

SIP MODIFICATION FORM

Name & Broker Code / ARN / RIA	Sub Broker / Sub Agent ARN Code	*EUIN	Internal Code for Sub-broker/ Employee	TIME STAMPING
ARN- (ARN stamp here)	ARN-			

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

☐ Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. XIII). – 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 First / Sole Applicant /
Guardian / Authorised Signatory

☐ Modification in Existing SIP

☐ Change of OTM Bank for Existing SIP

INVESTOR DETAILS

Mandatory	Name of the First Holder									
	Folio No. <input type="text"/>									
	PAN/PERN (mandatory) <input type="text"/>									
	Enclosed <input type="checkbox"/> PAN/PERN Proof <input type="checkbox"/> KYC Compliant									

MODIFICATION IN EXISTING SIP [Please tick (✓)]

Particulars	Existing Details	Modification/ New Scheme details (Mention below only the details to be changed)
Scheme Name	Bandhan	Bandhan
Plan	<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Regular <input type="checkbox"/> Direct
Option/Sub Option		
SIP Installment Amount	Rs.	Rs.
SIP date	<input type="text"/>	<input type="text"/>
End Month Year	<input type="text"/>	<input type="text"/>
SIP Frequency	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly

CHANGE OF OTM FOR EXISTING SIP [Please tick (✓)]

New Bank Name		<input type="checkbox"/> To be registered (Attach OTM form given below, duly signed along with cancelled cheque of new bank account)
New Bank Account Number		
Existing OTM (UMRN)		<input type="checkbox"/> OTM is already registered

DECLARATION & SIGNATURE

I/We have read and understood the contents of the Scheme Information Document(s)/Key Information Memorandum(s) & Statement of Additional Information(s) of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations of the Scheme(s) as on the date of this transaction. 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. I/We hereby confirm that I/we have not been offered/communicated any indicative portfolio and/or any indicative yield for this investment. I/We hereby declare that I am/we are not US Person(s). 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. 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 266 6688 / 1800 300 66688.

Signature of Sole/First Applicant	Signature of Second Applicant	Signature of Third Applicant
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Bandhan One Time Mandate (OTM)

UMRN <input type="text"/>		Date <input type="text"/>	
Sponsor Bank Code <input type="text"/>	FOR OFFICE USE ONLY	Utility Code <input type="text"/>	FOR OFFICE USE ONLY
Tick (✓) <input type="checkbox"/> CREATE <input type="checkbox"/> MODIFY <input type="checkbox"/> CANCEL	I/We hereby authorize <input type="text"/> Bandhan Mutual Fund to debit tick (✓) <input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other		
Bank A/c. number <input type="text"/>			
with Bank <input type="text"/>	IFSC <input type="text"/>	or MICR <input type="text"/>	
an amount of Rupees <input type="text"/>	₹ <input type="text"/>		
FREQUENCY <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Half Yearly <input checked="" type="checkbox"/> Yearly <input checked="" type="checkbox"/> As & when presented	DEBIT TYPE <input checked="" type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount		
PAN / Application No. <input type="text"/>	Mobile No. <input type="text"/>		
Reference <input type="text"/>	Email ID <input type="text"/>		

I agree for the debit mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule for charges of the bank.

PERIOD

From	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
To	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Or <input checked="" type="checkbox"/> Until Cancelled							

Signature of Primary Account Holder _____ Signature of Account Holder _____ Signature of Account Holder _____

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

- This is to confirm the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account, based on the instructions as agreed & signed by me.
- 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 authorised the debit.

ACKNOWLEDGMENT - FORM FOR SIP MODIFICATION

Folio No.: <input type="text"/>	Date: <input type="text"/>
Investor Name: <input type="text"/>	
Old Scheme: <input type="text"/>	New Scheme: <input type="text"/>

STAMP & SIGNATURE

INSTRUCTIONS

1. All requests for registering the change of scheme of an ongoing SIP, shall be subject to an advance notice of 15 (fifteen) business days.
2. Minimum six instalments for SIP, post modification, should be available for execution of the change. The future instalments will be processed under the new scheme, once the scheme name has been changed, but all other SIP details like instalment date, amount, end date, top-up features etc. shall remain constant.
3. If a one-time mandate(OTM) is already registered for the investor's existing SIP, then the existing SIP will be ceased and the new SIP in the desired scheme will be registered under the existing OTM. Else a new OTM needs to be registered, using the available format.
4. All conditions like exit load, etc. will be applicable as per the new scheme from the date of effective change request date.
5. If existing scheme has additional SIP Top-up, then SIP Top-up will be continuing under the new scheme, subject to eligibility criteria as on the date of request.
6. As per NPCI, mandate can be registered upto 40 years.
7. SIPs can be registered for a maximum period of 40 years.
8. In the scenario where the new OTM is rejected by the banker, the SIP shall also be rejected.
9. AMC reserves the right to reject a request in case of incomplete form, multiple selection in OTM mandate of SIP details.
10. Change in scheme will not be eligible for SIPs registered through Combination SIP registration, or any other special products as introduced by AMC from time to time.
11. Requests once submitted/processed cannot be withdrawn or reversed.
12. All conditions for OTM registration will be applied.
13. For folios of minor investors, investor may choose to write the folio number instead of PAN no in the pan based mandate.
14. For all online investment, the request will be processed only if the signature of the investor is updated in the folio.
15. Cancelled cheque leaf /bank proof needs to be provided along with the OTM request to register new mandate.
16. For Weekly SIP frequency, transfer date will be 7th / 14th / 21th / 28th of a given month.
17. For Monthly / Quarterly SIP frequency, Investor may choose any date from 1st to 31st of a given month.
18. In case the chosen SIP date is not available in a particular month, the SIP instalment will be processed on the last available calendar day of the month. If last available calendar day falls on a non-business day, then the SIP instalment will be processed on the next available business day.

Toll free 1800 266 6688 / 1800 300 66688
Available Between
9:00 am - 6:00 pm on weekdays

Please note our investor
service email id
investormf@bandhanamc.com

www.bandhanmutual.com