



SUNDARAM MUTUAL

NACH/OTM Registration

For office use only
UMRN Date
Sponsor Bank Code CITI000PIGW ☒ Create ☐ Modify ☐ Cancel
Utility Code CITI00002000000037 I/We authorise SUNDARAM MUTUAL FUND

② To debit Tick (✓) ☐ SB ☐ CA ☐ SB-NRE ☐ SB-NRO ☐ Others..... Bank A/c No

④ With Bank Name of customers bank IFSC or MICR

⑤ An amount of ₹ (in words) ₹

DEBIT TYPE ☒ Fixed Amount ☒ Maximum Amount FREQUENCY ☒ Monthly ☒ Quarterly ☒ Half Yearly ☒ Yearly ☒ As & when presented

⑦ Reference 1 URN Reference 2 Folio No

⑧ Phone No Email ID

1. 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. 2. This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorising the user entity/corporate to debit my account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorised 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.

⑩ PERIOD
From To
or ☒ Until Cancelled
Signature of the Primary Holder Signature of the Joint Account Holder Signature of the Joint Account Holder
1 Name as in bank records 2 Name as in bank records 3 Name as in bank records



SUNDARAM MUTUAL

SIP Registration / Renewal Form / Modification - NACH / One Time Mandate (OTM)

(First time investors should use this form along with the application form)

Please tick ☒ as applicable:

- ☐ NACH/OTM Form is attached and to be registered in the folio. SIP will start after mandate registration which may take 30 days.
☐ NACH/OTM Form is already registered in the folio. [No need to submit again].

ISC's signature
&
Time Stamping

Distributor's ARN & Name	Sub-broker's ARN (Code)	Sub-broker Code (Internal)	EJIN* (Employee Unique Identification Number)	Registered Investment Adviser (RIA) Code	For Office use only
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☐ I/We confirm that the EJIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned. 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.

Sole/First Applicant's Signature Mandatory

Name of First/Sole Applicant Gender* ☐ Male ☐ Female ☐ Others Mobile* PIN Code*
Name of Second Applicant Gender* ☐ Male ☐ Female ☐ Others Mobile* PIN Code*
Name of Third Applicant Gender* ☐ Male ☐ Female ☐ Others Mobile* PIN Code*
E-Mail*
Existing Investor Folio No. New Investor Application No.
Permanent Account Number (PAN)* PEKRN Central KYC Number ☐ CKYC Proof attached (Mandatory)
First/Sole Applicant/Guardian
Second Applicant
Third Applicant

1 Bank Name

Cheque No

Dated

2 Bank Name

Cheque No

Dated

Please tick ☒ ☐ SIP Registration ☐ SIP with Top-up Registration ☐ SIP-Change in Bank Details (Please provide copy of cancelled cheque and mention relevant SIP details in the form and OTM mandate.)

CKYC compliant ☐ Yes ☐ No (if no, please provide CKYC proof/additional documents if not submitted earlier)

1 Scheme Name Plan: Option:
SIP Installment Amount (₹) Frequency: ☐ Weekly* ☐ Monthly* ☐ Quarterly ☐ Weekly*: Only on Wednesday
SIP Top Up amount (Optional): ₹ (in multiples of ₹ 500/-) Top-up Frequency ☐ Half-yearly ☐ Yearly
Start Month/Year: End Month/Year (Default Dec 2099): ☐ Till Further Notice
SIP Date: (for Monthly: Any Day of the Month; for Quarterly: Any Day of the month for each quarter (beginning January, April, July and October)).

2 Scheme Name Plan: Option:
SIP Installment Amount (₹) Frequency: ☐ Weekly* ☐ Monthly* ☐ Quarterly ☐ Weekly*: Only on Wednesday
SIP Top Up amount (Optional): ₹ (in multiples of ₹ 500/-) Top-up Frequency ☐ Half-yearly ☐ Yearly
Start Month/Year: End Month/Year (Default Dec 2099): ☐ Till Further Notice
SIP Date: (for Monthly: Any Day of the Month; for Quarterly: Any Day of the month for each quarter (beginning January, April, July and October)).

This will be considered in both Online and Physical modes (refer Guide to investing through SIP); *Default frequency; ^Top-up is applicable for SIPs under Monthly & Quarterly Frequencies.

DEMAT Account Details (Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the application form)		
<input type="checkbox"/> National Securities Depository Ltd.	Depository Participant DP ID Number <input type="text"/>	Beneficiary Account Number <input type="text"/>
<input type="checkbox"/> Central Depository Services (India)		

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 NACH/OTM • 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 ₹ 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 model), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

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 connection with this application.

Signatures	First Unit Holder's / Guardian Signature	Second Unit Holder's Signature	Third Unit Holder's Signature
[as per Mutual Fund Records / Application]	<input type="text"/>	<input type="text"/>	<input type="text"/>