

1. Distributor Information				Application No.
Distributor Code	Sub-Broker Code	Internal Sub-Broker Code	EUIN*	RIA CODE*
ARN-307640	ARN -	INTERNAL CODE	E584535	

\*Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker".  
 Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. For Direct investments, please mention 'Direct' in the column 'Distributor Code'.  
 \*I/We, have invested in the below mentioned scheme of Samco Mutual Fund under the Direct Plan. I/We hereby give my/our consent to share/provide the transaction data feed / portfolio holdings / NAV etc. in respect of this particular transaction, to the SEBI Registered Investment Advisor (RIA) bearing the above mentioned registration number.

Signature (s)	SOLE / FIRST APPLICANT	SECOND APPLICANT	THIRD APPLICANT

TRANSACTION CHARGES for ₹10,000/- and above (✓ any one) : ☐ I am a first time investor across Mutual Funds OR ☐ I am an existing investor in Mutual Funds. In case the subscription amount is ₹10,000/- or more and your distributor has opted to receive transaction charges, ₹150/- (for first time mutual fund investor) or ₹100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

Mode of Holding	
(In case of Demat Purchase Mode of Holding should be same as in Demat Account)	<input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor (Default)

1. Applicant Information	(Mandatory) to be filled in block letters	(Refer Instruction No.II)
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Folio No.		(For Existing unit holders)	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Transgender
Name of Solo / 1 <sup>st</sup> Applicant	Mr. / Ms. / M/s.					
PAN		CKYC No.		Date of Birth	D D M M Y Y Y Y	
Mailing address						
City		State		Pin code		
Mobile No.		Email ID				
The Email ID belongs to (Mandatory Please ✓) <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependents <input type="checkbox"/> POA <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian The Mobile No. belongs to (Mandatory Please ✓) <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependents <input type="checkbox"/> POA <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian						
Please note: In the event that the mobile number or the email id provided herein above does not appear to be that of the unit holder's, then the AMC shall send suitable communication in this regard to the unit holder.						
LEI Code		Valid upto	D D M M Y Y Y Y			

(Legal Entity Identifier Number is Mandatory for transaction value of INR 50 crore and above for Non-Individual investors. Refer instruction no. XXII)

Second Applicant
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Mr. / Ms.		Date of Birth	D D M M Y Y Y Y			
PAN		CKYC No.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender	
Mobile No.		Email ID				
The Email ID belongs to (Mandatory Please ✓) <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependents <input type="checkbox"/> POA <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian The Mobile No. belongs to (Mandatory Please ✓) <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependents <input type="checkbox"/> POA <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian						

Third Applicant
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Mr. / Ms.		Date of Birth	D D M M Y Y Y Y			
PAN		CKYC No.		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender	
Mobile No.		Email ID				
The Email ID belongs to (Mandatory Please ✓) <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependents <input type="checkbox"/> POA <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian The Mobile No. belongs to (Mandatory Please ✓) <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependents <input type="checkbox"/> POA <input type="checkbox"/> Custodian <input type="checkbox"/> Guardian						

Received from: Mr. / Ms. / M/s		Application No.	
an application for units of Samco		Plan:	<input type="checkbox"/> Regular <input type="checkbox"/> Direct <input type="checkbox"/> Option: <input type="checkbox"/> Growth <input type="checkbox"/> IDCW
Sub Option:	<input type="checkbox"/> Payout of IDCW <input type="checkbox"/> Reinvestment of IDCW <input type="checkbox"/> Transfer of IDCW (Specify in Target Scheme)		
Target Scheme of Samco		Plan:	<input type="checkbox"/> Regular <input type="checkbox"/> Direct <input type="checkbox"/> Option: <input type="checkbox"/> Growth
vide Cheque No		Dated	D D M M Y Y Y Y
Amount (₹)			
Drawn on Bank		Branch	
Please note: All purchases are subject to realization of cheques and as per applicable load structure (please refer Scheme Information Document)			

**Guardian Details** (In case First / Sole Applicant is minor) / **Contact Person- Designation / POA Holder** ( In case of Non- Individual Investors)

Mr. / Ms.

Date of Birth

D

D

M

M

Y

Y

Y

Y

PAN

CKYC No.

Gender

☐ Male☐ Female☐ Transgender

Mobile No.

Email ID

Relationship with Minor/Designation

The Email ID belongs to (Mandatory Please ✓ )☐ Self☐ Spouse☐ Dependents☐ POA☐ Custodian☐ Guardian

The Mobile No. belongs to (Mandatory Please ✓ )☐ Self☐ Spouse☐ Dependents☐ POA☐ Custodian☐ Guardian

**Date of Birth Proof for minors (Any One)**

☐ Birth Certificate☐ Marksheet (HSC/ICSE/CBSE)☐ School Leaving Certificate☐ Passport☐ Others

**Demat Account Details**

☐ NSDL☐ CDSL

☐ Physical Mode☐ Demat Mode (Mandatory to provide the demat details in case mode of holding tick as demat mode)

NSDL

Beneficiary A/C No.

CDSL

Please Note: Demat Account Details of First / Sole Applicant (Name should be as per demat account) (Note: Please attach copy of Client Master List.)

**Tax Status** (Applicable for First / Sole Applicant)

☐ Resident Individual☐ Foreign National☐ Public Limited Company☐ Government Body☐ AOP / BOI☐ Defense Establishment☐ On behalf of Minor

☐ Sole Proprietorship☐ Private Limited Company☐ Financial Institution☐ Trust / Society / NGO☐ Other

☐ HUF☐ Partnership Firm☐ Body Corporate☐ FII☐ Non Profit Organization / Charities☐ NRI☐ LLP☐ Bank☐ Foreign Portfolio Investor☐ QFI

**Overseas Address**

**Address for Communication** (for NRI applicants) ☐ Indian☐ Overseas

Address (Mandatory for NRI/FII applicant\*)

Country

Zip Code

**Email Communication** ( Please tick ✓ )

Default communication mode is through 'email'. If email address is not provided then please 'Opt-in' to receive below documents in physical copy by ticking the option below:

☐ Annual Report☐ Abridged Annual Report☐ Other Statutory Information

**2. KYC Details** (Mandatory - Refer Instruction No XI for details)

Occupation ( Please tick ✓ )

First Applicant/ Guardian:

☐ Business☐ Service☐ Professional☐ Agriculturist☐ Housewife☐ Student☐ Defence

☐ Bureaucrat☐ Forex Dealer☐ Unlisted Company☐ Body Corporate☐ Listed Company☐ Others

Second Applicant:

☐ Business☐ Service☐ Professional☐ Agriculturist☐ Housewife☐ Student☐ Defence

☐ Bureaucrat☐ Forex Dealer☐ Unlisted Company☐ Body Corporate☐ Listed Company☐ Others

Third Applicant:

☐ Business☐ Service☐ Professional☐ Agriculturist☐ Housewife☐ Student☐ Defence

☐ Bureaucrat☐ Forex Dealer☐ Unlisted Company☐ Body Corporate☐ Listed Company☐ Others

**Gross Annual Income** ( Please tick ✓ )

First Applicant / Non-individuals:

☐ Below 1 Lac☐ 1-5 Lacs☐ 5-10 Lacs☐ 10-25 Lac☐ >25 Lacs - 1 Crore☐ > 1 Crore

OR Net worth (Mandatory for Non - Individuals) ₹ as on 

D

D

M

M

Y

Y

Y

Y

 (Not older than 1 year)

Second Applicant:

☐ Below 1 Lac☐ 1-5 Lacs☐ 5-10 Lacs☐ 10-25 Lac☐ >25 Lacs - 1 Crore☐ > 1 Crore

as on 

D

D

M

M

Y

Y

Y

Y

 (Not older than 1 year)

Third Applicant:

☐ Below 1 Lac☐ 1-5 Lacs☐ 5-10 Lacs☐ 10-25 Lac☐ >25 Lacs - 1 Crore☐ > 1 Crore

as on 

D

D

M

M

Y

Y

Y

Y

 (Not older than 1 year)

CHECKLIST: Please submit the following documents with your application (where applicable). All documents should be original/true copies certified by a Director/Trustee /Company Secretary / Authorised signatory / Notary Public)

Documents	Individual	HUF	Companies / LLP	Societies	Partnership Firms	Investment through POA	Trusts	NRI	FII\$	PIO	FPI#
Copy of PAN Card	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
KYC Compliance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Declaration under FATCA	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Resolution/ Authorization to invest			✓	✓	✓		✓		✓		✓
List of authorized signatories with specimen signatures			✓	✓	✓	✓	✓		✓		✓
Trust Deed							✓				
Ultimate Beneficial Ownership (UBO)		✓	✓	✓	✓		✓		✓		✓
Bye-laws				✓							
Partnership Deed					✓						
Certificate of Registration									✓		✓
Notarized POA						✓					
PIO Card										✓	
Foreign Inward Remittance Certificate										✓	

\$-For FII's copy of SEBI registration certificate should be provided.

# Certificate of registration granted by designated depository participants on behalf of SEBI.

For Individuals ( Please tick ✓ )			
	First Applicant:	Second Applicant	Third Applicant
I am Politically Exposed Person			
I am Related to Politically Exposed			
Not Applicable			

For Non-Individual Investors ( Please tick ✓ )

Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company :

☐ Yes
☐ No
(If No, please attach mandatory UBO Declaration)

Foreign Exchange / Money

☐ Yes
☐ No

Gaming / Gambling / Lottery / Casino

☐ Yes
☐ No

Money Lending / Pawning

☐ Yes
☐ No

Charger Services

Services

3. Non-Profit Organization (NPO)

We are falling under "Non-Profit Organization" [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).

☐ Yes
☐ No

If yes, please quote Registration No. of Darpan portal of Niti Aayog

If not, please register immediately and confirm with the above information. Failure to get above confirmation or registration with the portal as mandated, wherever applicable will force MF / AMC to register your entity name in the above portal and may report to the relevant authorities as applicable. We am/are aware that we may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable.

4. Power of Attorney (POA)

If investment is being made by a Constitutional Attorney, please submit notarised copy of POA

POA NAME

Mr. / Ms. / M/s.

PAN

5. Nomination Details ( Please tick ✓ )

☐ I/We do hereby nominate the undermentioned Nominee(s) to receive the Units allotted to my/our credit in my/our folio in the event of my/our death. I/We also understand that all payment and settlements made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC/Mutual Fund/Trustees. **OR**

☐ I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF Folio/ and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our MF Folio / demat account, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio / demat account.

Nominee details	Nominee 1	Nominee 2	Nominee 3
Name*			
Address of Nominee(s)/ Guardian in case of Minor			
Date of Birth* (in case of Minor)			
Relationship*			
Proportion (%)* (% to aggregate to 100%)			
Name of the Guardian* (to be furnished in case the nominee is minor)			
Mobile / Telephone No. of nominee(s)/ Guardian in case of Minor			
Email ID of nominee(s)/ Guardian in case of Minor			
<div>Nominee/ Guardian (in case of Minor) Identification details – [Please tick any one of following and provide details of same]</div> <div> <input type="checkbox"/> Photograph &amp; Signature <input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar <input type="checkbox"/> Saving Bank account no. <input type="checkbox"/> Proof of Identity ID </div>			

The information marked with (\*) are mandatory fields and cannot be left blank.

Signature (s)

"Should be signed by all unit holders including joint holders, irrespective of mode of holding"

SOLE / FIRST APPLICANT

SECOND APPLICANT

THIRD APPLICANT

## 6. Lumpsum/New SIP-Investment Details\* Choice of Scheme/Plan/Option For SIP Investment Auto-Debit Form is mandatory (Refer Instruction No.VI)

Scheme  Plan: ☐ Regular ☐ Direct  
Option: ☐ Growth ☐ IDCW Sub Option: ☐ Payout of IDCW ☐ Reinvestment of IDCW ☐ Transfer of IDCW (Specify in Target Scheme)  
Target Scheme of Samco  Plan: ☐ Regular ☐ Direct Option: ☐ Growth

## 7. Bank Account Details

Account No  Account Type (Please ✓): ☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR  
Bank Name  Bank Address   
City  Pin  IFSC CODE  MICR CODE

## 8. Payment Details

Mode of Payment (Please ✓) ☐ RTGS/NEFT/Fund Transfer ☐ Demand Draft ☐ Cheque ☐ One time Mandate  
Cheque No/Payment Ref No  Date   
Gross Amount ₹  Net Amount ₹  DD Charges ₹   
Bank Details: ☐ Same as above (Please tick (✓) if yes) ☐ Different from above (Please tick (✓) if it is different from above and fill in the details below)  
Bank/Branch & City   
Account No  Account Type (Please ✓): ☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR

## 9. FATCA/CRS Details - Non Individual Investors should mandatory to fill separate FATCA/CRS details form

(Refer Instruction No.XVI)

The below information is required for all applicants/guardian

	Place / City of Birth	Country of Birth	Country of Citizenship / Nationality			
First Applicant / Guardian			<input type="checkbox"/> Indian	<input type="checkbox"/> U.S.	<input type="checkbox"/> Others	<u>Please Specify</u>
Second Applicant			<input type="checkbox"/> Indian	<input type="checkbox"/> U.S.	<input type="checkbox"/> Others	<u>Please Specify</u>
Third Applicant			<input type="checkbox"/> Indian	<input type="checkbox"/> U.S.	<input type="checkbox"/> Others	<u>Please Specify</u>

Is your Tax Residency/Country of Birth/Citizenship/Nationality other than India? ☐ Yes ☐ No (please ✓)

If yes, please indicate all countries in which you are resident for tax purpose and the associated Tax ID number below, In case of POA, the POA holder should mandatorilly fill Annexure I for complete details.

	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other please specify)	Identification Type (TIN or other please specify)
First Applicant / Guardian				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Second Applicant				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Third Applicant				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C

Reason A - The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents

Reason B - No TIN required (Select this reason only if the authorities of the country of tax residence do not require the TIN to be cancelled)

Reason C - Others please state the reasons thereof

## 10. Declaration and Signature(s)

Having read and understood the contents of the Scheme Information Document (SID) of the scheme applied for and Statement of Additional Information and subsequent amendments thereto including the section on who cannot invest, "Prevention of Money Laundering" and "Know Your Customer", I/We hereby apply to Samco Mutual fund for units of such Scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the Scheme. I/We further declare, I am / we are authorised to invest the amount & that the amount invested by me/us in the above mentioned Scheme(s) is derived through legitimate sources and is not held or designed for the purpose of contravention of any acts, rules, regulations or any statute or legislation or any other applicable laws or notifications, directions issued by the governmental or statutory authority from time to time. It is expressly understood that I/We have the express authority from our constitutional documents to invest in the units of the Scheme(s) and the AMC/Trustee/Fund would not be responsible if the investment is ultra vires thereto and the investment is contrary to the relevant constitutional documents.

I/We undertake that these investments are my/our own and acknowledge that AMC reserves the right to call for such other additional information/documents as required to comply with PMLA/KYC/FATCA norms. I/We hereby, further agree that the Fund can directly credit all the redemption amount to my bank details given above. I/We hereby declare that the particulars stated above are correct.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We further agree that the Fund/AMC can send us all types of SMS relating to the products offered by them. Applicable to investors who have not opted for nomination facility. I/We hereby confirm that it is my/our informed decision not to avail the nomination facility offered by Samco Mutual Fund.

**Applicable to NRI only:** I/We confirm that I am / we are Non Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels from funds in my/our Non-Resident External/Ordinary Account/FCNR Account. Please (u) (Including amount of Additional Purchase Transaction made in future)

☐ Repatriation ☐ Non Repatriation

Date

Place

Signature (s)

SOLE / FIRST APPLICANT

SECOND APPLICANT

THIRD APPLICANT



**Sponsor:** Samco Securities Limited  
**Trustee Company:** Samco Trustee Private Limited  
**Investment Manager:** Samco Asset Management Private Limited

**Samco Mutual Fund**  
1003 - A, Naman Midtown, Senapati  
Bapat Marg, Prabhadevi (W),  
Mumbai - 400 013

# SYSTEMATIC INVESTMENT PLAN (SIP)

Mandate Registration Form

1. Distributor Information				Application No	S
Distributor Code	Sub-Broker Code	Internal sub broker code	EUIN*	RIA Code <sup>a</sup>	
ARN-	ARN-	INTERNAL CODE	Employee Unique IDENTIFICATION NO.		

\*Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker".

<sup>a</sup>I/We, have invested in the below mentioned scheme of Samco Mutual Fund under the Direct Plan. I/We hereby give my/our consent to share/provide the transaction data feed / portfolio holdings / NAV etc. in respect of this particular transaction, to the SEBI Registered Investment Advisor (RIA) bearing the above mentioned registration number.

Sign Here	First / Sole Applicant / Guardian Authorised Signatory	Second Applicant Authorised Signatory	Third Applicant Authorised Signatory

2. Unitholder Information	
Name of First / Sole Applicant	PAN
Folio No. (For Existing Unit Holders)	CKYC No.

3. Investment Details (Choice of Plan [Please ✓])		Registration	Cancellation
Scheme	Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct	Target Scheme of Samco	
Option: <input type="checkbox"/> Growth <input type="checkbox"/> IDCW	Sub Option: <input type="checkbox"/> Payout of IDCW <input type="checkbox"/> Reinvestment of IDCW <input type="checkbox"/> Transfer of IDCW (Specify in Target Scheme)	Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct	Option: <input type="checkbox"/> Growth

SIP Date	<input type="checkbox"/> D <input type="checkbox"/> D Preferred Debit Date (Any day from 1 <sup>st</sup> to 28 <sup>th</sup> of the month)	<input type="checkbox"/> Monthly OR <input type="checkbox"/> Quarterly OR <input type="checkbox"/> Half Yearly
Enrolment Period	From <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y To <input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y OR Perpetual (Default) <input type="checkbox"/> OR No. of Installments	
First SIP Instalment via :	Cheque No.	Bank A/c No.
Drawn on Bank		Branch
Each SIP Amount		Amount in words

SIP Step UP FACILITY:	
Fixed Amount	Variable (in Percentage)
Amount (Minimum 500/- in multiple of Re 1/-)	Percentage (Minimum 10% and in multiple of 5%) ₹
Freeze # <input type="checkbox"/> Amount <input type="checkbox"/> OR Month-Year <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y	Freeze # <input type="checkbox"/> Amount <input type="checkbox"/> OR Month-Year <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y
Frequency \$ <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly	Frequency \$ <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly

\$ In case of Quarterly SIP, only the Yearly frequency is available under SIP TOP UP. # Freeze the SIP Top-Up amount once it reaches a fixed predefined amount or maximum amount as mentioned in OTM.

4. Unit Holding Option		Physical Mode (Default)	Demat Mode (Demat Account details are mandatory if the investor wishes to hold the units in Demat Mode)
CDSL / NSDL DP Name	DP ID	Beneficiary A/C No.	

5. Declaration & Signature(s)	
I/We declare that the particulars furnished here are correct. I/We authorize Samco Mutual Fund acting through its service providers to debit my/our bank account towards payment of SIP installments and/or any lumpsum payments through an Electronic Debit arrangement/NACH (National Automated Clearing House) as per my request from time to time. 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 Samco Mutual Fund about any changes in my bank account. This is to inform you that I/We have registered for making payment towards my investments in Samco Mutual Fund by debit to my/our account directly or through NACH. I/We hereby authorize to honour such payments and have signed and endorsed the Mandate Form. Further, I authorize my representative (the bearer of this request) to get the above Mandate verified. Mandate verification charges, if any, may be charged to my/our account.	
I also hereby agree to read the respective SID and SAI of the mutual fund before investing in any scheme of Samco Mutual Fund using this facility.	
Date	<input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y
Place	First / Sole Applicant Second Applicant Third Applicant



## ONE TIME BANK MANDATE (NACH/OTM/Direct Debit Mandate Form)

UMRN	Date	<input checked="" type="checkbox"/> Create <input type="checkbox"/> Modify <input type="checkbox"/> Cancel
Utility Code	I/We authorize	Samco Mutual Fund
Sponsor Bank Code	Bank A/c No.	
To debit (tick ✓) SB / CA / CC / SB-NRE / SB-NRO / OTHER	IFSC/MICR	
With Bank	an amount of Rupees	Amount ₹
Debit Type <input type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount	Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly <input checked="" type="checkbox"/> As and when presented	
Reference 1	Reference 2	

1. 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 the bank. 2. This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorizing the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/corporation or the bank where I have authorized the debit.

From	To	Maximum period of validity of this mandate is 40 years only.
<input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y	<input type="checkbox"/> D <input type="checkbox"/> D <input type="checkbox"/> M <input type="checkbox"/> M <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y	
Maximum period of validity of this mandate is 40 years only.	Signature of Primary Account holder	Signature of account holder
Phone No.	1. Name as in Bank Records	2. Name as in Bank Records
		3. Name as in Bank Records

## Terms and Conditions

1. Please refer SID for minimum SIP investment amount under the Scheme.
2. Please refer the Key Information Memorandum (KIM) and Scheme Information Document (SID) of the respective Scheme for applicable NAV, risk factors, load (exit/entry) and other information on the respective Scheme before investing.
3. Complete Application form and SIP Mandate Registration Form along with the first cheque if any to be submitted to the AMC/RTA ISC's.
4. Investors can give a cheque for the first Installment. The first cheque should be drawn on the same bank account which is to be registered for NACH. Alternatively, the cheque may be drawn on any bank, for which investor should provide a photocopy of the cheque or cancelled cheque of the bank/branch for which NACH is to be registered.
5. First SIP cheque (if any) and subsequent SIP installments via NACH should be of the same amount.
6. If any chosen day falls on a non business day, the next business day will be considered as the transaction date. However, all SIP installment transactions will be processed after realisation of funds and cut off timings.
7. Incorrect/Incomplete applications are liable to be rejected.
8. Samco Asset Management Private Ltd. reserves the right to reject any application without assigning any reason thereof and the Trustee reserves the right to change/modify the terms and conditions of SIP.
9. NACH instructions will take a minimum of one month for registration with the bank and hence the first debit will be carried out only after one month, on the SIP date mentioned on the form. The AMC reserves the right to modify the SIP period depending on the one month period for registration to ensure minimum number of installments as mentioned in SID.
10. The mandate registration form will be submitted through National Automated Clearing House (NACH) and Banks participating in Direct Debit Facility. This facility is offered to investors having Bank accounts in select banks mentioned in the link under Product and Services tab The Banks <http://www.npci.org.in/> in the list may be modified/updated/changed/removed at any time in future entirely at the discretion of National Payments Corporation of India without assigning any reasons or prior notice. Standing instructions for investors in such Banks will be discontinued. We will inform on such discontinuation.
11. Existing Unit holders in Scheme of Samco Mutual Fund are required to submit only the SIP Mandate registration form. Existing unit holders should note that the unit holder's details & the mode of holding will be as per the existing account. New investors, who wish to enroll for SIP through NACH, should fill the Application Form & SIP Mandate registration form.
12. Initial cheque should be drawn on any bank, which is situated at & is a member of the Banker's Clearing House located at the place where the SIP application is submitted or payable at par & should participate in local MICR clearing. Please contact the nearest designated Investor Service Centre for the updated list. For outstation applications, the initial DD has to be payable at the nearest AMC locations. No outstation cheques will be accepted. The cheque should be drawn in favor of the Scheme chosen and crossed "A/c Payee Only".
13. Payments will be accepted by NACH mode. For this purpose, investors/unit holders are required to give NACH Mandate Form to debit their bank accounts at periodic intervals & credit the subscription proceeds to Samco Mutual Fund Bank Account.
14. Returned/Dishonored cheque/NACH Rejects will not be presented again for collection.
15. The SIP Enrollment will be discontinued in cases where three consecutive SIP installments are not honored or the bank account is closed and no request for change in bank account has been submitted.
16. If investor has not provided the SIP frequency/period/date, the default SIP frequency would be Monthly & the SIP installments would be perpetual. The default date will be considered as 10th of the month for Monthly option.
17. If an Existing investor wants to enroll in another Scheme & continue for the existing folio, then the investor has to submit a duly filled & signed SIP Mandate registration form along with the first cheque (if investment is in the new Scheme).
18. You can choose to discontinue this facility by giving 30 Calendar days written notice to any of AMC/Registrar Investor Service centers.
19. Request for change in bank mandate to be submitted atleast 30 Calendar days before the due date of next SIP installment.
20. The bank account provided for NACH (Debit) should be in the list of banks participating in NACH.
21. MICR code or IFSC code should be mandatory filled on NACH mandate, MICR code starting and/or ending with 000 are not valid for NACH.
22. The investor agrees to abide by the terms and conditions of NACH facility of NPCI as applicable at the time of investment and as may be modified from time to time.
23. The investor undertakes to keep sufficient funds in the account till the date of execution of the debit. The investor hereby declares that the particulars given overleaf are correct and complete. If the date of debit to the investors account happens to be a non Business day as per the fund, execution of the debit will not happen on the day of the holiday and allotment of Units will happen as per the terms and conditions listed in the concerned SID. The Fund, its Registrars, Auto Debit Banks and other service providers shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligation under this agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riots, strike, mutiny, revolution, fire, flood, fog, war, change of government policies, unavailability of banks computer system, force majeure events or any other cause of peril which is beyond their reasonable control and which has the effect of preventing the performance of contract by them.
24. Investors will not hold Samco Asset Management Private Ltd., its registrars, banks and other service providers responsible if the transaction is delayed or not effected or the investor's bank account is debited in advance or after the specific SIP date due to the local holidays or any other reason.
25. Samco Asset Management Private Ltd. reserves the right to reject any application without assigning any reason thereof.
26. Incorrect, incomplete or ambiguous forms will not be accepted and will be returned to the investor within 10 business days via normal post.
27. To avail of SIP in separate Scheme via NACH facility, an investor will have to fill a separate form for each Scheme. A single form cannot be used for different Schemes simultaneously.
28. As per Prevention of Money Laundering Act 2002, it is mandatory for all investors to be KYC compliant. For more details please refer point on "Instructions to Investor" for Filling up the Application Form.
29. **SYSTEMATIC INVESTMENT PLAN (SIP) Step UP FACILITY**
  - a. Investors can opt for SIP TOP UP facility with Fixed Top Up option or Variable Top Up option, wherein the amount of the SIP can be increased at fixed intervals. In case the investor opts for both options, the Variable Top Up option shall be considered.
  - b. The minimum amount for Fixed TOP UP shall be ₹ 500 and in multiple of ₹ 1/- thereof. And for variable TOP UP would be available in at 10%, 15% and 20% and in multiples of 5%.
  - c. The frequency is fixed at Yearly and Half Yearly basis. In case the TOP UP facility is not opted by ticking the appropriate box and frequency is not selected, the TOP UP facility may not be registered. In case of Quarterly SIP, only the Yearly frequency is available under SIP TOP UP.
  - d. Top-Up Cap amount: Investor has an option to freeze the SIP Top-Up amount once it reaches a fixed predefined amount. The fixed pre-defined amount should be same as the maximum amount mentioned by the investor in the bank mandate. In case of difference between the Cap amount & the maximum amount mentioned on Bank mandate, then amount which is lower of the two amounts shall be considered as the default amount of SIP Cap amount. In case the top up amount arrived in decimals the amount will be rounding off in nearest rupee.
  - e. Top-Up Cap month-year: It is the date from which SIP Top-Up amount will cease and last SIP installment including Top-Up amount will remain constant from Cap date till the end of SIP tenure. Investor shall have flexibility to choose either Top-Up Cap amount or Top-Up Cap month-year. In case of multiple selection, Top-Up Cap amount will be considered as default selection.
  - f. In case of no selection, the SIP Variable Top - Up amount will be capped at a default amount of ₹ 10 Lakhs.
  - g. Under the said facility, SIP amount will remain constant from Top - Up Cap date/ amount till the end of SIP Tenure.



## Instructions to fill the nach debit mandate form

1. Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the ones as already existing in the folio, the details provided on the mandate will be updated in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
2. Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/bank account details are subject to third party verification.
3. Investors are deemed to have read and understood the terms and conditions of NACH Facility, SIP registration through NACH facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addendum issued from time to time of the respective Scheme(s) of Samco Mutual Fund.
4. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format
5. Please mention the amount in figures and words.
6. Please fill all the required details in the Debit Mandate Form for NACH. The sole/first holder must be one of the holders in the bank account.
7. The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
8. The 9 digit MICR and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.