

nvestors must read the Key Information Memorandum and the General Instructions before completing this Form.

KEY PARTNER / AGENT INFORMATION (Reference ARN & ARN Name	Sub Agent's ARN /	Employee Unique	RIA/PMRN Name & O	ode	Internal Code for	FOR OFFICE U	SE ONI Y
Ann a Ann Italia	Bank Branch Code	Identification Number (EUIN)	may r mine realise & C		Sub-Agent / Employee	(TIME STA	
Consent for sharing Transaction Feed with R I/We hereby give my/our consent to share/provide the trans dvisor (RIA) or SEBI Registered Portfolio Manager (PMRN). UIN Declaration (only where EUIN box is left I/We hereby confirm that the EUIN box has been intentional dvice of in-appropriateness, if any, provided by the employee/	saction feed / portfolio holdings/ NAV e ft blank) (Refer General Inst ly left blank by me/us as this transactio	rtc. in respect of my/our investments under ruction 1) on is executed without any interaction or ac	Direct Plan in the scheme(s) of M			-	
Sign Here		Sign Here			Sign Here		
First/ Sole Applicant/ Guardian / PoA Holder / K	arta	Second Applicant			Third Applicant		
RANSACTION CHARGES FOR APPLICATION	NS THROUGH DISTRIBUTO	RS ONLY (Refer General Instru	tion 2)				
ease (/) any one)	r Distributor has opted in to receive Transa : (i.e. amount per SIP/Micro SIP installmen	tx No. of installments) amounts to Rs. 10,000/	or more and shall be deducted in 3-				
.EXISTING UNIT HOLDER INFORMATION (I	f you have existing Folio, ple		-				
OLIO NO.:		The details	in our records under the	folio number me	entioned alongside wil	ll apply for this a	pplicati
2. MODE OF HOLDING [Please tick (✓)	Single Joint	Anyone or Survivor					
		•					
B. UNIT HOLDER INFORMATION (Refer Gene ME OF FIRST / SOLE APPLICANT (In case of		tholders) [Name and DOR shall be a	s ner PAN for non-individual i	nvestors]			
. Ms. M/s.	minor, there shall be no join	triorder 3/ [Name and DOD 3nam De a	per ran for non mulvidual	investors			
1 1 1							
N#/ DEVDN#	IVC Identification	on No. (VIN).			[Please (/)]	#VVC Broof Attachor	d(Mandat
	KYC Identificatio	on No. (KIN):			[Please (✔)] [#KYC Proof Attached	d(Mandat
	KYC Identificatio	in No. (KIN):			[Please (✔)] [#KYC Proof Attached	d(Mandate
TIN**	KYC Identificatio		M Y Y Y Y	Proof of dat	[Please(√)] [
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4. JOINT APPLICANT [DETAILS,	lf any (F	Refer G	ener	al Ins	truct	ion 4)	(in Ca	se of	Minor, t	here s	shall be	no jo	int h	olders)																
I. NAME OF SECON	D APP	LICAN	T [Mr.	Ms.	M/s.																									
KYC Identification No.	(KIN):													P/	AN#/ PEK	RN#													Female [YC Proof A		Mandatory)
Mobile No.										^^Ema	il Id													DATE	OF BIR			$\overline{}$	М Ү	Υ	YY
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II. NAME OF THIRD	APPLI	CANT	Ī	Mr.	Ms.	M/s.																									
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5. APPLICANT DE 5a. Status of Appli										e)																					
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☐ Individual ☐ Non Individual		ign Natior		dent i	in Indi			enan o	1 IVIIIIO	FPI					Sole Prop	rietorsh				it Orga	nisatior		Others _						ty / Club	(Ple	ase specify)
Second Applicant	_	dent Indiv / Corporat								□ NRI- r □ BOI	-Non R	Repatria	tion		Partnersh OCI	ip		☐ Tru							□ A □ F			☐ PIO	ety / Club	☐ Co	mpany
☐ Individual ☐ Non Individual	_ ,	ign Natior		dent i	in Indi		_	ciiaii v	1 IVIIIIO	FPI					Sole Prop	rietorsh	ip	□ No		it Orga	nisatior		Others _						ty / Club	(Ple	ase specify)
Third Applicant	_	dent Indiv / Corporat					_			□ NRI- r □ BOI	-Non R	Repatria	tion		Partnersh OCI	ip		☐ Tru				H H	HUF Bank		□ A □ F			☐ PIO	ety / Club	☐ Co	mpany
☐ Individual ☐ Non Individual		ign Natior		dent i	in Indi		_	ciidii o	1 1111110	FPI					Sole Prop	rietorsh	ip	☐ No		it Orga	nisatior		Others _							(Ple	ase specify)
5b. Occupation De	tails [P	lease t	tick (√	^)]																											
Sole/First Applicant		☐ Pr	rivate Se	ctor S	Service	!	П	Public	Sector	Service			Governi	ment	Service		Stu	dent		Г	☐ Profe	ssional			ПН	ousewife	e	П	Business		Retired
Please select any one		_	gricultur				_	Proprie				_	Others .								_	lease sp	ecify)								
Second Applicant		☐ Pr	rivate Se	ctor S	Service	:		Public	Sector	Service			Governi	ment	Service	[Stu	dent] Profe	ssional			H	ousewife	e		Business		Retired
Please select any one		☐ Ag	gricultur	ist				Proprie	etorshi	р			Others .								(P	lease sp	ecify)								
Third Applicant		☐ Pr	rivate Se	ctor S	Service	<u> </u>		Public	Sector	Service			Governi	ment	Service	[Stu	dent] Profe	ssional			□н	ousewife	e		Business		Retired
Please select any one		☐ Ag	gricultur	ist				Proprie	etorshi	р			Others .								(P	lease sp	ecify)								
5c. Gross Annual II	ncome	/ Net-v	worth	(Rs	.)																										
Sole/First Applicant		Gross	s Annı	ıal I	Inco	me		Below	1 Lakh			1 ·	- 5 Lakh	hs] 5 -	10 Lakh	ns		[10 -	25 Lak	hs		25 Lakhs	- 1 Cror	e	>	1 Crore	
(Please select any one)		Net-w	vorth				(Mai	ndator	y for N	on-Indivi	duals)	Rs										_as on	D	D	М	М	Y	Υ	Y (Not	older th	an 1 year)
Second Applicant		Gross	s Annı	ıal I	Inco	me		Below	1 Lakh			1 ·	- 5 Lakh	hs] 5 -	10 Lakh	ns		[10 -	25 Lak	hs		25 Lakhs	- 1 Cror	e	>	1 Crore	
(Please select any one)		Net-w	vorth				(Mai	ndator	y for N	on-Indivi	duals)	Rs										_as on	D	D	М	M	Y	Υ	Y (Not	older th	an 1 year)
Third Applicant		Gross	s Annu	ıal I	Inco	me		Below	1 Lakh			1 ·	- 5 Lakh	hs] 5 -	10 Lakh	ns		[10 -	25 Lak	hs		25 Lakhs	- 1 Cror	e	>	1 Crore	
(Please select any one)		Net-w	vorth				(Mai	ndator	y for N	on-Indivi	duals)	Rs										_as on	D	D	М	M	Y	Υ	Y (Not	older th	an 1 year)
5d. Politically Expo				Stat	us (A	lso ap	_			sed signa	tories																				
Sole/First Applicant (Please sel	ect any or	ne)			4		lam a	PEP			□la	m Rela	ited to	a PEP		Not	Applica	able												
Second Applicant (Ple	ase select	any one))			1		l am a	PEP			□la	m Rela	ted to	a PEP		Not	Applica	able												
Third Applicant (Pleas	e select a	ny one)						lam a	PEP			□la	m Rela	ted to	a PEP		Not	Applica	able												
					_	_	_			- ≽	: –	_			TEAR HE	RE			_					_							
	1/2																														
Scheme(s)/Plan(s)/Opti	on(s)/	Sub-c	pti	on(s)																									
Cheque / DD / Payment	Instrume	nt No. & D	Date						Dr	awn on (I	Bank a	nd Brar	nch)										Amoun	ıt in Figi	ures (Rs	.)					
SIP/ Micro SIP Date	e (s)																Te	op Ur	o SIP	Amo	ount	/ Perc	enta	ge_				Frequ	uency _		



6. FATCA and CRS DETAILS For Individuals (Mandatory) Non Individual investors including HUF should mandatorily fill separate FATCA/CRS form

	Sole/First Applicant/	/Guardian		Second Ap	plicant			Third Applicant			
Place of Birth											
Country of Birth											
Nationality	□Indian □U.S. □(Others, please specify_		□Indian [U.S(Others, please specify	/	☐ Indian ☐ U.S	. Others, please spe	ify	
Tax Residence Address Type (as per KYC records)	Residential Reg	gistered Office Bus	iness	Residen	tial 🗌 Reg	gistered Office 🔲 Bu	usiness	Residential	Registered Office	Business	
Are you a tax resident (i.e., are	☐ Yes / ☐ No			☐ Yes / ☐	No			☐ Yes / ☐ No			
you assessed for Tax) in any other country outside India?	If 'YES', please fill below	for ALL countries (othe	r than India) in which yo	u are a Resident f	or tax purpo	oses i.e., where you a	re a Citizen / Resident /	Green Card Holder / Tax Re	esident in the Respective	countries.	
Country of Tax Residency	(1)			(1)				(1)			
	(2)			(2)				(2)			
	(3)			(3)				(3)			
Tax Identiification Number OR Functional Equivalent	(1)			(1)				(1)			
i unctional Equivalent	(3)			(3)				(3)			
Identification Type	(1)			(1)				(1)			
(TIN of other, Please specify)	(2)			(2)				(2)			
IETIN :il-bl-	(3)			(3)				(3)	1.	1.	
If TIN is not available, please tick the reason A,B,		I	3 □ A □ B □ C	1 		2 □ A □ B □ C	3 □ A □ B □ C	1 □ A □ B □ C	2 □ A □ B □ C	3 □ A □ B □	70
or C (as defined below)											
Reason A → The country where the	Account Holder is liable to	pay tax does not issue	Tax identification Numb	ers to its residents	5.				Refe	er General Instr	uctions 4C and 1
Reason B → No TIN required. (Selec	,	ıthorities of the respect	ive country of tax residen	ce do not require	the TIN to b	e collected).					
Reason C → Others; please state th											
7. BANK ACCOUNT DETAILS OF (Mandatory to attach proof, in	THE FIRST / SOLE APPL case the pay-out bank a	.ICANT (For redempt ccount is different fro	ion purpose) (Refer Go om the bank account m	neral Instruction	n 6 & 10) Section 8 b	elow.)					
For unit holders opting to hold un	its in demat form, please	ensure that the bank	account linked with the	demat account i	is mentione	ed here.					
Bank Name											
Branch Address								Branch C	ity		
Account No.						1	WICR Code			(The 9 digit code a next to the cheque	ppears on your chequ number)
Account Type (Please ✓) ☐ Sa	vings 🔲 Current	□ NRO □ NRE	FCNR Other	s (please specify)						
IFSC Code***			*** Ref	er General Instru	iction 6C (N	Mandatory for Credit v	via RTGS / NEFT) (11 Ch for the same with your	aracter code appearing o	n your cheque leaf.		
Unitholders will receive redemption	n/dividend (IDCW), procee	eds directly into their h	*				•				
8. INVESTMENTS & PAY The name of the first/so NOTE: In case of, Paymer cheque/DD details need 8A. For Lumpsum Inve	le applicant must b nt through single ch to be filled only ond	be pre-printed or heque, the cheque ce. Same cheque	n the cheque for lu ue/DD should be is	mpsum Inve sued in favo both lumps	stment/ ur of 'Ma um & SIP	SIP Registration whindra Manulife investments.	n. FOR DEFAULT e Multiple Schem	OPTIONS, PLEAS es' for the total inv	E REFER KIM.	mentioned b	elow and the
•	Payme	—	ngle Cheque Multipl	Cheques (Ref	er instruc	ction 5 D)		heque/ DD/		T	
Scheme/Plan/Opt Sub-option	ion/	_	stment nount	DD Charges if any	S, I	Net DD / Chequ Amount	ue Paym	ent Instrument/ 'R No. & Date	Drawn on Bank / Brancl	Bank Acc	ount Numbe
Mahindra Manulife											
Mahindra Manulife											
		TOTAL									
8B. For investment three (Refer General Instruction 7)	ough SIP / Micro S	•	nent Type : Non-Th					ty Payment Declaration F	orm')		
Scheme/Plan/Option/			SIP Installm		Date(s) truction 7.1	Frequency	Period	Top-Up I	Top-Up (Optional)	(Refer instructional)	tion 7.6) Frequency
(Mention Cheque deta 1. Mahindra Manulife	ans, ii attacheu)		Amount (() (Refer ins	cruccion 7.1			Amou		mount*(₹)	
						☐ Monthly*	Start: M M Y Y	Y Y Or	Or		☐ Yearly*
Cheque No.			VV			☐ Quarterly	End: [M M Y] ↑ or ☐ Until cance	Perce	ntage CAP N	Month-Year	☐ Half-yearly
2. Mahindra Manulife			1.1.					Amou	nt*(₹) CAP A	mount*(₹)	
2. Mainiara Mariaric						☐ Monthly*	Start: M M Y Y	YY		inount (t)	☐ Yearly*
			TOTAL			☐ Quarterly	End: M M Y N or □ Until cance	Perce	ntage Or CAP N	Nonth-Year	☐ Half-yearly
Cheque No.		D D M M Y Y							M M	YYYY	
*Default Option. Note: Top-Up S Bachat Yojana. CAP Amount: N CAP Month-Year: Month-Year fror For existing investors if	lax SIP installment amo n which SIPTop-Up will be	ount (including Top-u discontinued.	p). In case, the SIP in:	stallment amou	nt exceeds		ount mentioned in th				
			hrough Post Dat								
For SIP through Aut		11	: Period M N	Y	YY	TO M M	Y Y Y		ues attached		
please also fill & att		sip 2	2: Period M N	YY	YY	то М М	YYYY	No. of chec	ues attached		
Registration cum De	enit mandate to	1111.		Post dated	d chean		rawn on the san	 ie bank & accoun	t number		_



Mar	NALITI I A I							
9. UNIT	HOLDING OPTION	DEMAT MODE*	PHYSICAL MODE (Det	fault) (Refer Instruction 12)				
					quence of the names as mentioned in the a o match the demat details as stated in the a			
NSDL	DP NAME			DP ID I N	Beneficiary Account No.			
CDSL	DP NAME			Beneficiary Account No.				
10. NON	IINATION (Refer Instruction	14) (Mandatory for new folio	os of Individuals whe	re mode of holding is single) (For Units in Non-De	emat Form)			
Name	and Address of Nominee(s	Relationship with	Date of Birth	Name and Address of Guardian	Signature of Nominee (Optional)/ Guardian of Nominee (Mandatory)	Proportion (%) in which the units will be shared by		
Applicant			(to be furnis	hed in case the Nominee is a minor)	- Caaranar or resiminee (manaatory)	each Nominee (should aggregate to 100%)		
	Nominee 1							
-	Nominee 2							
ľ	Nominee 3							
11. DEC	7)] □ I/We do not wish t	/S (Refer Instruction 13)	- d		landing CCDI IAMs and Growth had a survey of installant			
Indian and Scheme In Fund') ind The amou or any oth Governme satisfactio undertake The inforn	I foreign laws. I / We hereby formation Document, Staticated above. I / We am/arent invested in the Scheme i er applicable laws or any into f India from time to tien of the Fund, I / we hereby such other action with sunation given in / with this	or confirm and declare as tement of Additional Info eligible Investor(s) as p s derived through legiti lotifications, Directives of me. I/We confirm that ti authorize the Fund, to re ch funds that may be rec application form is tru	follows:-I/We had ormation and Key er the scheme relemate sources only of the provisions one funds invested deem the funds i quired by the law. e and correct and ormatical following the funds is quired by the law.	ve read, understood and hereby agree to Information Memorandum) and apply for ated documents and am/are authorised to It and is not held or designed for the purpo of the Income Tax Act, Anti Money Launded I in the Scheme, legally belongs to me/u nin the Scheme, in favour of the agual I / We have not received nor have been in If durther agree to furnish such other fur	luding SEBI. I/We confirm that my application on my with the terms and conditions of the or allotment of Units of the Schemes of Mato make this investment as per the Constitutes of Contravention of any Act, Rules, Reguering Laws, Anti Corruption Laws or any ot is. In event "Know Your Customer" process opplicant, at the applicable NAV prevailing or duced by any rebate or gifts, directly or increase.	the scheme related documents (i.e. ahindra Manulife Mutual Fund ('the utive documents/ authorization(s). llations or any statute or legislation ther applicable laws enacted by the sis not completed by me/us to the on the date of such redemption and directly, in making this investment.		

 $Investment\ Management\ Private\ Limited\ (Formerly\ known\ as\ Mahindra\ Asset\ Management\ Company\ Private\ Limited\) (AMC)\ /\ the\ Fund\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /Registrars\ and\ under take\ to\ inform\ the\ AMC\ /\ the\ Fund\ /\ the\ Fund\$ Transfer Agent (RTA) in writing about any change in the information furnished from time to time. That in the event, the above information and/or any part of it is/are found to be false/ untrue/misleading, I/We will be liable for the consequences arising therefrom. I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Fund, its Sponsor/s, Trustees, AMC, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi- judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the AMC / the Fund, their appointed service providers or representatives responsible. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We hereby authorize and provide my/our consent to the AMC, its Registrar & Transfer Agent and their authorized representatives to contact me/us through various communication modes (including phone / email / SMS) to address my/our investment related queries and/or receive communications pertaining to my/our financial transactions/ non-financial transactions/ promotional/ potential investments and other communications/ materials about the mutual fund products and services offered by the Fund, irrespective of my/our blocking preferences with the Customer Preference Registration Facility. I/We do not have any existing Micro $Investments which together with the current Micro Investment application will result in aggregate investments exceeding Rs. 50,000/- in a year (applicable to Micro Investment investors only). \\ 1/We investment which together with the current Micro Investment investors only). \\ 1/We investment investors only investors o$ confirm that I / We are not United States person(s) under the laws of United States or residents(s) of Canada as defined under the applicable laws of Canada I/WE HEREBY CONFIRM THAT I/WE HAVE NOT BEEN OFFERED/ COMMUNICATED ANY INDICATIVE PORTFOLIO AND/ OR ANY INDICATIVE YIELD BY THE FUND/AMC/ITS DISTRIBUTOR FOR THIS INVESTMENT. I/We hereby provide my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I/We hereby provide my/our consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios. FATCA Declaration: I hereby confirm that the information provided here in above is true, correct and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required any intermediary or by domestic or overseas regulators / tax authorities. Applicable to NRIs only: I/We confirm that I am / we are Non-Residents of Indian Nationality / Origin and that the $funds are remitted from a broad through approved banking channels or from my/our NRE/NRO/FCNR Account. \\I/We confirm that the details provided by me/us are true and correct.$

SIGNATURE(S) (Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft / Payment Instrument.)									
Sign Here First / Sole Applicant/ Guardian / PoA Holder / Karta	Sign Here Second Applicant	Sign Here Third Applicant							



To

Or Until Cancelled

Name

First time investors subscribing to the Scheme through SIP-NACH / Auto Debit to complete this form compulsorily along with the Main Application Form. (Please read 'Terms & Conditions for SIP through NACH / Auto Debit' overleaf) and general instruction 7.6. The Application Form should be completed in English and in **BLOCK LETTERS** only.

	ARN & AR	N Name					nt's ARN / Inch Code	ld	Employee Unique entification Number (E		IA/PMRN Name	& Code	Interna Sub-Agen	l Code for t / Employ			CE USE ON STAMP)	
						varik bra	men couc											
									RIA/PMRN only):					ed / portfoli	o holdings/	NAV etc. in	respect of	f my/o
EUIN Declaration	(only wher	e EUIN box	is left l	blank) (Re	efer Genei	ral Instru	uction 1):[☐ I/We he	reby confirm that the EUI	N box has been i	ntentionally left l	olank by me/us a	this transaction				n or advic	e by th
employee/relations	hip manager	/sales persoi	of the a	above distri	butor/sub	broker or	notwithstar	nding the a	dvice of in-appropriatene	s, if any, provided	l by the employee	/relationship mar	nager/sales perso	n of the dist	ributor/sub	broker.		
Sign Here First,							Sign Her	e				Sign Here						
						RS ONLY			uction 2) (Please (🗸)		Lam a first time		al Funds 🗆		isting invest	or in Mutua	l Funds (De	efault)
n case the purchase/su	ubscription am	ount is Rs. 10	,000 or m	more and you	ur Distributo	or has opte	ed in to receiv	e Transactio	on Charges, the same are ded	uctible as applicab	le from the purcha	se/subscription am	ount and payable t	to the Distrib	utor. Transac	tion Charges	in case of in	nvestm
hrough SIP/Micro SIP a Ipfront commission sh	are deductible all be paid dire	only if the to ctly by the in	.al comm restor to	nitment of in the ARN Hol	ivestment (lder (AMFI re	i.e. amou egistered l	nt per SIP/Mi Distributor) b	cro SIP insta ased on the	allment x No. of installments investors' assessment of var) amounts to Rs. 10 ious factors includi	0,000/- or more and ing the service rend	d shall be deducted ered by the ARN Ho	l in 3-4 installment Ider.	ts. Units will	be issued aga	inst the bala	nce amoun	it inves
(✓) □ SIP/ To	p-Up SIP	☐ Mic	ro SIP	Ch	iange in	Bank A	Account (Proceed d	irectly to fill the NACH m	andate and prov	ride a cancelled o	heque)						
. Investment a	and SIP D	etails: F	irst / S	Sole Inv	estor	Name												
Folio No.(Exi	sting Uni	tholder)							кус	Identificati	on Number							
PAN / PEKRN	۸		\top						Enclosed (✓) #KYC Proof	Existi	ng UMRN		(If UMRN	is registe	ered in th	e folio)		
PAYMENT THROU	JGH [SINGLE	CHFOU	FΠ	MULTIP	I F CHFO	OUFS	Refer N	Note (i) and genera	instruction	5 D							
	Scheme						SIP Insta		1 1				Top-U	Jp (Refer	instructi	on 1b) (O	ptional))
Existing SIP	(Mentio						Amou		(Refer Instruction 1(a))	Frequency	Pe	riod	Top-Up De		CAP Deta			
New	1. Mahindi	a Manulife								☐ Monthly*	Start: M M	YYYY	Amoun	t*(₹)	CAP Ar	nount* (₹	 □ Yea	ırlv*
Upgrade										☐ Quarterly	End: M M	Y Y Y Y	Or Dorson	(Or CAR M	onth-Year] _	•
	Cheque No			D D	M M Y Y	YY				Quarterly	or 🗌 Until	cancelled*	Percent	lage	M M Y	Y Y Y	المالية	i-yea
	2. Mahindr	a Manulife									Start: M M	Y Y Y Y	Amoun	t*(₹)	CAP Ar	nount*(₹		l¥
New										☐ Monthly*	End: M M	YYYY	Or—_)r		Yea	1
Upgrade	Chama Na				M M V V	IVIVI	TOTAL			☐ Quarterly	or Until	cancelled*	Percent	tage	CAP M	onth-Year	· 🗌 Hali	f-yea
Defection N	Cheque No			- PP	h 4b .	-h/	DD -b l d b	. :	f	I:£- MF M 4: - C	-hl f 4h - 4-	4-1:			46 - 46	(DD detelle		£11.J
									favour of 'Mahindra Manu mation for active SIP. In ca:									
iot available for Mahi IP installment amou									cluding Top-up). In case, tl	ne SIP installment	t amount exceeds	the maximum an	ount mentioned	in the debi	t mandate, t	ne SIP will c	ontinue wi	th the
No. of PDC ch						op will be			ame: SIP 1, SIP 2									
or existing in					throug	ıh NAC				ncelled chea	ue OR	Copy of c	heaue					
2. Demat Accor						,				ca ciica	100 011	cop) or c	eque					
NSDL DP I	NAME	-							DP ID I N			Benefici	ary Account	No.				\Box
CDSL DP I	NAME								Beneficiary Acc	ount No.								T
1	all receive	navments	of Re	demptio	n/Divide	nd pro	ceeds in t	he Bank	Account linked to th	ie Demat A/c.								
	an receive	payments									erms & condition	s of SIP enrolmen	A Alessa comba A coka					
The investors sha	nave read and	l understood		ntents of th			ion Docume		tement of Additional Info			and conditions of		Sign Her	e			
The investors shadeline in	nave read and e to abide by t e particulars	l understood he same. I /V given above a	Ve hereb are corre	ntents of th by apply for ect and expre	enrolment ess my willi	under the	ion Docume e SIP of above o make paym	e mentione ents referr	tement of Additional Infor ed Scheme - Plan(s) / Optio ed through participation in	n(s) and agree to a NACH/Auto Debit	abide by the terms . I/We authorise th	ne bank to honour	the same. I/We the instructions		'e e Applicant /			:r / Ka
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Terms & Conditions for SIP/Top-Up SIP

1 (a). SIP facility is offered by the Scheme subject to following terms and conditions:

1). SIF lacility is offered by the scheme subj	ject to following terms and conditions.									
Particulars	Frequency available (Default Frequency: Monthly)									
	Monthly	Quarterly								
SIP Transaction Dates	Any date*									
(Default Date: 10th)	or SIPs being registered through Post Dated Cheque ('PDC') mode, available SIP dates will be 1st, 5th, 10th, 15th, 20th or 25th of the month									
	der the monthly/quarterly frequency.									
Minimum no. of installments	For schemes other than MMEKBY - 6 installments of Rs. 500/- each and	For schemes other than MMEKBY - 4 installments of Rs. 1500/- each and in								
and Minimum amount per installment	in multiples of Re 1 thereafter; For MMEKBY - 6 installments of	multiples of Re 1 thereafter; For MMEKBY - 4 installments of Rs. 1500/-								
	Rs. 500/- each and in multiples of Rs. 500/- thereafter.	each and in multiples of Rs. 500/- thereafter.								
Mode of Payment	a. Direct Debit mandate through select banks with whom AMC may have	e an arrangement, from time to time. b. PDC.								
	c. National Automated Clearing House (NACH) Facility									

^{*} If any SIP installment due date falls on a non-Business day, then the respective transactions will be processed on the next Business day. However, in case the chosen date is not available in a particular month, the SIP will be processed on the last day of that month. E.g., if selected date is 31 st, SIP installment for the month of September will be processed on 30th September. However, in Case the chosen date is not available in a particular month, the SIP will be processed on the immediate next Business Day, the SIP will be processed on the immediate next Business Day, Note: Anyone or more SIP transaction dates from the available dates can be selected by the Unit holders under the Monthly and Quarterly frequencies. SIP amount (including Top Up) will be restricted to amount mentioned in Direct Debit / NACH Mandate Form.

MMEKBY: Mahindra Manulife ELSS Kar Bachat Yojana

1 (b). Top-Up SIP Specifications

Particulars	Minimum Top-	Top Up Frequency			
Particulars	For schemes other than MMEKBY	For MMEKBY	For Monthly SIP	For Quarterly SIP	
Top up by Amount	Rs. 100 and in multiples of Rs 100 thereafter	Rs. 500 and in multiples of Rs 500 thereafter	Yearly	Yearly	
Top up by Percentage	10% and in multiples of 1% thereafter. Rounded off to nearest next multiple of Rs. 10.	Not available	Yearly		

Note: Existing investors will be required to submit a request for upgrade from SIP to Top-up SIP at least 10 calendar days prior to the next SIP date. In case of Monthly SIP, if the investor has chosen half-yearly Top-Up frequency, the SIP amount will increase after every 6 SIP monthly cycle dates by the amount indicated and if the investor has chosen Yearly Top-Up frequency, the SIP amount will increase after every 12 SIP monthly cycle dates by the amount/percentage indicated. For Quarterly SIPs, only Yearly frequency is available for Top-up amount to SIP amount will increase after every 4 SIP quarterly cycle dates by the indicated amount / percentage. If the Investor does not specify either the Top-up amount/percentage or specifies both, the SIP application will be processed by default with the Minimum Top - up installment amount as per above table. The Top-up details cannot be modified once enrolled. In order to make any changes, the Investor must cancel the existing SIP and enroll for a fresh SIP with revised Top up details.

Default Mode - Top-up by amount. Default Top-up frequency - Yearly.

- 2. New Investors should mandatorily give a cheque for the first transaction. Subsequent SIP cheques should be of the same amount as the total amount of first SIP cheque.
- 3. If the SIP period is not specified by the investor then the SIP enrollment will be deemed to be for perpetuity and processed accordingly.
- 4. a. SIP Cap Amount: Investor shall have an option to freeze the SIP installment amount (including Top-ups applied at periodic intervals) by specifying a SIP Cap amount. The SIP Cap amount shall be less than or equal to the amount mentioned by the Investor in the NACH Debit Mandate. In case the SIP Cap amount specified by the Investor is higher than the NACH Debit Mandate amount, then the amount mentioned in the NACH Debit Mandate shall be considered for applying Top-ups and processing of SIP installments until the end of SIP tenure.
 - b. SIP Cap Month-Year: Investor shall have an option to freeze the SIP installment amount (including Top-ups applied at periodic intervals) from a prespecified month and year. From this prespecified month and year onwards, the SIP Top-Ups will be discontinued and the last topped up SIP installment will remain constant until the end of SIP tenure.

 $Note: Investor shall have a flexibility to choose either SIP Cap\ Amount or SIP Cap\ Month-Year. In case of multiple selections, SIP Cap\ amount will be considered as\ default\ selection.$

- 5. The first installment will be processed at Applicable NAV based on time stamping. In case of SIP for an amount of Rs. 2 lakh and above, the Applicable NAV of the Scheme will be based on funds available for utilizations, as stated in KIMs/SIDs. There should be a gap of at least 30 calendar days between the first SIP installment and the second SIP installment / SIP Auto Debit "Start" date mentioned in the debit mandate form. The SIP Auto Debit shall start from the selected "Start" date mentioned by the investor, subject to completion of successful SIP Auto Debit mandate verification and registration formalities at least 10 calendar days prior to the "Start" date specified in the debit mandate form.
- 6. In case of MMEKBY each SIP installment will be subject to a Lock In period of three years from the date of allotment of Units.
- $7. \quad In case any cheque submitted by the investor for any SIP installment is dishonoured by the Bankers for the reason of account of investor is closed, the AMC would discontinue the SIP immediately.$
 - . The SIP enrollment will be discontinued if:
 - $a. \quad \ \ 3\,consecutive\,SIP\,in stall ments\,in\,case\,of\,Monthly\,\&\,Quarterly\,frequency\,are\,not\,honoured.$
 - b. the Bank Account (for Standing Instruction) is closed and request for change in bank account (for Standing Instruction) is not submitted at least 30 calendar days before the next SIP Auto Debit installment due date.
- $9. \hspace{0.5cm} SIP \, registered \, for more than one date \, or all \, dates \, of \, the \, month \, under \, the \, Monthly \, / \, Quarterly \, frequency, \, will \, be \, considered \, as \, separate \, SIP \, instruction \, for \, the \, purpose \, of \, fulfilling \, the \, \, \, \, \, Minimum \, no. \, of \, installments' \, criteria.$
- 10. SIP in a folio of a minor will be registered only upto the date of minor attaining the majority even though the instruction may be for the period beyond that date.
- $11. \quad The Load structure prevailing at the time of submission of the SIP application (whether freshor extension) will apply for all the Installments indicated in such application.$
- The SIP mandate may be discontinued by a Unit holder by giving a written notice of 30 calendar days to any of the Official Point(s) of Acceptance.
 The facility will be automatically terminated upon receipt of intimation of death of the Unit holder.
- 14. The investors can also subscribe Units through SIP in Demat (electronic) mode for the Scheme. However the Units will be allotted based on applicable NAV of the Scheme and will be credited to investor's Demat (Beneficiary) Account on weekly basis on realization of funds, e.g. Units will be credited to investor's Demat (Beneficiary) account every Monday (or next business day, if Monday is a non-business day) for realization status received in last week from Monday to Friday.
- 15. Investors will not hold Mahindra Manulife Mutual Fund / Mahindra Manulife Investment Management Private Limited (Formerly known as Mahindra Asset Management Company Private Limited) (MMIMPL), its Registrar and other service providers responsible, if the transaction is delayed or not affected or the investor's bank account is debited in advance or after the specific SIP date.
- 16. The first cheque should be drawn on the same bank account which is to be registered for Debit. Alternatively, the cheque may be drawn on any bank, but provide a photocopy of the cheque of the bank / branch for which Debit is registered.
- 17. Mahindra Manulife Mutual Fund / MMIMPL, it's Registrar and other service providers shall not be responsible and liable for any damages / compensation for any loss, damage etc., incurred by the investor. The investor assumes the entire risk of using this facility and takes full responsibility.

Terms & Conditions - NACH / Auto Debit

- NACH debit facility is offered at various banks. For a detailed list of banks please refer the website www.npci.org.in.
- 2. This facility is offered only to the investors having bank accounts with above mentioned Banks. Above list is subject to modification/updation at any time in future at the sole discretion of MMIMPL, without assigning any reason or prior notice. If any bank is removed, SIP instructions of investors for such banks via NACH will be discontinued without any prior notice.
- $3. \quad By signing the NACH mandate form the investor agrees to a bide by the terms and conditions of NACH facility through NPCI (www.npci.org.in). \\$
- 4. a. New/Existing investors who wish to enroll for SIP through NACH should fill the SIP Application Form and the Registration cum Mandate Form for NACH.
 - b. The Registration cum Mandate Form for NACH should be submitted at least 30 calendar days prior to next SIP cycle date.
 - c. Unique Mandate Registration Number (UMRN) is auto generated by NPCI during the mandate creation for the first time. Investors, who do not have the UMRN, please leave it blank. UMRN would be linked to the folio and maximum length is 20 characters comprising of Alpha Numeric Character allotted by NPCI.
 - d. Investors who already have UMRN registered under the folio can fill up the SIP Registration cum Mandate Form for NACH and should be submitted at least 10 working days before the date of the first debit through NACH.
- $5. \quad \text{Please provide the cancelled cheque leaf of the Bank A/c no. for which NACH facility is registered.} \\$
- 6. Investors need to mandatorily fill the SIP Registration Cum Mandate form for NACH for any amendment and cancellation quoting their UMRN by giving 30 calendar days prior notice to any of the investors service centre.
- 7. Investor can choose to discontinue the SIP facility under folio without cancelling the UMRN by giving 30 calendar days prior notice to any of the Investor Service Centre.
- $8. \quad \text{IFSC is a 11 digit number given by some of the banks on the cheques. MICR is the 9-digit code that appears on your chequenext to the chequenumber.}$
- 9. In case of existing investor, if application is received without existing UMRN then the last UMRN registered in the folio would be considered.

Terms & Conditions - Auto Debit

Auto Debit: The Auto Debit Facility will be made available only with the banks with which MMIMPL or its service provider may have tie up for Auto Debit from time to time. Please contact Mahindra Manulife Mutual Fund Investor Service Centre for updated list of banks/ branches eliqible for Auto Debit Facility.