

## SIP Enrolment and Auto Debit Form For investments through ECS (Debit Clearing)/Standing Instruction and for Change of Bank (First time investors should use this form along with the application form)

Channel Partner / Agent Information	Serial No: EQ
Distributor's ARN & Name Sub-broker Code (internal) Sub-broker's ARN	Employee Unique Idendification Number    Italisaculor Charges For Rs. 10,000 and above.     Existing Investor-Rs.100
* Declaration for "Execution only" transcation (only where EUIN box is left blank)   I/We hereby confirm by melus as this transaction is executed without any interaction or advice by the employee/relationship man or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship mahager.  First/Sole Applicant/  Second	n that the EUIN box has been intentionally left blank agerisales person of the above distributor/sub broker.  Third  Upfront commission shall be paid directly by the investor to the AMFI-registered distributors based on the investors assessment of various factors including
Guardian Applicant	services rendered by the distributor.
Existing Investor Information (Please fill in your Folio No.) Please note that applicant details and mode of holding will be as per existing Folio Number. If you want to change your bank details for your ongoing SIP, all you have to do is (1) tick the box (2) fill in the folio number (3) fill the SIP Auto Debit details and (4) sign; highlighted by the symbol (4) Folio No	
Name of First/Sole Applicant	
	completed $\square$ Yes $\square$ No Date of Birth $\square$ D D M M Y Y Y Y
Name of Guardian (in case of First / Sole Applicant is a Minor) / Contact Person – Designati	Demat Option, may provide a copy of the DP Statement enabling us
Permanent Account Number (PAN) KYC ( Name of Second Applicant	completed ☐ Yes ☐ No  Io match the Demat details as stated in the application form) ☐ National Securities Depository Ltd.
	Completed Yes No
Name of Third Applicant	DP ID Number Beneficiary Account Number
Permanent Account Number (PAN) KYC (	completed 🗆 Yes 🗆 No
▲ SIP Auto Debit Details including Change in Bank	<b>Declaration:</b> I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID
Fund Name	and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations
Plan	of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making
Each SIP Amount Rs	this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs.
SIP Frequency  Meekly every Wednesday( For Minimum amount of Rs. 1000, Minimum No. of installments is 5)  Monthly( For Minimum amount of Rs. 250, minimum No. of installments is 20)  Quarterly( For Minimum amount of Rs. 750, minimum No. of installments is 7)	Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN exempt category of investors). The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.
SIP Date for Monthly/Quarterly frequency only   1   7   14   20   25	the Scheme is being recommended to me/us.  Applicable to NRIs only: Please (✓) □  /We confirm that   am/We are Non-
SIP Period  SIP Starting  SIP Ending  OR  Till further notice*  3 1 1 2 2 0 3 1 1  ("The date may be taken as 31/12/2031 in case the bank needs to input a specific date in their system) (refer Guide to investing through SIP)	Applicable to NRIs only: Please (✓) ☐ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account on a ☐ Repatriation Basis ☐ Non-Repatriation Basis.
SIP □ SIP Top-up (Optional) (please ✓ to avail this facility)  Top-up Top-up Top-up amount Rs	I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in
If Micro SIP, please tick Yes (Micro SIP: Upto R: 50,000 per person in any rolling 12-month period)	intimating any changes to the above particulars. I/We hereby authorise Sundaram
If Micro SIP, supporting document/identification number:	of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign
Bank Account Details Account Number	governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.
Name of Account Holder (as in bank account)  Name of the Bank	▲ Signature
	O O
Branch & City	First / Sole Applicant / Guardian
Branch Address  Charge AUCD No.	Second Applicant
Cheque MICR No       Account Type       □ Savings □ Current □ NRE □ NRO □ FCNR	Third Applicant
[Please (/)] Others	
Authorisation & Signature of the Bank Account Holder	
To, The Branch Manager,	
I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above thorugh participation in ECS (Debit Clearing) / Direct Debit / Standing Instruction. If the transaction is delayed or not effected at all of reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform Sundaram Mutual Fund / Sundaram Asset Management Company Limited, about any changes in my back account. I/We have read and agreed to the terms and conditions mentioned overleaf.  First / Sole Applicant / Guardia	n Second Applicant Third Applicant