

**SYSTEMATIC INVESTMENT PLAN (SIP)**

SIP AUTO DEBIT FORM / ECS form

New Investors are requested to fill in the Common Application form.

First SIP Cheque and subsequent via Auto Debit in selected cities only.

Application No

**1 REGISTRATION CUM MANDATE FORM FOR SIP THROUGH AUTO DEBIT OR ECS**(Please  )  New Registration  Renewal of SIP  Change in Bank Details**2 INVESTOR AND INVESTMENT DETAILS**

Sole/First Investor Name													
Folio/Application No.												Existing Investors please mention Folio No. New applicants please mention the application form No.	
Scheme													
Plan													
Option								**Documents Details (in case of micro SIP)					Document Number (if any)-

\*\*I/We hereby declare that we do not have any existing SIPs which together with the current application in rolling 12th month period or in F.Y. i.e. April to March will result in aggregate investment exceeding Rs. 50,000/- in a year.  
 \*\*SIP where the aggregate of installment values does not exceed Rs. 50,000/- per year (in a rolling 12 month period) or in a financial year i.e. April to March shall be exempted from KYC requirement. However in lieu of KYC, investor has to submit any photo identification document.

**3 SIP DETAILS**

Each SIP Amount (Rs)														
First SIP Cheque No.	Cheque Amount (Rs)					Cheque Dated								
SIP Auto Debit dates	<input type="checkbox"/> 1st	<input type="checkbox"/> 7th	<input type="checkbox"/> 10th	<input type="checkbox"/> 15th	<input type="checkbox"/> 20th	<input type="checkbox"/> 25th	Frequency -	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Half Yearly				
SIP Period	SIP From			M	M	Y	Y	SIP To			M	M	Y	Y

SIP Date should be either 1st / 7th / 10th / 15th / 20th / 25th (Note: Cheque should be drawn on bank details provided below also please allow minimum one month for Auto Debit to register and start.)

I/We hereby, authorise Peerless Mutual Fund and their authorised service providers, to debit my/our following bank account ECS (Debit Clearing) /Auto debit to account for collection of SIP payment  
 First SIP Cheque should be drawn on bank details provided below. Each of the SIP installment including the initial cheque should be of the same amount and there should be a gap of 30 days between the 1st & 2nd SIP installment.

**4 BANK DETAILS (please attach a copy of the cheque of below mentioned bank account)**

Account Holder Name																				
Bank Name								Bank A/c No.												
Branch Name											City									
Account Type	<input type="checkbox"/> Saving	<input type="checkbox"/> Current	<input type="checkbox"/> NRO	<input type="checkbox"/> NRE	<input type="checkbox"/> Others	Please Specify														
MICR Code																				
	IFSC Code																			

I/We hereby declare that the particulars given above are correct and express my willingness to make payment referred above through participation in ECS/Auto debit. If the transaction is delayed or not effected at all reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will inform Peerless Mutual Fund about any changes in my bank account. I/We have read and agreed to the terms and conditions mentioned overleaf. I/We have read and understood the contents of SID/KIM, I/We hereby apply for the respective units of Peerless Mutual Fund scheme at NAV based the resale price and agree to abide by terms, conditions, rules and regulation of the scheme (s).

First Account Holder (As in Bank Records)	Second Account Holder (As in Bank Records)	Third Account Holder (As in Bank Records)
---	--	---

Place : \_\_\_\_\_ Date : DD/MM/YY

**FOR BANK USE ONLY**

I/We hereby certify that the particulars furnished above are correct as per our records and we hereby declare that the copy of this form, duly completed, has been submitted to us.

Recorded On \_\_\_\_\_ Recorded By \_\_\_\_\_

Mandate reference No. \_\_\_\_\_

Branch : \_\_\_\_\_ Date : DD/MM/YY

Signature of the authorised official from the bank	Bank Stamp
--	------------

**AUTHORISATION OF THE BANK ACCOUNT HOLDER**

This is to inform that I/We have registered for the RBI's Electronics Clearing Service (Debit clearing)/ Auto debit facility and that my payment towards my SIP installments of Peerless Mutual Fund shall be made from my/our above mention bank account with your bank. I/We authorise the representative carrying this ECS/Auto debit form to get it verified and executed. I/We hereby authorise you to debit verification charges if any from my account.

First Account Holder (As in Bank Records)	Second Account Holder (As in Bank Records)	Third Account Holder (As in Bank Records)
---	--	---

**Acknowledgment Slip** (To be filled in by the investor)**SIP through ECS /Auto Debit Form**

Received from Mr./Ms./M/s. \_\_\_\_\_

Application No \_\_\_\_\_

An application for Scheme : \_\_\_\_\_

Plan : \_\_\_\_\_

Option : \_\_\_\_\_

Collection Centre 's Stamp & Receipt  
Date and Time

Amount \_\_\_\_\_

Frequency \_\_\_\_\_

Date of Commencement \_\_\_\_\_

Web site [www.peerlessmf.co.in](http://www.peerlessmf.co.in)Toll Free No. 1800 200 9995  
Non Toll Free : 022 61779922[connect@peerlessmf.co.in](mailto:connect@peerlessmf.co.in)