PAN BASED MANDATE CUM SIP REGISTRATION FORM
[For investment through NACH (Not eligible for Minors Bank Account)]

PAN BASED MANDATE

ICICI PRUDENTIAL MUTUAL FUND

| UMRN | FOR OFFICE USE ONLY | Date | | | | | | | |

| Sponsor Bank Code | FOR OFFICE USE ONLY | Utility Code | FOR OFFICE USE ONLY |

Tick (✓)
- CREATE ✓
- MODIFY
- CANCEL

I/We hereby authorize **ICICI PRUDENTIAL ASSET MANAGEMENT COMPANY LIMITED** to debit (tick ✓) SB/CA/CC/SB-NRE/SB-NRO/Other

Bank a/c number [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]

with Bank _Name of customers bank_   IFSC [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]   or MICR [ ][ ][ ][ ][ ][ ][ ][ ][ ]

an amount of Rupees _Maximum Amount (Rupees in words)_   ₹

FREQUENCY ☒ Mthly ☒ Qtly ☒ H-Yrly ☒ Yrly ☑ As & when presented   DEBIT TYPE ☒ Fixed Amount ☑ Maximum Amount

PAN _____   Mobile No. _____

Reference _APPLICATION NUMBER_   Email 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 ☒ Until Cancelled

Sign: _____   Sign: _____   Sign: _____

1. _Name as in bank records_   2. _Name as in bank records_   3. _Name as in bank records_

Declaration: I/We hereby declare that the particulars given on this mandate are correct and complete and express my willingness and authorize to make payments referred above through participants in NACH/SI/any other mode as may be preferred by the AMC from time to time. I/We hereby confirm adherence to the terms of this facility offered by ICICI Prudential Asset Management Company Limited (the AMC) as specified in Terms & Conditions under Registration of OTM/PAN Based Mandate Facility and amended from time to time and of NACH (Debits). **Authorization to Bank:** 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. I/We have understood that I/we authorized to cancel/amend this mandate by appropriately communicating/amendment to the User entity/corporate or the or the bank where I have authorized the debit. This is to inform that I/we have registered for this facility and that my/our investment in ICICI Prudential Mutual Fund shall be made from my/our above mentioned bank account with your Bank and to debit my/our account for any charges towards mandate verification, registration, transactions, transactions, returns, etc, as applicable.

SIP Registration-Cum-Mandate Form for SIP

Application No. _____

Investor must read Key Scheme Features and Instructions before completing this form. All sections to be completed in ENGLISH in BLACK/BLUE INK and BLOCK LETTERS.

BROKER CODE (ARN CODE)/ RIA/PMRN CODE#	SUB-BROKER ARN CODE	SUB-BROKER CODE (As allotted by ARN holder)	Employee Unique Identification No. (EUIN)

#By mentioning RIA/PMRN code, I/We authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund.

TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY: In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invested. 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.

Declaration for "execution-only" transaction (only where EUIN box is left blank) - I/We hereby confirm that the EUIN box has been intentionally left blank by me/ us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

SIGNATURE OF SOLE / FIRST APPLICANT	SIGNATURE OF SECOND APPLICANT	SIGNATURE OF THIRD APPLICANT

The Trustee, ICICI Prudential Mutual Fund, I/We have read and understood the contents of the Scheme Information Document of the following Scheme and the terms and conditions of the SIP Enrolment.

FOLIO NO. _____   Date of Birth [D][D][M][M][Y][Y][Y][Y]   ☐ **Registration via Existing OTM** [Please tick (✓)]

Sole/1st Applicant: Mr. /Ms. / M/s   FIRST   MIDDLE   LAST

Scheme: ICICI PRUDENTIAL _____   PLAN: _____

OPTION: _____ SUB-OPTION: _____ INCOME DISTRIBUTION CUM CAPITAL WITHDRAWAL OPTION

FREQUENCY: _____ AEP FREQUENCY _____

Please refer instructions and Key Scheme Features for options, sub-options and other facilities available under each scheme of the Fund.

Each SIP Amount: Rs. _____   In words: _____

SIP Frequency: ☐ Daily (Only business days) ☐ Weekly*** (_____) ☐ Fortnightly** ☐ Monthly ☐ Quarterly*

*In case of Quarterly SIP, only Yearly frequency is available under SIP TOP UP. **Fortnightly is available on 1st and 16th of each moth, as applicable. ***investors can choose any day of the week from Monday to Friday to register under weekly frequency. #In case the choosen date is a non-business day, the transaction would be processed on the next business day. ^Number of installments have to be mentioned only in case of Daily/Weekly/Fortnighly frequencies. [Refer T&C no.12(f)]*

SIP Installments ^ [ ]

SIP Date#: [D][D] **SIP Start Month/Year** [M][M][Y][Y][Y][Y]   **SIP End Month/Year** [M][M][Y][Y][Y][Y]

EXISTING OTM / FIRST INSTALLMENT BANK DETAILS:

Cheque/DD No. _____ Cheque/DD Amount Rs. _____ A/c No. _____

Bank Name: _____

SIP TOP UP (Optional)
☐ (Tick to avail this facility)

Percentage: ☐ 10% ☐ 15% ☐ 20%

other _____ (multiples of 5% only)

TOP UP Amount: Rs. _____

*TOP UP amount in multiples of Rs.100 only.

Frequency: ☐ Half Yearly ☐ Yearly

SIP TOP UP CAP Amount:

Rs. _____ OR

Month-Year#: [M][M][Y][Y][Y][Y]

#Investor has to choose only one option – either CAP Amount or CAP Month-Year

DEMAT ACCOUNT STATEMENT DETAILS (OPTIONAL – PLEASE REFER INSTRUCTION NO. 19)

NSDL: Depository Participant (DP) ID (NSDL only) _____   Beneficiary Account Number (NSDL only) _____   **CDSL:** Depository Participant (DP) ID (CDSL only) _____

(Please sign overleaf)

Mandatory fields in OTM form as per NPCI: • Bank account number and Bank name • IFSC and/or MICR Code • PAN • Signatures as per bank records • SIP start date, end date • Account type to be selected • Name as per bank records • Transaction type to be selected • Maximum amount to be mentioned.

GENERAL INSTRUCTIONS

UMRN (Unique Mandate Reference Number) is provided by NPCI, which is assigned to every mandate that has been submitted to them.

Investor will not hold ICICI Prudential Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles.

The Bank & AMC shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligations under this Agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riot, strike, mutiny, revolution, fire, flood, fog, war, lightening, earthquake, change of Government policies, unavailability of Bank's computer system, force majeure events, or any other cause of peril which is beyond the Bank's reasonable control and which has effect of preventing the performance of the contract by the Bank.

The investor hereby agrees to indemnify and not hold responsible, AMC/Mutual Fund (including its affiliates), and any of its officers directors, personnel and employees, the Registrars & Transfer (R&T) agent and the service providers incase for any delay/wrong debits on the part of the bank for executing the debit mandate instructions for any sum on a specified date from your account. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, the investor would not hold the user institution responsible. Investor confirm to have understood that the introduction of this facility may also give rise to operational risks and hereby take full responsibility.

Registration of OTM/PAN BASED MANDATE FACILITY: As an investor I/we hereby request you to register me/us for availing the facility of OTM/PAN based mandate and carrying out transactions of additional purchase/redemption/switch in my/our folio through Call Centre and/or also authorize the distributor(s) to initiate the above transactions on my/our behalf. In this regard, I/we also authorize the AMC, on behalf of ICICI Prudential Mutual Fund (Mutual Fund) to call/email on my/our registered mobile number/email id for due verification and confirmation of the transaction(s) and such other purposes. The mobile number provided in the common application form will be used as registered mobile number for verification and confirmation of transactions. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information or non-confirmation/ verification of the transaction due to any reason, I/we shall not hold AMC, Mutual Fund, its sponsors, representatives, service providers, participant banks responsible in this regard. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. I/We hereby confirm that the information/documents provided by me/us in this form are true, correct and complete in all respect. I/We hereby agree and confirm to inform AMC promptly in case of any changes. I/We interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. If you do not wish to receive, please call on tollfree no. 1800 222 999 (MTNL/BSNL) or 1800 200 6666 (Others).

Maximum Amount: The MAXIMUM AMOUNT is the per transaction maximum limit. Investor can register multiple SIPs but the amount should not exceed the maximum amount mentioned per transaction.

INSTRUCTIONS FOR EXISTING OTM AND PAN BASED MANDATE FACILITY

1) Investor can transact through OTM facility registered for the PAN in the respective folio(s).

2) If more than one bank accounts are registered for OTM facility, investor is requested to mention the bank account number and bank name from where amount is to be debited. If the same is not mentioned or no OTM mandate is registered for the given bank details, AMC reserves the right to initiate the debit through any of the valid OTM's registered or reject the request.

3) The units shall be allotted based on the day on which funds are credited to AMC's collection account by the service provider/ bank. This is subject to compliance with the time stamping provision as contained in the SEBI (mutual funds) regulations, 1996.

4) Registration request or any other subsequent transaction may be liable for rejection, if the frequency for the registered OTM is other than "As and when presented" and/ or if the transaction amount is other than fixed amount or more than maximum amount registered in the mandate.

5) AMC reserves right to reject or process the application subject to internal verification.

6) PAN based mandate will be mapped to all the folios wherever investor is the Sole/First holder subject to completion of mandate registration with the banker.

7) PAN based mandate will not be applicable, if bank details provided is for Minor's Account.

8) Investor can transact using this mandate, within the limit of maximum amount and tenure specified.

YOUR CONFIRMATION/DECLARATION: I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs.50, 000 in a year as described in the Instruction No.IV(d) of the common application form. 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. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV.

Signature(s) as per ICICI Prudential Mutual Fund Records *(Mandatory)*

Sole/First Holder		2nd Holder		3rd Holder	