

Name and AMFI Reg. No. (ARN)	Sub Broker's Code	REGISTER's SERIAL NO.
ARN - 0988 Ganesh S. Shanbhag		

SIP AUTO DEBIT (ECS) FORM
1. For Existing Unit holders

First Unit holder	Existing Folio No.	
Sole/First Applicant/ Guardian	Second Applicant	Third Applicant
PAN No.*		
KYC Compliant # (Please ✓)	<input type="checkbox"/> Yes <input type="checkbox"/> NO.	<input type="checkbox"/> Yes <input type="checkbox"/> No

*Mandatory - Please enclose a Certified PAN Card Copy # KYC Mandatory for investment of Rs. 50,000 and above

2. For New Investor - Applicant's Details (Mandatory)

Sole/First Applicant	F I R S T M I D D L E L A S T N A M E									
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3. Systematic Investment Plan (SIP) Details (Mandatory)

Scheme Name															
Plan	<input type="checkbox"/> Growth Option *	<input type="checkbox"/> Divident Payout	<input type="checkbox"/> Divident Reinvestment	<input type="checkbox"/> Bonus Option											
SIP Frequency (Please ✓)	<input type="checkbox"/> Monthly*	or	<input type="checkbox"/> Quarterly	SIP Date (Please ✓)	<input type="checkbox"/> 1st	or	<input type="checkbox"/> 10th	or	<input type="checkbox"/> 25th						
Installment Amount (Rs.)	Rs.	M	T	N	I	M	U	M	Rs.	1	0	0	0		
First SIP Cheque No.				Dated	D	D	M	M	Y	Y	Y	Y			
Drawn on (Bank/Branch Name)															
SIP Auto Debit Period	Start Date	From	M	M	Y	Y	Y	Y	End Date ⁽¹⁾ To	M	M	Y	Y	Y	Y

(The first Auto Debit should be at least 30 days after the first SIP transaction date) (Second Installment) (Last installment)
 (1) If no End date is specified SIP will continue till investor gives a mandate to discontinue the same.
 *Default Option will be applied in case of no information, ambiguity or discrepancy.

4. Particulars of Bank Account (From which money will be debited)

Account holder name as in Bank Account												
Bank Name												
Branch Address	City											
Account No.								MICR Code Mandatory				

For NRI/Fill Investor, please indicate account type of your remittance (Please ✓)	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> FCNR	<input type="checkbox"/> Others Please Specify						
Enclosed (please ✓)	<input type="checkbox"/> Account Debit	<input type="checkbox"/> Foreign Inward Remittance Certificate	<input type="checkbox"/> Others							

I/We hereby, declare the particulars given above are correct and express my/our willingness to make payments referred above through direct debit / participation in ECS. If the transaction in delayed or not effected at all for reasons of incomplete or incorrect information, I/We should not hold Escorts Mutual Fund, their Investment Manager - Escorts Asset Management Limited or any of their appointed service providers or representatives responsible. I/We will also inform Escorts Mutual Fund about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf

SIGNATURE(S) (ALL ACCOUNT HOLDERS MUST SIGN HERE)

First Account Holder's Signature (As in Bank Records)	Second Account Holder's Signature (As in Bank Records)	Third Account Holder's Signature (As in Bank Records)
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Dated	D	D	M	M	Y	Y	Y	Y	FOR OFFICE USE ONLY (Not to be filled in by investor) Recorded <input type="checkbox"/> on <input type="checkbox"/> by <input type="checkbox"/> Credit A/c No. <input type="checkbox"/>				
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5. Authorization of Bank Account holder(s) (to be signed by Account holder)

This is to inform that I/We have registered for RBI's Electronic Clearing Service (Debit Clearing) and that my/our payment towards investment in Escorts Mutual Fund shall be made from my/our below-mentioned bank account number with your bank. I/We hereby authorise Escorts Asset Management Limited - Investment Manger to Escorts Mutual Fund acting through their authorized service providers and representatives carrying this ECS Mandate Form to get it verified and executed. I/We hereby further authorise Escorts Asset Management Limit (Investment Manger to Escorts Mutual Fund), acting through their authorised service providers to debit my/our following bank account by ECS (Debit Clearing) for collection of SIP payments:

Name(S) & SIGNATURE(S) OF BANK ACCOUNT HOLDERS(S) AS IN BANK RECORDS

Account Number										
Name of First Account Holder (As in Bank Records)	Name of Second Account Holder (As in Bank Records)	Name of Third Account Holder (As in Bank Records)								
First Account Holder's Signature (As in Bank Records)	Second Account Holder's Signature (As in Bank Records)	Third Account Holder's Signature (As in Bank Records)								

TERMS AND CONDITIONS FOR SIP WITH AUTO DEBIT (ECS) FACILITY

SIP payment through Electronic Clearing Service (Debit Clearing) of the Reserve Bank of India (RBI)

List of Cities for SIP Auto Debit Facility via ECS (Debit Clearing)						
Agra	Bhubaneshwar	Erode	Jammu	Mangalore	Rajkot	Trivendrum
Ahmedabad	Burdwan	Gadag	Jamnagar	Mumbai	Ranchi	Udaipur
Allahabad	Calicut	Gorakhpur	Jamshedpur	Mysore	Salem	Udupi
Amritsar	Chandigarh	Guwahati	Jodhpur	Nagpur	Shimla	Varanasi
Asansol	Chennai	Gwalior	Kakinada	Nasik	Siliguri	Vijayawada (also
Aurangabad	Cochin	Hubli	Kanpur	Nellore	Solapur	covers Guntur, Tenali
Bangalore	Coimbatore	Hyderabad	Kolhapur	Panjim	Surat	& Mangalgi)
Baroda	Dehradun	Indore	Kolkata	Patna	Tirupati	Vizag
Belgaum	Delhi	Jabalpur	Lucknow	Pondicherry	Tirupur	
Bhilwara	Dhanbad	Jaipur	Ludhiana	Pune	Trichur	
Bhopal	Durgapur	Jalandhar	Madurai	Raipur	Trichy	

1. Please check for the availability of SIP facility in the respective Scheme/Plan.
2. This facility is offered to investors having bank accounts in cities mentioned above.
3. The cities in the above list may be modified/updated/changed/removed at any time in future entirely at the discretion of Escorts Mutual Fund without assigning any reasons or prior notice. If any city is removed, SIP instructions for investors in such cities via ECS (Debit) route will be discontinued and communication to that effect will be sent to the investor.
4. Existing Investors are required to submit only the SIP Auto Debit (ECS) Form indicating the existing Folio Number and investment details in the SIP section.
5. Minimum investment amount for SIP is Rs.1000/- for monthly and Rs.1500/- for quarterly frequency. Minimum number of SIP installment is 6 for monthly & 4 for quarterly frequency.
6. SIP facility is available only on specific dates of the month viz 1st/10th/25th
7. In case " All three dates" are selected, SIP will be registered for a minimum of six months for each date.
8. If no end date is specified, SIP will remain active till we receive instruction from the investor to discontinue the SIP.
9. During ongoing purchase your first SIP can be for any day of the month. Your second and subsequent SIPs are available only on the above specified dates of the month with a minimum gap of atleast 30 days between first and second SIP installment. In case the chosen date turns out to be a non-working day for the scheme; the SIP will be processed on the immediately following working day.
10. The SIP cheque should be drawn on the same bank account which is to be registered for ECS (debit). The bank account provided for ECS(debit) should participate in local MICR clearing.
11. The cheque should be drawn in favour of "Scheme Name".
12. If three consecutive SIP's fail, the SIP will automatically stand terminated.
13. If the SIP preferences are not indicated or in case of discrepancy or ambiguity, the default option shall be as under:
SIP Frequency - Monthly, SIP date - every 10th of the month.
14. Any request for a Modification/Cancellation of SIP shall be processed within 20 days on receipt of written request. All such request, should be accompanied by:
 - a. A new SIP form duly filled in and carrying the revised/new SIP request details, or
 - b. A written and signed confirmation for discontinuing the existing SIP.
15. If you are a new investor, investing in a Scheme/Plan using the Systematic Investment Plan, please fill in all the sections in the Application Form except the section titled "Investment & Payment Details". The investment details must be indicated in the SIP Auto Debit (ECS) Form.
16. Please furnish a certified copy of the PAN Card along with the Application Form/Transaction Form.
17. Please enclose KYC Acknowledgment Letter of all applicants if investment amount is Rs. 50,000 and above.
18. Investors will not hold Escorts Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles of ECS/local holidays/incomplete or incorrect instructions from the applicant.
19. Escorts Mutual Fund reserves the right not to represent any mandate for SIP auto debit facility if the registration could not be effected in time for reasons beyond control.
20. Escorts Mutual Fund, its registrars and other service providers shall not be responsible and liable for any transaction failures, due to rejection of the transaction by your bank/branch or its refusal to register the SIP mandate.
21. Please refer the Key information Memorandum and the Standard Offer Document for Applicable NAV, Redemptions, Risk Factors, Load and other information on the respective Scheme/Plan before investing.