process for OTM forms submitted during the NFO period will commence after the closure and allotment of NFO applications.
- Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form the ones as already existing in the folio, the details provided on the mandate will be updated in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
- Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to third party verification.
- Investors are deemed to have read and understood the terms and conditions of OTM Facility, SIP registration through OTM facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of Indiabulls Mutual Fund.
- If end date/frequency is not mentioned in the OTM Form, the same will be considered as per the SIP Registration Form and vice versa.

MANDATORY FIELDS: Date: Date is mandatory • CREATE/MODIFY/CANCEL: tick is mandatory for create/modify & cancel if not ticked mandate will be rejected • To Debit (tick): account type is mandatory • Bank A/c Number: Investor debit bank a/c number mandatory • With Bank: Investor bank name is mandatory • IFSC / MICR: Correct IFSC code or MICR code is mandatory • An amount of Rupees: SIP fixed instalment amount in words in word column is mandatory • Rs.: SIP fixed instalment amount in figures in figure column is mandatory • Rs.: SIP fixed instalment amount in figures in figure column is mandatory • SIP monthly/ quarterly mandatory, Lump sum: as & when presented is mandatory • Debit Type: For SIP fixed Amount & for Lump sum Maximum Amount is mandatory • Folio No.: For Existing Investor only • Phone No./ Email ID: Phone No. or Email ID is Mandatory • Pariod: SIP start date is Mandatory, Lump sum: indicate till what date the man date should be valid • Signature of Account Holder: Signature is mandatory



DECLARATION

*I/We hereby declare that the particulars given on this mandate are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/Wewould not hold Indiabulls Mutual Fund, their representatives, service providers, participating banks & other user institutions responsible. I/We have read the Terms & Conditions and agree to discharge the responsibility expected of me/us as a participant/s under the scheme. I/We authorize use of above mentioned contact details for the purpose of this specific mandate instruction processing. I/We hereby confirm adherence to terms on this mandate.

AUTHORISATION TO BANK

I/We wish to inform you that I/we have registered with Indiabulls Mutual Fund for ECS / NACH / Direct Debit through their authorised Service Provider(s) and representative for my/our payment to the above mentioned beneficiary by debit to my/our above mentioned bank account. For this purpose I/We hereby approve to raise a debit to my/our above mentioned account with your branch. I/We hereby authorize you to honor all such requests received through to debit my/our account with the amount requested, for due remittance of the proceeds to the beneficiary.

FOR OFFICE USE ONLY (Not to be filled by Investor)							
Affix Barcode	Date & Time Stamp No.						

INVESTOR REGISTRATION CUM AUTO DEBIT NACH MANDATE FORM INSTRUCTIONS cum TERMS AND CONDITIONS

SIP payment through Auto Debit via Direct Debit and Electronic Clearing Service (NACH Clearing) of the Reserve Bank of India (RBI)

LIST OF CITIES FOR SIP FACILITY VIA NACH (DEBIT CLEARING) (87 CENTERS)

Delhi, Ludhiana, Amritsar, Jalandhar, Chandigarh, Shimla, Jammu, Kanpur, Allahabad, Varanasi, Lucknow, Dehradun, Gorakhpur, Agra, Jaipur, Bhilwara, UdaiPur, Jodhpur, Rajkot, Jamnagar, Ahmedabad, Baroda, Surat, Mumbai, Goa, Pune, Sholapur, Kolhapur, Nasik, Aurangabad, Nagpur, Indore, Bhopal, Gwalior, Jabalpur, Raipur, Hyderabad, Tirupati, Vijaywada, Nellore, Vizag, Kakinada, Bangalore, Mysore, Mangalore, Udipi, Hubli, Gadag, Bijapur, Belgaum, Davangere, Shimoga, Tumkur, Mandya, Hasan, Gulbarga, Raichur, Chennai, Pondicherry, Trichy, Madurai, Salem, Erode, Tiruppur, Tirunelveli, Coimbatore, Calicut, Trichur, Cochin, Trivandrum, Kolkata, Bardhaman, Durgapur, Siliguri, Bhubaneshwar, Guwahati, Patna, Dhanbad, Jamshedpur, Ranchi, Haldia, Asansol, Cuttack, Bikaner, Gangtok, Anand, Bhavnagar, Kota, Imphal, Shillong

I. GENERAL INSTRUCTIONS

- 1. Please refer the Scheme Information Document, Statement of Additional Information and Key Information Memorandum, Addenda issued from time to time and our website www.indiabullsamc.com for instructions, terms and conditions, Applicable NAV, Risk Factors, load and other information, various requirements of the respective Scheme / Plan before investing. It is deemed that the investor has agreed to all the terms and conditions as prevailing on the date of the application and investment.
- In case of valid applications received for Dividend Option without indicating any choice of facility i.e. payout or reinvestment facility, the reinvestment facility with Dividend Option will be considered.
- 3. This facility is only offered to those investors having bank accounts in select cities as mentioned above. The list of cities, may be modified/updated/changed/removed at any time in future at the discretion of AMC without assigning any reasons or prior notice. If the SIP auto debit facility is discontinued in a city for any reason, SIP instructions for investors in such city via NACH (Debit) route/Direct debit/SI may be discontinued without prior notice.
- 4. PAN is mandatory for all investors. However, investments through Micro SIPs, i.e. where aggregate of installments per year per investor does not exceed Rs. 50,000, will be exempt from the requirement of PAN. Such investors must submit a valid and self attested standard photo identification and address proof documents in lieu of PAN. List of acceptable documents are available with the ISCs of the AMC/Registrar. If the identification document is not in order, or registration of SIP results in aggregate of the SIP investments exceeding Rs. 50,000 per investor per year, the SIP will be rejected.
- If SIP application form and cheque is submitted with bank details of a city where the Mutual Fund does not provide auto debit facility, first SIP cheque may get processed. However, future debits may not happen and SIP instruction may get rejected.
- In case of rejection of SIP form for any reason whatsoever, the Mutual Fund will not
 entertain any request for refund of proceeds of first cheque which is already
 processed. Investors will have to redeem the units allotted through first cheque at
 applicable NAV.
- To avail of SIP in separate schemes/plans via debit facility, an investor will have to fill a separate form for each scheme/plan. A single form cannot be used for different schemes simultaneously and may be rejected.
- 8. Complete application form and SIP Auto debit form along with the first cheque (drawn on the same bank account which is to be registered for NACH Debit/Direct Debit / Standing Instruction) should be submitted to the Mutual Fund or the Registrar. AMC reserves the right to reject any application without assigning any reason thereof. Incorrect, incomplete or ambiguous forms will not be accepted and will be returned to the investor within 20 days via normal post.
- The bank account provided for NACH should participate in local MICR clearing. Incase MICR code is not provided or incorrect code is mentioned on the application form, the application for SIP will be liable to be rejected.
- 10. SIP Installments through Direct Debit/NACH can be any date of investor's choice except 29, 30 and 31 and there should be minimum gap of at least 30 Days between the 1st SIP and the 2nd SIP or as specified by IBMF from time to time.
- 11. If the date on the cheque / draft / NACH / Auto Debit Transactions is a non Business Day for the scheme ,then the units shall be allotted on the next Business Day
- 12. In case the first cheque is issued from a different bank account or is a demand draft or in case of renewal of SIP debit, then investors should attach a cancelled cheque or a copy of the cheque pertaining to bank account which is to be registered for NACH Debit/direct debit / standing instruction. Alternatively, investors can also get the bank account mentioned on the form along with Bankers certificate form.
- Minimum SIP installment amount: Monthly: Rs. 500/- and in multiples of Re.1/thereafter; Monthly: Rs. 1000/- and in multiples of Re.1/- thereafter (for Indiabulls Arbitrage Fund).
 - Quarterly: Rs. 1500/- and in multiples of Re.1/- thereafter; Quarterly: Rs. 3000/- and in multiples of Re.1/- thereafter (for Indiabulls Arbitrage Fund). Minimum No. of SIP installments: monthly 12 installments, quarterly 4 installments [including the first SIP cheque]. Investors may also choose to invest in SIP without the first SIP installment cheque. SIP Dates: any date of investor's choice except 29, 30 and 31 of each month/quarter as applicable. Registration period: There must be at least 30 days between the first SIP cheque and subsequent due date of NACH [debit clearing];
- 14. If SIP date is not specified or not legible, SIP will be registered to start from a period after 30 days on the SIP date As default date. In case of the auto debit facility, the default options (where SIP frequency and SIP date are not indicated) will be as follows:
 - SIP date: 15th of the month (commencing 30 days after the first SIP installment date); and
 - SIP frequency: Monthly.
- 15. The investor agrees to abide by the terms and conditions of NACH facility of the Reserve Bank of India (RBI) as applicable at the time of investment and as may be modified from time to time at a later stage.
- 16. The investor undertakes to keep sufficient funds in the funding account till the date of execution of standing instruction / Direct debit / Auto Debit. The investor hereby declares that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information or due to any reason by the investor's banker, the investor would not

- hold the Mutual Fund or the Bank responsible. If the date of debit to the investor's account happens to be a non Business Day as per the Mutual Fund, execution of the NACH Debit / Direct Debit / SI may happen on non business and allotment of Units will happen as per the terms and conditions listed in the SID, SAI, KIM and all relevant Addenda of the scheme concerned.
- 17. The Mutual Fund, its Registrars, Direct Debit Banks and other service providers shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligation under this agreement, where such failure or delay.

II. SYSTEMATIC TRANSFER PLAN (STP)

- Please specify the scheme details, your transfer installment amount, the number of installments, the total amount sought to be transferred, the transfer frequency and the transfer period.
- Minimum Transfer Size is Rs. 500/- and in multiples of Re. 1 (At the time of registration, the minimum invested amount in the source scheme should be Rs. 6000/-). The minimum period will be 4 weeks in case of Daily / Weekly / Monthly / Quarterly option.
- 3. The investors can choose any one of the dates among 2nd, 8th, 15th of 23rd of every month as the STP date in case of Monthly option (if any of these days fall on a non-business day, the transaction will be effected on the next business day of the Scheme),STP for Weekly option will be processed on every Friday. Daily STP will not be processed on Saturday, Sunday & Public Holidays. The default STP date will be 15th of every month. The default STP frequency will be monthly.
- 4. Please note that your STP request would be registered with us within 8 business days from the date of lodgement of your STP Request. You can cancel the STP request at any time by giving a written request for the same. The cancellation of a registered STP request would take 8 business days.
- The STP will be automatically terminated if all units are liquidated or withdrawn from the source scheme or pledged of upon receipt of intimation of death of the unit holder. The units marked under lien or pledged in the source scheme shall not be eligible for STP.
- Under Daily/Weekly/Monthly/Quarterly STP, unit holders will be eligible to transfer a fixed amount (minimum Rs. 500 and in multiples of Re. 1 thereafter per installment in all the schemes).
- In case Day of Transfer has not been indicated under Weekly frequency, Friday shall be treated as Default day of transfer.
- In case, the Enrolment Period has been filled, but the STP Date and/or Frequency (Daily/Weekly/Monthly/Quarterly) has not been indicated, Monthly frequency shall be treated as Default frequency and 15th shall be treated as Default Date within 12 default installments.

III. SYSTEMATIC WITHDRAWAL PLAN (SWP)

- Please indicate a fixed amount you wish to withdraw. Please also specify the scheme details, the number of installments, the total withdrawal sought, the withdrawal frequency and the withdrawal period.
- 2. Minimum Withdrawal Size Rs. 500 in multiples of Re. 1.
- Please note that your SWP request would be registered with us within 8 business days from the date of lodgement of your SWP request. You can cancel the SWP request at any time by giving a written request for the same. The cancellation of a registered SWP request would take 8 business days.
- 4. The investors can choose any one of the dates among 2nd, 8th, 15th or 23rd of every month as the SWP date (in case any of these days fall on a non-nusiness day, the transaction will be effected on the next business day of the Scheme). The default SWP date and frequency will be 8th of every month and monthly option.

IV. DOCUMENTS REQUIRED

New Investors are required to submit the following documents:

- $a. \quad SIP \, Enrolment \, along \, with \, Registration \, cum \, Auto \, Debit/NACH \, Mandate \, Form. \, And \, Compare \, along \, with \, Compare \, along$
- b. The Intial investment amount cheque should be issued from the same bank account which is to be debited under NACH/Auto Debit for SIP instalments
- c. A photo copy/cancelled cheque from NACH Debit Account (as mentioned on the application form should be submitted along with other requirements.
- d. In case of payment made through an instrument issued from a bank account other than that of the first named applicant / investor mentioned in the application form, Investors are required to additionally fill up & submit the 'Third Party Payment Declaration Form' (available at any of our ISC's or on our website www.indiabullsamc.com) along with the SIP Registration cum Auto Debit/NACH Mandate Form.

Existing Investors are required to submit SIP Registration cum Auto Debit/NACH Mandate Form.

V. CHANGE OF BANK

In order to change the existing bank account for NACH/SIP Auto Debit investors need to submit an Autodebit form selecting a 'change of bank option' in the form for the existing SIP, 30 days before the next SIP debit.

VI. DISCONTINUE/CANCELLATION OF SIP

The investor has the right to discontinue SIP at any time he/she so desires by sending a written request 30 days in advance of the immediate next due date to any of the offices of Indiabulls Mutual Fund or its Authorized Collection Centres. On receipt of such request SIP will be terminated. Further, Indiabulls Mutual Fund shall have the right to discontinue the SIP in case of 3 consecutive failures.

VII.PAN and KYC

PAN & KYC is mandatory irrespective of amount of investment, except in case of Micro SIP (Refer instruction no. I (4)).