## SIP Registration Mandate - AUTO DEBIT/ NACH FACILITY/ MICRO SIP/ SIP TOP UP



PLEASE FILL ALL FIELDS WITH BLACK BALL POINT. IN BLOCK LETTERS AND COMPLETE ALL FIELDS

	TION				FOR OFFIC	E USE ONLY
Name & Agent Code	Sub-Agent Name & Cod Bank Branch Code	e/ EUIN No.	CO Code	MO Code	Registrar Serial No.	Date/Time of Receipt
ARN-167174	Balik Braileii Code	E326136			Serial No.	oi Receipt
			s transaction is executed without ar			
person of the above distributor/s	ub broker or notwithstanding t	the advice of in-appropriateness,	if any, provided by the employee/rel	ationship manager/sales person of	f the distributor/s	sub broker.
Sole/1 <sup>st</sup> applicant/Guardia	n/Authorised Signatory/POA	2 <sup>nd</sup> applicant	t/Authorised Signatory	3 <sup>rd</sup> applicant/Au	ıthorised Signator	у
Jpfront commission shall be paid	directly by the investor to the	AMFI registered Distributors base	ed on the investors' assessment of va	rious factors including services rer	ndered by the distr	ibutor.
REGISTRATION CUM MA	NDATE FORM FOR AU	TO DEBIT / NACH FACILI	ΤΥ			
■ New SIP Registration*		☐ SIP Cancellati	on	Change in Bank Ad	ccount*	
(*Please provide a cancelle APPLICANT INFORMATION	. ,	WI C				
Sole / First Investor Name	ON AND SCHEWE DETA	AILS				
PAN No.				Folio No.		
Scheme Name				TONO IVO.		
Plan		Opt	tion			
Sub Option		<del>                                     </del>	idend Frequency			
SIP DETAILS						
Each SIP Amount (🗸)		SIP Frequency (√)	✓ Monthly			
SIP Auto Debit Dates 1s	t 7th 10			ate is 7th)		
Regular SIP SIP Period		Y Y Y End M M	Y Y Y Y Till further	Note: Please allow minimum one month for		7
SIP TOP UP (Optional)		I I I LIIU III III	Thirtidicities	ii ena date is not specified, the fund will con		
(Tick to avail this facility)	TOP UP Amount: ₹ TOP UP amount has to be	e in multiples of ₹ 500 only (Refer	Point No. 16).	TOP UP Frequer	ncy: Half Ye	arly Yearly
I/We hereby, authorize BOI AXA M	utual Fund to debit my/ourfollo	owing bank account by Auto Debit /	NACH Facility for collection of SIP pay	ments.		
First / Sole Applicant / Guardi	an / PoA / Authorised Signator	y Second Applica	ant / Authorised Signatory			
First/ Sole Applicant/ Guardi	an/ PoA/ Authorised Signator				Applicant	iliferent competing and that I/We have unds received from g Instruction/Direct
First/ Sole Applicant/ Guardi		DEBIT MANDATE FOR	M NACH / DIRECT DEBIT	Third /		
AM	an/ PoA/ Authorised Signator			Third /		
ANA anagers	UMRN F O R	DEBIT MANDATE FOR	M NACH / DIRECT DEBIT	Third	Applicant  D D M N	
anagers ✓) Sponsor Bank	UMRN F O R For	DEBIT MANDATE FOR  O F F I C E  Office use only	M NACH / DIRECT DEBIT	Third /  Date  For Office use	Applicant  D D M M	и у у у
ANA anagers	UMRN F O R For	DEBIT MANDATE FOR	M NACH / DIRECT DEBIT	Third /  Date  For Office use	Applicant  D D M N	и у у у
anagers ✓) Sponsor Bank	UMRN F O R Code For	DEBIT MANDATE FOR  O F F I C E  Office use only	M NACH / DIRECT DEBIT	Third /  Date  For Office use	Applicant  D D M M	и у у у
ANA anagers  ✓)  Sponsor Bank  I/We hereby aut  Bank a/c ni	UMRN F O R Code For horize BOI A	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund	M NACH / DIRECT DEBIT	Y Date  For Office use  to debit (tick ✓) SB/	Applicant  D D M N	и у у у
Sponsor Bank  I/We hereby aut  Bank a/c ni	UMRN F O R Code For	DEBIT MANDATE FOR  O F F I C E  Office use only	M NACH / DIRECT DEBIT	Third /  Date  For Office use	Applicant  D D M N	и у у у
Sponsor Bank    We hereby aut    Bank a/c nu	UMRN F O R Code For horize BOI A	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund	M NACH / DIRECT DEBIT	Y Date  For Office use  to debit (tick ✓) SB/	Applicant  D D M N	и у у у
Sponsor Bank  I/We hereby aut  Bank a/c nt  Name of	UMRN F O R For horize BOI A customers bank	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC	M NACH / DIRECT DEBIT  U S E O N L  Utility Code	Third //  Pate  For Office use  to debit (tick ✓ ) SB //  or MICR	Applicant  D D M N	E/SB-NRO/Oti
Sponsor Bank  I/We hereby aut  Bank a/c nt  Name of  tt of Rupees Amoun  CY Mthly Qt	UMRN F O R Code For BOI A umber Customers bank	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC	M NACH / DIRECT DEBIT  U S E O N L  Utility Code	Third //  Pate  For Office use  to debit (tick ✓ ) SB //  or MICR	Applicant  D D M N  only  CA/CC/SB-NR	E/SB-NRO/Oti
Sponsor Bank    We hereby aut   Bank a/c nu   Name of   tof Rupees   Amount   CY   Mthly   Qtl	UMRN F O R Code For BOI A umber Customers bank	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT	Third //  Pate  For Office use  to debit (tick ✓ ) SB //  or MICR	Applicant  D D M N  only  CA/CC/SB-NR	E/SB-NRO/Oti
Sponsor Bank  I/We hereby aut  Bank a/c nu  Name of  tof Rupees Amount  CY Mthly Qtt	UMRN F O R Code For BOI A umber Customers bank t in words y X H - Yrly X Yr	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  DEBIT  Phone No.	Third /    Y	Applicant  D D M N  only  CA/CC/SB-NR	E/SB-NRO/Oti
Sponsor Bank  I/We hereby aut  Bank a/c nu  Name of  tof Rupees Amount  CY Mthly Qtt  1  1 agree for the debit of man	UMRN F O R Code For BOI A umber Customers bank t in words y X H - Yrly X Yr	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT	Third /    Y	Applicant  D D M N  only  CA/CC/SB-NR	E/SB-NRO/Oti
Sponsor Bank  I/We hereby aut  Bank a/c nt  Name of  to of Rupees Amoun  CY Mthly Qtt  1  I agree for the debit of man	UMRN F O R Code For BOI A Imber Customers bank t in words y X H - Yrly X Yr	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT  Phone No.  Email ID  debit my account as per latest schedules.	Third J  Y Date  For Office use  to debit (tick ✓) SB J  or MICR   ▼  IYPE   Fixed Amount  Je of charges of the bank	Applicant  D D M A  only  //CA/CC/SB-NR	E/SB-NRO/Ott
Sponsor Bank  I/We hereby aut  Bank a/c nu  Name of  Amount  CY X Mthly X Qtt  1 I agree for the debit of man	UMRN F O R Code For BOI A Imber Customers bank t in words y X H - Yrly X Yr	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT  Phone No.  Email ID  debit my account as per latest schedules.	Third J  Y Date  For Office use  to debit (tick ✓) SB J  or MICR   ▼  IYPE   Fixed Amount  Je of charges of the bank	Applicant  D D M N  only  CA/CC/SB-NR	E/SB-NRO/Ott
Sponsor Bank    // We hereby aut   Bank a/c nt   Name of    Name of    Name of   Name	UMRN F O R Code For BOI A Imber Customers bank t in words y X H - Yrly X Yr	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente  the bank whom I am authorizing to or  inature Primary Account holder	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT  Phone No.  Email ID  debit my account as per latest schedurer  Signature of Account	Third /  Part    For Office use  to debit (tick ✓ ) SB/  or MICR    FYPE   X Fixed Amount    S Fixed Amount	Applicant  D D M N only  CA/CC/SB-NR  Maximum  Signature of Ac	A Y Y Y Y  E/SB-NRO/Ott
Sponsor Bank  I/We hereby aut  Bank a/c nt  Name of  to of Rupees Amoun  CY Mthly Qtt  1 agree for the debit of man	UMRN F O R Code For BOI A Imber Customers bank t in words y X H - Yrly X Yr	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT  Phone No.  Email ID  debit my account as per latest schedules.	Third /  Part    For Office use  to debit (tick ✓ ) SB/  or MICR    FYPE   X Fixed Amount    S Fixed Amount	Applicant  D D M A  only  //CA/CC/SB-NR	A Y Y Y Y  E/SB-NRO/Ott
Sponsor Bank	UMRN F O R  Code For BOI A  Imber	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente  the bank whom I am authorizing to often a count holder  Name as in bank records  and & made by me/us. I am authorizing and the count holder  I am authorizing to other the count holder  Name as in bank records	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT  Phone No.  Email ID  debit my account as per latest schedurer  Signature of Account	Third J  Y Date  For Office use  to debit (tick ✓) SB J  or MICR   ▼  TYPE   Fixed Amount  Je of charges of the bank  rount holder  nk records  3.  it my account, based on the instruction of the struction of t	Applicant  D D M A  only  //CA/CC/SB-NR  Maximum  Signature of Ac  Name as in b	E/SB-NRO/Oti
Sponsor Bank	UMRN F O R  Code For BOI A  Imber Ustomers bank  t in words  y X H - Yrly X Yr  date processing charges by the Sign of Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente  the bank whom I am authorizing to often a count holder  Name as in bank records  and & made by me/us. I am authorizing and the count holder  I am authorizing to other the count holder  Name as in bank records	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  DEBIT  Phone No.  Email ID  debit my account as per latest schedurer  Signature of Account as the scheduler of Account a	Third J  Y Date  For Office use  to debit (tick ✓) SB J  or MICR   ▼  TYPE   Fixed Amount  Je of charges of the bank  rount holder  nk records  3.  it my account, based on the instruction of the struction of t	Applicant  D D M A  only  //CA/CC/SB-NR  Maximum  Signature of Ac  Name as in b	E/SB-NRO/Oti
Sponsor Bank  I/We hereby aut  Bank a/c nu  Name of  It of Rupees Amount  Yell  I agree for the debit of man  D D M M Y Y  Until Cancelled  Confirm that the declaration has Iderstood that I am authorized to design a single property of the confirmation of the confirm	UMRN F O R  Code For BOI A  Imber Ustomers bank  t in words  y X H - Yrly X Yr  date processing charges by the Sign of Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente  the bank whom I am authorizing to often a count holder  Name as in bank records  and & made by me/us. I am authorizing and the count holder  I am authorizing to other the count holder  Name as in bank records	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  DEBIT  Phone No.  Email ID  debit my account as per latest schedurer  Signature of Account as the scheduler of Account a	Third J  Y Date  For Office use  to debit (tick ✓) SB J  or MICR   ▼  TYPE   Fixed Amount  Je of charges of the bank  rount holder  nk records  3.  it my account, based on the instruction of the struction of t	Applicant  D D M A  only  //CA/CC/SB-NR  Maximum  Signature of Ac  Name as in b	E/SB-NRO/Oti
Sponsor Bank  I/We hereby aut  Bank a/c nu  Name of  t of Rupees Amount  Y Mthly Y Qtt  I agree for the debit of man  D D M M Y Y  Until Cancelled  confirm that the declaration has Iderstood that I am authorized to desire	UMRN F O R  Code For BOI A  Imber Ustomers bank  t in words  y X H - Yrly X Yr  date processing charges by the Sign of Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	DEBIT MANDATE FOR  O F F I C E  Office use only  XA Mutual Fund  IFSC  Iy As & when presente  the bank whom I am authorizing to one of the present of the pr	M NACH / DIRECT DEBIT  U S E O N L  Utility Code  d DEBIT  Phone No.  Email ID  debit my account as per latest schedurer Signature of Account as in background	Third J  Y Date  For Office use  to debit (tick ✓) SB J  or MICR   ▼  TYPE   Fixed Amount  Je of charges of the bank  rount holder  nk records  3.  it my account, based on the instruction of the struction of t	Applicant  D D M A  only  //CA/CC/SB-NR  Maximum  Signature of Ac  Name as in b	E/SB-NRO/Oti

Signature of authorised Official from Bank (Bank stamp and date)

Certified that the signature of account holder and the details of Bank Account mentioned in Debit Mandate form for NACH/ Direct Debit are correct as per our records.

## TERMS AND CONDITIONS

- 1. Existing investors seeking for Systematic Investment only, need to fill up this Systematic Investment Form. New investors who wish to enroll for the Systematic Investment should fill up SIP Form in addition to the Common Application Form, with or without the initial investment amount i.e. the first installment can be without the cheque. However in lines with SEBI and AMFI guidelines the requirement of submission of documents for subscription/transaction is modified from time to time. Therefore, for such additional requirements the investor is required to refer the "Instruction For Completing the Application Form" (as provided in the main application form) and submit such additional documentation for the same.
- The cheque may be drawn in favour of "Full name of the Scheme" followed by the name of the sole or 1st joint holder/ his PAN/folio number. For e.g. "XYZ Scheme A/c – Sole / First Investor name" or "XYZ Scheme A/c -Permanent Account Number" or "XYZ Scheme A/c -Folio Number"
- If the investment is without a first investment cheque then the cancelled cheque copy is mandatory for submission and, if such cancelled cheque is without any name a bankers attestation is required on the SIP form.
- Please check the Scheme Information Document & the Statement of Additional Information for SIP facility in respective scheme.
- Monthly SIP facility is available only on specific dates of the month viz 1st or 7th or 10th or 15th or 20th or 25th & minimum Duration is 6 months for Monthly SIP.
- 6. During ongoing purchase in monthly SIP your first SIP can be for any day of the month. Your second and subsequent SIPs are available only on the above specified dates of the month with a minimum gap of atleast 30 calendar days between first and second SIP installment. In case the chosen date turns out to be a non working day for the scheme; the SIP will be processed on the immediate following working day.
- The SIP cheque (where the investment is made by cheque) should be drawn on the same bank account which is to be registered for Auto Debit. The bank account provided for Auto Debit should participate in local MICR clearing.
- The first investment cheque while applying for Monthly SIP can be either equal to or greater than
  the subsequent Monthly SIP installment amounts. The subsequent Monthly SIP installment
  amounts however should remain the same as per the scheme specific information document
  and all the postdated cheques issued.
- 9. If two consecutive SIP's fail, the SIP will automatically stand terminated and a communication to the effect will be sent to the investor.
- 10. The investor has the right to discontinue SIP at any time he/she so desires by sending a written request, at least 15 working days prior to the due date of next SIP for Monthly SIP, to any of the offices of BOI AXA Mutual Fund or its Investor Service Centres.
- 11. Investors availing the Micro SIP facility shall be exempted from submission of requirement of PAN. Micro SIP shall be applicable where aggregate of installments in a rolling 12 months period or in a financial year i.e. April-March does not exceed ₹ 50,000/- per year. Micro SIP benefit is available to individuals, NRI's, Minors and Sole Proprietors only. HUPs, PIO's and any other entities/ persons etc. are not eligible. The AMC will reject the application where they find that documents are deficient or where the installment total will exceed ₹ 50.000/- per year.
- 12. Investor will not hold BOI AXA Investment Managers Pvt. Ltd., its registrars and other service providers responsible if the transaction is delayed or not effected, the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles of Auto Debit / local holidays / incomplete or incorrect instructions from the applicant.
- BOI AXA Investment Managers Pvt. Ltd. reserves the right not to represent any mandate for SIP auto Debit facility if the registration could not be effected in time for reason beyond its control.
- BOI AXA Investment Managers Pvt. Ltd., its registrars and other service providers shall not be
  responsible and liable for any transaction failures, due to rejection of the transaction by your
  bank/branch or its refusal to register the SIP mandate.
- $15. \hspace{0.5cm} \text{In case of renewal of SIP this form should be submitted at least 1 month prior to the due date.} \\$
- 16. SIP TOP UP Facility:
  - Top Up facility will be available only for valid new registration(s) under SIP or renewal of SIP
  - 2. The minimum SIP Top-up amount is ₹500 and in multiples of ₹500
  - 3. Top Up can be done on a half yearly / annual basis;
  - If the investor does not specify the frequency, the default frequency for Top-up will be considered as Half-yearly.
  - 5. This facility is available only for Monthly SIP.
  - SIP Top-up facility shall be available for SIP Investments through NACH / Direct Debit Facility/ Standing Instruction only.
  - Top Up Facility will not be available for investments under SIP where the auto debit period has not been indicated by the investor at the time of investments.
  - 8. All other terms & conditions applicable for regular SIP will also be applicable to Top-up SIP

## OTHER TERMS & CONDITIONS

- 1. This facility is available presently only for Systematic Investment Plan.
- NACH debit facility is offered at various banks. For a detailed list of banks please refer the website www.npci.org.in
- 3. This facility is offered only to the investors having bank accounts with above mentioned Banks.
  - Above list is subject to modification/updation at any time in future at the sole discretion of BOI AXA Investment Managers Pvt Ltd, without assigning any reason or prior notice. If any bank is removed, SIP instructions of investors for such banks via NACH will be discontinued without any prior notice.
- By signing the NACH mandate form the investor agrees to abide by the terms and conditions of NACH facility through NPCI (www.npci.org.in).
- New/Existing investors who wish to enroll for SIP through NACH should fill the SIP Application Form and the Registration cum Mandate Form for NACH.
- 6. New Investors should mandatorily give a cheque for the first transaction.
  - First SIP Cheque should be dated current day. All subsequent Installments through NACH to be either 1st/7th/10th/15th/20th/25th of the month.
  - The Registration cum Mandate Form for NACH should be submitted at least 30 Calendar days prior to next sip cycle date through NACH.
  - c. \*Unique Mandate Registration Number (UMRN) is auto generated by NPCI during the mandate creation for the first time. Investors, who do not have the UMRN, please leave it blank. UMRN would be linked to the folio and maximum length is 20 characters comprising of Alpha Numeric Character allotted by NPCI.
  - d. Investors who already have UMRN registered under the folio can fill up the SIP Registration cum Mandate Form for NACH and should be submitted at least 30 Calendar days before the date of the first debit through NACH.
- Please provide the cancelled cheque leaf of the Bank A/c no. for which NACH facility is registered.
- Investors need to mandatorily fill the SIP Registration Cum Mandate form for NACH for any amendment and cancellation quoting their UMRN by giving 15 working days prior notice to any of the investor service centre.
- Investor can choose to discontinue the SIP facility under folio without cancelling the UMRN by giving 15 working days prior notice to any of the Investor Service Centre. Investor can choose to register any future SIP by simply filling up the Registration cum mandate form for NACH quoting their UMRN.
- Please enter IFSC Code (maximum length-11 Alpha Numeric Characters) and MICR Code (maximum length – 9 Numeric Characters) of investor bank.
- In case of existing investor, if application is received without existing UMRN then the first UMRN registered in the folio would be considered

SIP NACH FORM/170216

## FOR MORE INFORMATION