MUTUAL FUNDS Aditya Birla Sun Life Mutual Fund



One Time Debit Mandate Form NACH / Auto Debit - For SBI [Applicable for Lumpsum Additional Purchases as well as SIP Registrations] (PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM.) Request for Registration Registration Cancellation Date D D M M Y Y Y Existing Investor Folio No. Application No. FIRST / SOLE APPLICANT INFORMATION (MANDATORY) Mobile No. Email Id. NAME OF FIRST / SOLE APPLICANT Mr Ms. M/s. NAME OF THE GUARDIAN (In case of minor) Mr. Ms. M/s. RELATIONSHIP OF GUARDIAN NAME OF THE SECOND APPLICANT Mr. Ms. M/s. NAME OF THE THIRD APPLICANT Mr. Ms. M/s. FIRST APPLICANT PAN* (Mandatory) SECOND APPLICANT PAN* (Mandatory) THIRD APPLICANT PAN* (Mandatory) KYC Mandatory KYC Mandatory KYC Mandatory GUARDIAN/ POA HOLDER PAN* (Mandatory) KYC Mandatory I have attached cancelled copy of cheque I/We understand that this Facility enables the Unit Holder/s of Aditya Birla Sun Life Mutual Fund ('Fund') to transact with in a simple, convenient and paperless manner by submitting 0TM - One Time Mandate registration form to the Fund which authorizes my/our bank to debit my/our account up to a certain specified limit per day, as and when we wish to transact with the Fund, without the need of submitting cheque or fund transfer letter with every transaction thereafter. I/We understand that having registered for this Facility, it enables starting a Systematic Investment Plan (SIP) or invest lump sum amounts in any Open Ended Scheme of the Fund by sending instructions through Transaction forms, Online facility, Short Messaging Service ('SMS') or any other mode as specified by AMC from time to time. I/We confirm that details provided by me/us are true and correct. I / We have read and understood the Scheme Information Document / Statement of Additional Information and Key Information Memorandum, Addendum issued from time to time of the Scheme(s) of Aditya Birla Sun Life Mutual Fund. Signature(s) (To be signed by All Applicants if mode of operation is Joint) DEBIT MANDATE-ONE TIME MANDATE / NACH / AUTO DEBIT [Applicable for Lumpsum Additional Purchases as well as SIP Registrations] Please attach a cancelled cheque/cheque copy Date UMRN (tick√) ☑ CREATE Sponsor Bank Code Utility Code Office use only ADITYA BIRLA SUN LIFE MUTUAL FUND to debit (tick√) SB / CA / CC / SB-NRE / SB-NRO / Other I/We hereby authorize: ▼ CANCEL Bank A/c No.: With **IFSC** OR MICE State Bank of India Bank: an amount of Rupees Quarterly Half Yearly Yearly FREOUENCY ── Monthly As & when presented DEBIT TYPE ☐ Fixed Amount ☑ Maximum Amount Reference 1 Folio No: Mobile Reference 2 Email: 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 bank. PERIOD From to

Declaration: This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing Aditya Birla Sun Life Mutual Fund to debit my account based on the instructions as agreed and signed by me. I have understood that I am authorised to cancel/amend this mandate by appropriately communicating $the \, cancel lation/amendment \, request \, to \, A dity a \, Birla \, Sun \, Life \, Mutual \, Fund \, or \, the \, bank \, where \, I \, have \, authorised \, the \, debit.$

Name as in bank records (mandatory)

Acknowledgement Slip	nowledgement Slip (To be filled in by the Investor)															ONE TIME DEBIT MANDATE FORM NACH / AUTO DEBIT		
Application / Folio No.															Request for	Registration Cancellation	4	Collection Centre / ABSLAMC Stamp & Signature

Aditya Birla Sun Life AMC Limited (Investment Manager to Aditya Birla Sun Life Mutual Fund)

(Formerly known as Birla Sun Life Asset Management Company Limited)
Regn. No.: 109. Regd Office: One Indiabulls Centre, Tower 1, 17th Floor, Jupiter Mill Compound,

or

☐ Until Cancelled

Received from Mr. / Ms. _

841, Senapati Bapat Marg, Elphinstone Road, Mumbai - 400013 +91 22 4356 7000 | care.mutualfunds@adityabirlacapital.com | www.adityabirlasunlifemf.com | CIN: U65991MH1994PLC080811

Name as in bank records (mandatory)

Contact Us: 1800-270-7000

adityabirlacapital.com



Name as in bank records (mandatory)

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INSTRUCTIONS FOR ONE TIME MANDATE FORM

- UMRN is auto generated during mandate creation and is mandatory to be updated during amendment and cancellation of mandate (Maximum Length 20 Alpha Numeric Characters)
- Date is in DD/MM/YYYY format
- Sponsor bank IFSC/MICR code. left padded with zeroes where necessary. (Maximum length 11 Alpha Numeric Characters)
- Utility Code of the Service Provider.(Maximum length 18 Alpha Numeric Characters)
- Name of Service Provider
- Tick on box to select type of action to be initiated
- Tick on box to select type of account to be affected
- Customer's legal account number, (Maximum length 35 Alpha Numeric Characters)
- Name of Bank
- IFSC/MICR code of customer bank. (Maximum Length 11 Alpha numeric Characters for IFSC & 9 Numeric for MICR code)
- Amount payable for service or maximum amount per transaction that could be processed in words
- Amount in 🛮 gures, similar to the amount mentioned in words. (maximum Length 13 digit Numeric in paise)
- Services Provider generated consumer reference number
- Services Provider generated consumer reference Service Provider generated Scheme/ Plan reference number
- Tick on box to select frequency of transaction
- Validity of mandate with dates in DD/MM/YYYY format
- · Name of Customer/s and signature/s as well as seal of company (where required). (Maximum length of Name 40 Alpha Numeric Characters)
- Undertaking by customer
- Permanent ID of customer e.g. PAN/Aadhaar No.
- Telephone no. with STD code of customer
- 10 digit mobile number of customer
- Mail ID of customer