SYSTEMATIC INVESTMENT PLAN (SIP)

(Applicable for Lumpsum Additional Purchase as well as SIP Registration)

LUMPSUM / SIP AUTO DEBIT / NACH / ECS FORM (for Lumpsum Investment please fill 6)

New Investor are requested to fill in the Common Application form. First SIP Cheque and subsequent via Auto Debit in selected cities only.

DISTRIBUTOR / ARN CODE / RIA		Employee Unique	Indentification Number (EUIN	l)*	RM CODE	DATE & TIME OF RECEIPT	
157526			E286497			FOR OFFICE USE ONLY	
	aid directly by the Investor	to the AMFI registered d	istributors based on the investor's	assessment of vario	ous factors Including the se	ervice rendered by the distributor	
						elationship manager/sales person of the above or has not charged any advisory fees on	
Sole/1 st applicant/Guardian/Authorised Signatory/POA Hole		older	er 2nd Applicant/Authorised Signatory/F		3rd Applicant/Authorised Signatory/POA Holder		
REGISTRATION CUM	MANDATE FORM F	OR SIP THROUGH	NACH, AUTO DEBIT O	R ECS (Debit Cle	earing/Auto Debit)		
(Please 🗸)	☐ New Registration		newal of SIP	Change in Bank Detai	ls Cance	ellation of SIP	
* if you are a new investor kindly	- ''						
I confirm that I am a First Ti (Rs. 150/-will be deducted as transact If the total commitment of investment to to SIP) from the installment amount ar	me Investor in Mutual Funds tion charges for transaction of Rs. 10,00 hrough SIP (i.e. installments) amou d paid to the distributor. Transaction	0/- and more) nts to Rs. 10,000/- or more and	(F	confirm that I am an Example: as 100/- will be deducted as trainen 'opt in' option of chargin	xisting Investor in Mutual Fu ansaction charges for transaction of Ri g transaction charge, the same a	inds	
INVESTOR AND INVE	STWENT DETAILS						
Sole/First Investor Name					□ 10/0 P f		
PAN/PERN			E ve		KYC Proof		
Folio/Application No.	Dandan		Existin	g Investors please mer	ITION FOIIO NO.		
Scheme	Peerless	0.5	Oth	010"	2::1 12: 1 1/1	(II)	
Plan	☐ Direct ☐ Regular		Growth Dividend	<u>:</u>	Dividend Reinvestment (de	efault) Dividend Payout	
Divdend Frequency	Normal Dai		Monthly Quarterly	Half Yearl		Statement of Additional Information Discourse	
						Statement of Additional Information . Please se	
•••			al Investors have to mandatorily fill				
•	ck on any 1 SIP frequen	cy only. In case the S	IP frequency opted for is eith	er Monthly, Quarte	erly or Half Yearly, plea	ase tick on any 1 SIP date only)	
Each SIPAmount (Rs)							
First SIP Cheque No.			Cheque Amount (Rs)		Chec	que Date :	
Frequency	Fortnightly Mo		<u> </u>	SIP Period	tart M M Y	Y End M M Y	
SIP Date	Wednesday 1st	☐ 7th ☐ 10th	☐ 15th ☐ 20th ☐ 25th		Regular Per	petual	
Signature(s) 1st Ap To be signed by ALL UNIT HOL	plicant / Guardian / Authorised DERS if mode of holding is		2nd Applicant / Authorised	Signatory	3rd Ap	oplicant / Authorised Signatory	
LUMPSUM / NACH / E	CS / DIRECT DEBIT	/ MANDATE INST	RUCTIONS FORM (applical	ole for LUMPSUM add	ditional purchase as well as	SIP registeration)	
Peerless MUTUAL FUND UMRN					Date D	D M M Y Y Y	
Sponsor Bank Code (Tick ☑)			Utility C	ode			
CREATE I/We hereby	authorize PEERLESS	MUTUAL FUND		to d	ebit(Tick ✓) SB / (CA / CC / SB-NRE / SB-NRO / Other	
MODIFY Bank a	/c number						
with Bank	Name of customers	bank	IFSC		or MICR		
an amount of Rupees						Rs.	
Frequency Monthly	□ Quarterly □ Half	Yearly 🖂 Yearly	✓ As and when presente	d	DEBIT TYPE Fix	ed Amount Maximum Amount	
Reference 1 Folio No.:				Mobile N	lo.		
Reference 2 Scheme / Plan	n: All schemes of Peerles	s Mutual Fund		Email ID			
Agree for the dehit of mandate	processing charges by the h	ank whom I am authorizin	g to debit my accounts as per lates	t schedule of charges	of the bank		
Period From	p. 50000mg charges by tile b	whom I am authorized	a to acont my accounts as per lates	. Jonedale of charges	o. the wanti		
То		1. Signature Prir	nary Account holder 2.	Signature of Acco	unt holder 3.	Signature of Account holder	
	at the declaration has been car	efully read, understood & m	n bank records 2. ade by me/us. I am authorizing the us ating the cancellation / amendment re		ebit my account, based on the	Name as in bank records instruction as agreed and signed by me. I have re I have authorized the debit.	
Acknowledgment Slip (To be f	lled in by the investor)	SII	through Lumpsum / ECS / Auto	Debit Form		Peerless mutual fun	
Received from Mr./Ms./M/s An application for Scheme :		Plar	 I:	Option :		Collection Centre's Stamp & Receipt Date and Time	
Amount :	Frequency :		Date of Commenceme	ent :			