

8. SIP DETAILS

SIP Installment Amount (₹) Amount in words _____

Frequency <input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Quarterly (Please tick any one)	Enrollment Period: (Please ✓ any one) <input type="checkbox"/> Regular From: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> to: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Perpetual From: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> to: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (Default) (Refer Instruction No. 20)		SIP Dates: Please mention the date <input type="text"/> <input type="text"/> in words _____ day of the month. e.g. for SIP on 10th please mention <input type="text"/> <input type="text"/> <u>Tenth</u> day of the month [please refer instruction 21 for any day SIP] Default: 10 th (Tenth)
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9. SIP TOP UP (Optional) (Refer instruction 23)

Top Up Amount* _____ Please Specify _____ *Top Up amount has to be in multiples of Rs. 500 only	Top Up Frequency : <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly (Default) Upper SIP Amount _____ Rs. _____
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10. PARTICULARS OF BANK ACCOUNT

Account holder Name as in Bank Account	<input type="text"/>
Bank Name	<input type="text"/>
Branch Name	<input type="text"/> City <input type="text"/>
9 Digit MICR Code	<input type="text"/> (please enter the 9 digit number that appears after the cheque number)
Account Type (Please Tick)	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR
Core Banking A/c. No.	<input type="text"/>

11. DECLARATION TO THE BANKER

To - Branch Manager, _____ Bank. This is to inform I/We have registered for RBI's Electronic Clearing Service (Debit Clearing)/ Direct Debit/Standing Instruction Facility & that my payment towards my investment in Tata Mutual Fund shall be made from my/our above mentioned bank account with your bank.
 I/We authorize the representative carrying this ECS/Direct Debit/Standing Instruction mandate Form to get it verified & executed. I/We acknowledge that no separate intimation will be received from the Bank in case of non-execution of the instructions for any reasons whatsoever. I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Tata Mutual Fund or the above mentioned Bank responsible. I have read and agreed to the terms and conditions mentioned overleaf. I/We have noted the contents of the Direct Debit Facility Agreement/Standing Instruction entered by Tata Mutual Fund with the Bank & I/we are also bound by the terms thereof. I/We also authorize the Bank to debit my account for charges towards mandate verification & transaction dishonoured due to "insufficient funds" as applicable.

SIGNATURE/S AS PER BANK ACCOUNT (MANDATORY)	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Sole /1st Account Holder's Signature (as in bank records)	2nd Account Holder's Signature (as in bank records)	3rd Account Holder's Signature (as in bank records)

(To be signed as per the mode of operations, i.e. all holders to sign if the mode of operations is Joint)

12. BANKER'S ATTESTATION (FOR BANK USE ONLY)

Certified that the signature of A/c holder and the details mentioned in 'Particulars of Bank A/c' above and its MICR code are correct as per our records	
<input type="text"/>	<input type="text"/>
Signature of Bank Manager with name, Employee code, Bank Seal and Contact Number	Bank Account Number

FOR OFFICE USE ONLY (NOT TO BE FILLED IN BY INVESTOR)

Recorded on <input type="text"/>	Scheme Code <input type="text"/>
Recorded by <input type="text"/>	Credit A/c Number <input type="text"/>

Bank use Mandate Ref. No. _____

Customer Ref. No. _____