



SUNDARAM MUTUAL

NACH/OTM Registration

For office use only

UMRN

Grid for UMRN

Date

Grid for Date

Sponsor Bank Code

CITI000PIGW

Create

Modify

Cancel

Utility Code

CITI00002000000037

I/We authorise

SUNDARAM MUTUAL FUND

To debit Tick

SB CA SB-NRE SB-NRO Others

Bank A/c No

Grid for Bank A/c No

With Bank

Name of customers bank

IFSC

Grid for IFSC

or MICR

Grid for MICR

An amount of ₹ (in words)

Grid for amount in words

₹

DEBIT TYPE

Fixed Amount

Maximum Amount

FREQUENCY

Monthly

Quarterly

Half-Yearly

Yearly

As & when presented

Reference 1

URN

Grid for URN

Reference 2

Folio No

Grid for Folio No

Phone No

Grid for Phone No

Email ID

Grid for 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.

PERIOD

From

Grid for From

To

Grid for To

or Until Cancelled

Signature of the Primary Holder

Signature of the Joint Account Holder

Signature of the Joint Account Holder

Name as in bank records

Name as in bank records

Name as in bank records



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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

Table with columns: Distributor's ARN & Name, Sub-broker's ARN (Code), Sub-broker Code (internal), EUIIN* (Employee Unique Identification Number), Registered Investment Adviser (RIA) Code, For Office use only

I/We confirm that the EUIIN 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

Form for applicant details including Name of First/Sole Applicant, Name of Second Applicant, Name of Third Applicant, E-Mail, Existing Investor Folio No., New Investor Application No., Permanent Account Number (PAN)*, PEKRN, Central KYC Number, CKYC Proof attached (Mandatory)

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)

Form for Scheme Name, Plan, Option, SIP Installment Amount, Frequency, SIP Top Up amount, Start Month/Year, End Month/Year, SIP Date

Form for Scheme Name, Plan, Option, SIP Installment Amount, Frequency, SIP Top Up amount, Start Month/Year, End Month/Year, SIP Date

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.

Table for DEMAT Account Details including National Securities Depository Ltd., Central Depository Services (India), Depository Participant DP ID Number, Beneficiary Account Number

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...

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.

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.

Table for Signatures including [as per Mutual Fund Records / Application], First Unit Holder's / Guardian Signature, Second Unit Holder's Signature, Third Unit Holder's Signature