

SIP ENROLMENT - CUM - AUTO DEBIT / ECS APPLICATION FORM

(Please read instructions carefully before filling up the form)

Application No. _____

ARN-56003

Sub-Broker's ARN No. _____

Registrar's Serial No. _____

Upront 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 Application please write the word "DIRECT" in Distributor & Sub-Broker Box.

Normal SIP Micro SIP (Refer Instruction 9) Folio No. _____

REGISTRATION CUM MANDATE FORM FOR AUTO DEBIT / ECS (DEBIT CLEARING)

First investment in SIP via cheque and subsequent investment via Auto Debit, available in select cities only.

New SIP Registration Change in Bank Account for an existing investor Extension of SIP Registration

INVESTOR AND INVESTMENT DETAILS

Name of Sole/First Applicant Mr. Ms. M/s _____

Name of Second Applicant Mr. Ms. _____

Name of Third Applicant Mr. Ms. _____

Name of Scheme _____ Plan/Option _____

	Sole/First Applicant/ Guardian	Second Applicant	Third Applicant
PAN	_____	_____	_____
KYC	<input type="checkbox"/> KYC Acknowledgement	<input type="checkbox"/> KYC Acknowledgement	<input type="checkbox"/> KYC Acknowledgement
ID & Add Proof Document Name In case of Micro SIP (Refer Instruction 9)	_____	_____	_____

SIP DEBIT DETAILS (Refer to instruction 2,3 & 5)

Each SIP Amount (₹) _____ Frequency Monthly Quarterly

First SIP Cheque Number _____ Cheque Date DD / MM / YYYY _____

SIP Auto Debit dates (Please ✓) 1st 5th 10th 15th 28th of the month

SIP Period Start From MM / YYYY End on MM / YYYY

PARTICULARS OF BANK ACCOUNT

I/We hereby, authorize Taurus Mutual Fund and their authorized service providers, to debit my/our following bank account by ECS (Debit Clearing)/auto debit to account for collection of SIP payments.

Name of the Account Holder as in Bank Records _____

Bank Name _____

Branch Address _____ City _____

Account Number _____ Account Type Savings Current NRE NRO

MICR Code _____ This is a 9 digit number next to your cheque no. IFSC Code _____

Having read and understood the contents of the Scheme Information Document & Statement of Additional Information of the schemes and subsequent amendments thereto including the sections on 'Prevention of Money Laundering and Know Your Customer', I/We hereby apply to the Trustees of Taurus Mutual Fund for units of the scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the PMLA. I/We have not received and will not receive nor will be induced by any rebate or gifts, directly or indirectly, in making this investment. 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 declare that the amount invested by me/us in the above scheme of Taurus Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any 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 above scheme and the AMC/Trustee/Fund would not be responsible if the investment is thereto and the investment is contrary to the relevant constitutional documents. I/We authorize this Fund to reject the application, revert the units credited, restrain me/us from making any further investment in any of the schemes of the Fund, and take any appropriate action against me/us in case the cheque(s)/payment instrument is/are returned unpaid by my/our bankers for any reason whatsoever. Applicable to NRIs 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 or from funds in my / our* Non-Resident External / Ordinary Account / FCNR Account.

Please ✓ Repatriation basis Non-Repatriation basis * Please strike out whichever is not applicable.

Please sign here

Please sign here

Please sign here

First Account Holder/Guardian Signature Second Account Holder's Signature Third Account Holder's Signature

AUTHORISATION OF THE BANK ACCOUNT HOLDER (to be signed by account holder as per bank records)

This is to inform that I/We have registered for the RBI's Electronic on Clearing Service (Debit Clearing)/Auto Debit facility and that my payment towards my investment in Taurus Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorize the representative carrying this ECS/Auto Debit account mandate form to get it verified & executed.

Bank Account Number _____

Please sign here

Please sign here

Please sign here

First Account Holder/Guardian Signature Second Account Holder's Signature Third Account Holder's Signature

FOR OFFICE USE ONLY (not to be filled in by investor)

Recorded on _____	Scheme Code _____
Recorded by _____	Credit Account No. _____

Bank use mandate Ref. No. _____ Customer Ref. No. _____

Received from Mr. / Ms. _____ Date: _____

SIP Date	Cheque No.	Amount	Scheme/Plan/Option

Frequency Monthly Quarterly