Aditya Birla Sun Life Mutual Fund



MUTUAL FUNDS

SIP/CSIP Change in Bank/Change in Scheme/Change in Installment date Application Form (PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM)

Distributor Name & ARN/ RIA No.	Sub Brok	er Name & ARN/ RIA No.	Employee Unique	ID. No. (EUIN)	Official Acceptance Point Stamp & Sig
EUIN is mandatory for "Execution Only" transaction I/we hereby confirm that the EUIN box has been intention twithstanding the advice of in-appropriateness, if an	nally left blank my me,	us as this transaction is executed with		e employee/relationship mar	anager/sales person of the above distributor/sub broker
First Applicant / Authorised Signa	torv	Second 2	Third Applicant		
Request for SIP/CSIP Change in Bank	SIP/ CSIP Chang		e in Installment date(Please	tick any one as applicable	
FIRST / SOLE APPLICANT INFORMATION	V (MANIDATORY)				
Existing Investor Folio No.	(MANDATORY)				
NAME OF FIRST / SOLE APPLICANT Mr. Ms.	M/s.				
EXISTING SIP/CSIP DETAILS	SIP	CSIP (Please tic	k any one as applicable)		
Existing Scheme Name:					
Plan/Option:					
SIP/CSIP Start Date: D D M M	Y Y Y S	P/CSIP End Date:	M M Y Y Y SII	P/CSIP Amount:	
Frequency: Monthly OR Weekly		_(Please specify SIP day)	Installment Date - (incase of mont	thly) Any Date	e between1-28 D D
NEW SCHEME DETAILS					
New SIP/ CSIP Scheme:			Plan/Option:		
New SIP/CSIP Installment Date/Day Any Date	oetween 1-28 (Incase	of Monthly) D OR (Plea	se specify SIP day Incase of v	veekly)	
DETAILS OF EXISTING BANK MANDATE					
Bank Name:		Bank Ac	count Number:		
Please fill in the new Bank Details in th	e mandate form	in case of Change in Bank d	etails.		
Use existing One Time Mandate (To be f	lled in case of more	than one OTM registration)			
Bank Name:		Bank Ac	count Number:		
Competing Schemes of various Mutual Funds from an to change bank account or change in scheme for future (S) Name of First Unit House (S) First Applicant	nongst which the Sche re instalments or cance	me is being recommended to me/us. Halthe existing registrations as stated all Name of Second	aving read and understood the o	ontents of scheme related c s and conditions, rules and r	n or any other mode), payable to him for the different documents and details above I/We hereby request you regulations of the relevant Scheme(s). Name of Third Unit Holder Third Applicant
- *					
DEBIT MANDATE-ONE TIME MANDA	ATE / NACH / AI	JTO DEBIT [Applicable for Lu	mpsum Additional Purchases a	as well as SIP Registration	ns] Please attach a cancelled cheque/cheque copy.
					Date D D M M Y Y Y Y
(tick ✓)	UMRN				
☑ CREATE Sponsor Bank Code		Office use only	Utility Code		Office use only
➤ MODIFY ➤ CANCEL I/We hereby authorize:	ADITYA BIRLA S	UN LIFE MUTUAL FUND	to debit (tick)	✓) □SB □CA □	CC SB-NRE SB-NRO Other
Bank A/c No.:					
	lame & Branch	IFS	c	OF	R MICR
Bank: an amount of Rupees					₹
	y	lv □ Yearly ☑ As & wh	en presented	DEBIT TYPE	
Reference 1 PAN No:		 , _	•	Mobile	
Reference 2 Folio No/ Appln No:			Email:		
I agree for the debit of mar	date processing ch	arges by the bank whom I am au	thorizing to debit my accou	nt as per latest schedule	e of charges of bank.
PERIOD From to	1. Sign	2. Sign		3. Sign	
	Name as in h	ank records (mandatory)	Name as in bank record		Name as in bank records (mandatory)

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 cancellation/amendment request to Aditya Birla Sun Life Mutual Fund or the bank where I have authorised the debit.

TERMS AND CONDITION

- Request for Change in Scheme should be submitted 30 days before the next Debit through NACH/ Auto Debit. In case
 the next SIP/CSIP debit date does not satisfy this condition, the change in scheme will be effected from the
 immediately following month.
- 2. In order to change the existing bank account for OTM/ NACH/ Auto Debit investors need to submit Change in bank request 30 calendar days before the next SIP debit date. In case the next SIP/CSIP debit date does not satisfy this condition, the change in bank will be effected from the immediately following month.
- 3. In order to change the SIP/CSIP Installment date for OTM/ NACH/ Auto Debit investors need to submit the request 30 calendar days before the next SIP debit date. In case the next SIP/CSIP debit date does not satisfy this condition, the change in installment date will be effected from the immediately following month.
- 4. For SI and ECS registrations, it is mandatory to fill One Time Mandate form.
- 5. Incase of a rejection of new bank mandate by investor's banker, SIP would be terminated.
- 6. Incase the existing registeration details mentioned in the form is incorrect the request would be rejected.
- 7. In the event of change in scheme for CSIP, the prospective instalments will continue in the new scheme without impacting their insurance cover.
- 8. Form to be used only for single change request. Incase multiple request opted only first request will be considered.
- 9. Mandate can be issued for a maximum duration of 40 years from the date of issuance.

INSTRUCTIONS FOR ONE TIME MANDATE FORM

- Investors who have already submitted an NACH/AUTO DEBIT form or already registered for NACH/AUTO DEBIT facility should not submit NACH/AUTO DEBIT form again as NACH/AUTO DEBIT registration is a one-time process only for each bank account. However, if such investors wish to add a new bank account towards OTM facility may fill the form.
- · Investors, who have not registered for NACH/AUTO DEBIT facility, may fill the NACH/AUTO DEBIT form and submit duly signed with their name mentioned.
- 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.
- 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.
- Investors are deemed to have read and understood the terms and conditions of NACH/AUTO DEBIT Facility, SIP registration through NACH/AUTO DEBIT facility, the Scheme
 Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of
 Aditya Birla Sun Life Mutual Fund.
- · Please mention the amount in figures and words.
- Please fill all the required details in the Debit Mandate Form for NACH/Auto Debit. The sole/first holder must be one of the holders in the bank account.
- The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
- 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.
- Mandate can be issued for a maximum duration of 40 years from the date of issuance.

Acknowledgement			ISC Stamp
Investor Name:		Folio No/Application No	
☐ DEBIT MANDATE FORM	☐ SIP FORM		