

**ECS Facility available only in the following locations**

• Agra • Ahmedabad • Allahabad • Amritsar • Aurangabad\* • Bangalore • Baroda • Bhopal  
 • Bhubaneswar • Chandigarh • Chennai • Cochin • Coimbatore# • Delhi • Guwahati  
 • Hyderabad • Indore • Jaipur • Jalandhar • Kanpur • Kolhapur\* • Kolkata • Lucknow • Ludhiana  
 • Madurai<sup>Δ</sup> • Mangalore • Mumbai • Nagpur • Panjim • Patna • Pune • Rajkot • Surat • Trichur  
 • Trichy<sup>◊</sup> • Trivandrum • Varanasi • Vijaywada • Vizag

(\*1st & 7th of every month) (#1st, 7th, 14th, 20th & 25th of every month) <sup>Δ</sup>1st & 7th of every month) <sup>◊</sup>7th of every month)  
 Application should be submitted at least 40 days before the start of the Auto Debit.  
 (Applicable select SIP dates only on 1st, 7th, 14th, 20th & 25th of every month)



**SUNDARAM BNP PARIBAS**  
**MUTUAL**

## SIP Auto Debit Facility

**REGISTRATION CUM MANDATE FORM FOR ECS (Debit Clearing)**

**First SIP Cheque** and subsequent via **Auto Debit** in select cities only.

(Application should be submitted at least Forty days before the 1st Auto Debit start date)

Broker/Agent Name & Code	Sub-Broker's Name & Code

**Investor and SIP details**

Name of First Holder	Salutation <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof.	PAN Number *	MIN Number *	PA holder MIN No.*
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Second Holder	Salutation <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof.	PAN Number *	MIN Number *	PA holder MIN No.*
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Third Holder	Salutation <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof.	PAN Number *	MIN Number *	PA holder MIN No.*
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Application Number	Folio Number	Scheme Name		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Option	Each SIP Amount (Rs.)	Frequency		
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Monthly <sup>◊</sup> <input type="checkbox"/> Quarterly <sup>◊</sup>		
First SIP Transaction via Cheque No.	SIP Period	Start From	End On	
<input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

(Note: Cheque should be drawn on bank details provided below)

◊One Cheque

I/We hereby, authorise Sundaram BNP Paribas Mutual Fund and their authorised service providers, to debit my/our following bank account by DCS (Debit Clearing) for collection of SIP payments.

**Particulars of Bank Account**

If the investor is a minor please provide the Parent/Guardian bank account details for ECS debit

Bank Name

Branch Name

Account Number

Account Type  
☐ Savings ☐ Current ☐ Cash Credit ☐ NRE ☐ NRO

9 digit MICR Code (Please enter 9 digit number that appears after your cheque number)

Accountholder Name as in Bank Account

**Signatures (As in the bank records)**

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 not effected at all for reasons of incomplete or incorrect information. I/We would not hold the user institution responsible. I/We will also inform Sundaram BNP Paribas Mutual Asset Management Co. Ltd. about any changes in my bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

First Holder \_\_\_\_\_

Second Holder \_\_\_\_\_

Third Holder \_\_\_\_\_

**Authorisation of the Bank Account Holder (to be signed by the Investor)**

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 Sundaram BNP Paribas Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorise the representative carrying this ECS mandate Form to get it verified and executed.

Signatures (As in Bank Records)

First Holder \_\_\_\_\_

Second Holder \_\_\_\_\_

Third Holder \_\_\_\_\_

Bank Account Number

### SIP Auto Debit: Terms and conditions

1. The SIP Auto Debit facility is offered to you using RBI's Electronic Clearing Service (ECS) for effecting SIP payments. By opting for this facility, you agree to abide by the terms and conditions of ECS facility of Reserve Bank of India.
2. The cities provided above in the list may be modified / updated / changed / removed at any time in future entirely at the discretion of Sundaram BNP Paribas Mutual Fund without assigning any reasons or prior notice.
3. Your Bank Branch through which you want your SIP Auto-Debits to take place should participate in local MICR Clearing. In case your bank decides to cross-verify the ECS auto- debit mandate with you as the Bank's customer, you would need to promptly do the same. Sundaram BNP Paribas Mutual Fund, its Investment Manager, Registrar and other service providers will not be liable for any transaction failures due to rejection of the transaction by your bank / branch or its refusal to register the SIP mandate.
4. You will not hold Sundaram BNP Paribas Mutual Fund, its Investment Manager, Registrar and other service providers responsible if the transaction is delayed or not effected or your bank account is debited in advance or after the specific SIP date due to various clearing cycles of ECS. Sundaram BNP Paribas Mutual Fund, its Investment Manager, Registrar and other service providers shall not be responsible and liable for any damages / compensation for any loss, damage, etc. incurred by you as a result of use of this facility by you.
5. Sundaram BNP Paribas Mutual Fund holds the right to reject application forms with incomplete information regarding SIP preferences. Such applications along with the cheque will be returned to the investor with a communication to that effect.
6. SIP is available only on select dates, ie., 1st, 7th, 14th, 20th & 25th of every month.
7. Auto Debit SIP Application must be submitted 40 days before the start of the Auto Debit.

### For Office Use only (Not to be filled in by investor)

Recorded on

Recorded by

Scheme Code

Credit Account Number