

PAN BASED NACH MANDATE CUM SIP REGISTRATION FORM



Please read product labeling details available on cover page and the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required. Please refer the SIP : Terms & Conditions while filling up the Form. Tick (✓) whichever is applicable, strike out whichever is not required.

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Schemes covered by this KIM)

Distributor / Broker ARN	Sub-Broker Code	Sub-Broker ARN	EUIN	LG Code	RIA Code
157526			E286497		

Upfront commission shall be paid directly by the investor to the AMFI registered distributor, based on the investor's assessment of various factors, including the service rendered by the distributor.

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.

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Please refer instructions for filling up the Application Form - VIII)

I confirm that I am a First time investor across Mutual Funds. (₹ 150 deductible as Transaction Charge and payable to the Distributor)

I confirm that I am an existing investor across Mutual Funds. (₹ 100 deductible as Transaction Charge and payable to the Distributor)

In case the subscription amount is ₹ 10,000/- or more and your distributor has opted to receive Transaction Charges, they are deductible, as applicable, from the purchase / subscription amount and payable to the distributor. Units will be issued against the balance amount.

■ New Registration with BMF ■ Change in Bank Account for existing Registration with BMF ■ SIP Cancellation

First SIP cheque and subsequent via Auto Debit / ECS if the Bank is not participating in ACH Platform. (Please attach copy of cheque / cancelled cheque)

PAN DETAILS (Mandatory) *If the First Applicant is a Minor, please state the details of Guardian. # Please attach PAN proof. *(Refer Instruction IV)

First/Sole Applicant*	Second Applicant	Third Applicant
-----------------------	------------------	-----------------

MICRO SIP (Only for Micro SIP - for aggregate investment not exceeding ₹ 50,000 in a financial year)

										Signature
--	--	--	--	--	--	--	--	--	--	-----------

INVESTOR AND INVESTMENT DETAILS

Sole / First Investor Name									
Folio / Application No.					(Existing Investors : please mention Folio Number)				
Scheme					Option and Sub Option				

SIP AND PAYMENT DETAILS

Each SIP Amount (₹)	Frequency	<input type="checkbox"/> Monthly (Default)	<input type="checkbox"/> Calendar Quarter	Status:	<input type="checkbox"/> RI	<input type="checkbox"/> NRI
---------------------	-----------	--	---	---------	-----------------------------	------------------------------

Amount in words										
-----------------	--	--	--	--	--	--	--	--	--	--

1 st SIP Cheque Details	Cheque No.	Date	D	D	M	M	Y	Y	Y	Y
------------------------------------	------------	------	---	---	---	---	---	---	---	---

SIP Auto Debit Dates	<input type="checkbox"/> 1st	<input type="checkbox"/> 10th	<input type="checkbox"/> 15th	<input type="checkbox"/> 25th of the month	SIP Period	Start Form	D	D	M	M	Y	Y	Y	Y	End On	D	D	M	M	Y	Y	Y	Y
----------------------	------------------------------	-------------------------------	-------------------------------	--	------------	------------	---	---	---	---	---	---	---	---	--------	---	---	---	---	---	---	---	---

SIP date should be either 1st / 10th / 15th / 25th (Note: Cheque should be drawn on bank details provided below) (Note: Please allow minimum one month for auto debit to register and start). OR Perpetual Until Cancelled (99 years) (Default)

I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the Scheme. I/We hereby declare that I/We do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year. I/We have neither received nor been induced by any rebate or gifts directly or indirectly in making this Systematic Investment. The ARN holder has disclosed to me/us all the commissions (in trail commission or any other), payable to him for the different competing schemes of mutual funds from amongst which the Scheme is being recommended to me/us. I/We hereby declare that the particulars given here are correct and express my/our willingness to make payments referred above through direct debit/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 Baroda Mutual Fund, Baroda Asset Management India Limited, its investment manager, or any of their appointed service providers or representatives responsible. I/We will also inform Baroda Asset Management India Limited about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

1st A/c Holder's Signature (as per Mutual Fund Record) / POA / Guardian	2nd A/c Holder's Signature (as per Mutual Fund Record) / POA / Guardian	3rd A/c Holder's Signature (as per Mutual Fund Record) / POA / Guardian
---	---	---

DEBIT MANDATE FOR NACH



UMRN For Office Use Only Date

Sponsor Bank Code For Office Use Only Utility Code For Office Use Only

Tick (✓)
 Create
 Modify
 Cancel

I/We hereby authorize **BARODA MUTUAL FUND** To debit (tick ✓) SB / CA / CC / SB NRE / SB NRO / Other

Bank A/c. Number

With Bank Investor Bank Name and Branch IFSC or MICR

An Amount of Rupees ₹

FREQUENCY Mthly Qtrly H-Yrly Yrly As & when presented DEBIT TYPE Fixed Amount Maximum Amount

Folio No. Phone No.

PAN No. Email ID

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

PERIOD	From <input type="text"/>	Signature Primary Account holder	Signature Account holder	Signature Account holder
To <input type="text"/>				
Or <input checked="" type="checkbox"/> Until cancelled		1. Name as in Bank Records	2. Name as in Bank Records	3. Name as in Bank Records

Declaration: This is to confirm that 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 instruction as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / Corporate of the bank where I have authorized the debit.

Systematic Investment Plan (SIP) : Terms & Conditions

1. In case of new applications, kindly attach duly filled in application form along with registration cum NACH (National Automated Clearing House) mandate form. Any other format of request will be rejected.
2. Completed application form, SIP auto debit/NACH form & first cheque should be submitted at Baroda Asset Management India Limited (AMC) offices or KARVY ISC's atleast 30 days prior to first SIP cycle date.
3. New investor in to the Fund should mandatorily give a cheque for the first transaction drawn on the same bank account which is to be debited under NACH/Auto Debit. In case the 1st cheque is issued from an A/c which is different from NACH /auto debit A/c, then a copy of cheque from NACH/ auto debit A/c as mentioned on the application form should be submitted.
4. The bank mentioned in NACH request must participate in local MICR clearing. MICR code starting and/or ending with "000" are not valid for NACH.
5. The AMC, the Registrar and other service providers shall not be responsible and liable for any financial loss that may be incurred by the investor with regard to SIP registration process, including any issue relating to NACH or auto debit registration.
6. Should the investor wish to cancel the SIP registration, the cancellation request shall be submitted 21 working days prior to the next SIP cycle date.
7. Should the investor wish to change the Bank Mandate any time during the currency of SIP, he / she should tick the appropriate box in the Mandate Form, fill in the revised bank details and submit the same to AMC or its Registrar and Transfer Agent. Such revised form must be submitted 30 days prior to the next SIP Cycle date.
8. Existing investors who wish to restart their SIPs, are required to submit NACH form duly signed by the bank account holder(s), indicating the existing Folio No. & investment details in the Form & submit the same along with the copy of a cancelled cheque / photocopy of the cheque, drawn on the same bank account registered in the SIP form.
9. Should an investor opt for a monthly SIP, the minimum number of months for which the investment will have to be made (SIP Period) shall be 6 months and the minimum investment amount (SIP Amount) shall be ₹ 1,000/- per month. Should the investor opt for a quarterly SIP, the SIP Period shall be 4 quarters and the SIP Amount shall be ₹ 1,500/- per quarter. Investors should note that the first SIP cheque and subsequent SIP installments should be of the same amount.
10. The Registrar will reject a Micro SIP application where it is found that the registration of the application will result in the aggregate of Micro SIP installments in a financial year exceeding Rs.50,000 or where there is any deficiency in the application form or any supporting document. In case the first Micro SIP installment is processed (as the cheque may be banked), and the application / supporting document is found to be defective, the Micro SIP will be ceased for future installments. No refunds shall be made for the units already allotted. Investor, can however, redeem the units if so desired.
11. The investor(s) agrees to discharge the responsibility expected of him/them as a participant/s under NACH and hereby confirm adherence to the terms of the mandate. The investor(s) has/have authorized use of their contact details mentioned on the form/NACH mandate for the purpose of processing the mandate instruction and further authorize the bank(s) to debit the investor's account for any charges towards mandate verification, registration, transactions, etc. as may be applicable.

Instructions to fill in SIP NACH Mandate

Following fields need to be filled mandatorily.

1. Date: In format DD/MM/YYYY.
2. Select the appropriate checkbox to create, modify or cancel the mandate.
3. Sponsor Bank Code and Utility Code to be left blank.
4. Bank A/c Type: Tick the relevant box.
5. Fill Bank Account Number.
6. Fill name of Destination Bank.
7. IFSC / MICR code: Fill respective code.
8. Mention amount of mandate.
9. Select frequency of mandate.
10. Mention Folio Number.
11. Mention Scheme Name.
12. Telephone Number.
13. Email ID (Optional).
14. Period: Starting and Ending dates of NACH registration (in format DD/MM/YYYY). For perpetual SIP, please leave the end date blank and select "until cancelled".
15. Signature as per bank account.
16. Mention Holder Name as per Bank Record.
17. Auto Debit/NACH Mandate is applicable for both Individual and Non-Individual.
18. Auto Debit/NACH Mandate request is liable to be rejected only if the "Bank" mentioned in the request form is listed in the NACH banks list.
19. Baroda will initiate debit instructions to the investor bank account only on receipt of valid investment instruction from the investor.