

SYSTEMATIC INVESTMENT PLAN (SIP) REGISTRATION CUM MANDATE FORM FOR ECS To. The Trustee Date:_ DBS Chola Mutual Fund I/We have read and understood the contents of the Offer Document of the Scheme(s) and the instructions overleaf. I/We hereby apply for the SIP Enrolment under the following Scheme/Plan (please tick your choice) and agree to abide by the terms and conditions of the Scheme/Plan. First SIP cheque and subsequent via Auto Debit in select cities viz. Ahmedabad, Amritsar, Allahabad, Bangalore, Chandigarh, Chennai, Coimbatore, Calicut, Hyderabad, Kanpur, Kolkata, Lucknow, Ludhiana, Madurai, Mumbai, New Delhi, Pune, Surat, Bhopal, Bhubaneshwar, Indore, Jalandhar, Jodhpur, Jabalpur, Jamshedpur, Jaipur, Panjim, Trivandrum, Varanasi, Vijaywada, Vishakapatnam, Cochin, Trichur, Guwhati, Nagpur, Baroda, Patna, Gwalior, Raipur, Rajkot, Mysore, Udaipur. New Registration Change in Bank Account INVESTOR AND SIP DETAILS Sole / First Investor Name Application No. (In case of new Investor) Folio No. (Existing Investor) _ Scheme* Plan Option & Sub Option Each SIP Amount (Rs.) First SIP Cheque No. Enrolment Period : From Month (Maximum Period Month Year 15 25 of the month.. SIP Auto Debit Date: 25 years) (Note: Please allow minimum 21 working days for auto debit to register and start. Auto debit has to commence within 60 days of 1st SIP Cheque) I/We hereby, authorise DBS Chola Mutual Fund and their authorised service providers, to debit my/our following bank account by ECS (Debit Clearing) / auto debit to account for collection of SIP payments. PARTICULARS OF BANK ACCOUNT Bank Account Holder Name Bank Name Branch Name Account Number Account Type Saving Current Cash Credit 9 Digit MICR Code (Please enter the 9 digit number that appears after your cheque number and also enclose xerox copy of your Cheque leaf) I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in ECS. If the transaction is delayed or effected at all First Account Holder's Signature (As in Bank Records) for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform DBS Chola Mutual Fund about any charges in my bank account. I/We have read and agreed to the terms and conditions mentioned overleaf. Second Account Holder's Signature (As in Bank Records) Available in all Schemes/Plan of DBS Chola Mutual Fund except DBS Chola Liquid Fund DBS Chola Freedom Income - Short Term Fund and DBS Chola Short Term Floating Rate Fund. ** SIP can be opted by giving first cheque for a minimum of either Rs. 1000/- or Rs. 500/- (in case of DBS Chola Tax Saver Fund) and thereafter minimum 5 or 11 transfer instructions Third Account Holder's Signature (As in Bank Records) for minimum of Rs. 1000/- or Rs. 500/- each respectively For Office Use only (Not to be filled in by Investor) Recorded on Scheme/ Plan Recorded by Scheme Code Credit Account Number Authorisation of the Bank Account Holder This is to inform I/We have registered for the RBI's Electronic Clearing Service (Debit Clearing) and that my payment towards my investment in DBS Chola Mutual Fund shall be made from my/ First Account Holder's Signature (As in Bank Records) our below mentioned bank account with your bank. I/We authorise the representative carrying this ECS Mandate Form to get it verified & executed. Second Account Holder's Signature (As in Bank Records) Third Account Holder's Signature (As in Bank Records) **Account Number**