HSBC Mutual Fund

Systematic Investment Plan (SIP) / Micro SIP Form

Please refer to the general instructions for assistance and complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink.

Broker Name & ARN Code / RIA Code	Sub-broker ARN Code	Sub Code	EUIN	Branch Code
ARN-95070			E-101834	

Time Stamp

Investor's Declaration where EUIN is not furnished: I/We confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor and/or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of distributor and the distributor has not charged any advisory fees on this transaction

Sole/1st Applicant / Authorised Signatory	X	2nd Applicant / Authorised Signatory	X	3rd Applicant / Authorised Signatory	X

☐ New SIP Registration ☐ SIP Renewal ☐ Update new OTM debit mandate for already registered SIP ☐ OTM Debit Mandate to be registered in the folio.
☐ OTM Debit Mandate is already registered in the folio. Please fill, Unique Mandate Reference Number (UMRN)

1 APPLICANT INFORMATION

Name of Sole/1st Unit Holder: First Name | Middle Name | Last Name

Folio No. | PAN

Contact Details

Mobile No. + 9 1 | Tel. (Res./Office)

Mobile belongs to : ☐ Self ☐ Spouse ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ Guardian (to Minor investment) ☐ POA ☐ PMS

✦E-mail | Email ID to be filled in CAPITAL LETTERS

E-mail belongs to: ☐ Self ☐ Spouse ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ Guardian (to Minor investment) ☐ POA ☐ PMS

2 OTM DEBIT MANDATE FOR NACH/ECS/AUTO DEBIT

HSBC Mutual Fund

UMRN F O R O F F I C E U S E O N L Y | Date D D M M Y Y Y Y

Sponsor Bank Code | ☐ Create ☐ Modify ☐ Cancel

Utility Code | I/We hereby authorize **HSBC Mutual Fund**

To debit (✓) ☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Others | Bank Account No.

with Bank: Name of customers bank | IFSC/MICR

An amount of Rupees: In Words | ₹ In Figures

Debit Type: X ~~Fixed Amount~~ ✓ Maximum Amount | Frequency: X ~~Monthly~~ X ~~Quarterly~~ X ~~Half Yearly~~ X ~~Yearly~~ ✓ As & when presented

Reference 1: Folio No. | Reference 2: Application Number

Mobile No. | Email ID

1. I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank. 2. This is to cofirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorised to cancel / amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/Corporate or the bank where I have authorised debit.

PERIOD* (Mandatory)
From D D M M Y Y Y Y
To D D M M Y Y Y Y
Maximum period of validity of this mandate is 40 years only.

Maximum period of validity of this mandate is 40 years only.

X	X	X
Signature of Primary Bank Account Holder	Signature of Bank Account Holder	Signature of Bank Account Holder
Name as in bank records	Name as in bank records	Name as in bank records

HSBC Mutual Fund

ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)

This Acknowledgement Slip is for your reference only. Information provided on the form is considered final.

Received from _____ Folio No./Application No.

Scheme _____ Plan _____ Option/Sub-option _____

☐ New SIP Registration ☐ SIP Renewal ☐ Update New OTM Debit Mandate ☐ OTM Debit Mandate to be registered in the folio.
☐ OTM Debit Mandate is already registered in the folio.

☐ **SIP Amount** Rs. _____ **Frequency** ☐ Daily ☐ Weekly ☐ Monthly ☐ Quarterly

☐ **STP Top Up Amount** Rs. _____ **Frequency** ☐ Half Yearly ☐ Yearly

Acknowledgement Stamp & Date

PUBLIC

3 SIP & INVESTMENT DETAILS (For more than One Scheme please issue cheque favouring "HSBC Multi SIP Collection Account")

First SIP Details

Instrument No. | Dated D D M M Y Y Y Y | Cheque Amount ₹

Bank Name _____ A/C No.

Branch _____ City _____

A/c. Type ☐ Current ☐ Savings ☐ NRO✠ ☐ NRE✠ ☐ Others **UMRN for OTM** _____

Reason for your SIP (✓) ☐ Children's Education ☐ Children's Marriage ☐ House ☐ Car ☐ Retirement ☐ Others _____

1 Scheme 1

Name | Plan | Option/Sub option

IDCW Frequency

SIP period From M M Y Y To M M Y Y

[If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate]

SIP Date ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default^) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st

SIP Frequency ☐ Daily ☐ Weekly≙ ☐ Monthly^ ☐ Quarterly (10th)

SIP Day ☐ Monday ☐ Tuesday ☐ Wednesday≙ ☐ Thursday ☐ Friday

SIP Amount (figures) ₹ (words)

☐ **SIP Top Up** (Optional) – Available only for investments effected through Auto Debit.

Top Up Amount ₹ Amount in multiples of ₹ 500 only **Top Up Frequency** ☐ Half Yearly ☐ Annual (Default) ^

Top Up to continue till SIP amount reaches^^ ₹ OR Top Up to continue till # D D M M Y Y Y Y

2 Scheme 2

Name | Plan | Option/Sub option

IDCW Frequency

SIP period From M M Y Y To M M Y Y

[If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate]

SIP Date ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default^) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st

SIP Frequency ☐ Daily ☐ Weekly≙ ☐ Monthly^ ☐ Quarterly (10th)

SIP Day ☐ Monday ☐ Tuesday ☐ Wednesday≙ ☐ Thursday ☐ Friday

SIP Amount (figures) ₹ (words)

☐ **SIP Top Up** (Optional) – Available only for investments effected through Auto Debit.

Top Up Amount ₹ Amount in multiples of ₹ 500 only **Top Up Frequency** ☐ Half Yearly ☐ Annual (Default) ^

Top Up to continue till SIP amount reaches^^ ₹ OR Top Up to continue till # D D M M Y Y Y Y

3 Scheme 3

Name | Plan | Option/Sub option

IDCW Frequency

SIP period From M M Y Y To M M Y Y

[If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate]

SIP Date ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default^) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st

SIP Frequency ☐ Daily ☐ Weekly≙ ☐ Monthly^ ☐ Quarterly (10th)

SIP Day ☐ Monday ☐ Tuesday ☐ Wednesday≙ ☐ Thursday ☐ Friday

SIP Amount (figures) ₹ (words)

☐ **SIP Top Up** (Optional) – Available only for investments effected through Auto Debit.

Top Up Amount ₹ Amount in multiples of ₹ 500 only **Top Up Frequency** ☐ Half Yearly ☐ Annual (Default) ^

Top Up to continue till SIP amount reaches^^ ₹ OR Top Up to continue till # D D M M Y Y Y Y

✠ For NRI Investors. ≙ If the day for Weekly SIP is not selected, Wednesday will be the default day ^ If no debit date is mentioned default date would be considered as 10th of every month/quarter. Minimum gap of 21 days required between first cheque and subsequent instalment. In case of discrepancy in the SIP Period,the one mentioned in the Debit Mandate will be considered. Please ensure the amount mentioned in the NACH form is a total of per SIP installment requested above. ^^ SIP Top Up will cease once the mentioned amount is reached. # It is the date from which SIP Top-Up amount will cease. Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment.

4 DECLARATION AND SIGNATURE(S) (to be signed by all Unit Holders if Mode of Holding is 'Joint')

OTHER DECLARATIONS (Signature(s) should be as it appearing on the Application Form and in the same order

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum of HSBC Mutual Fund. I/We hereby declare that I/We do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding Rs. 50,000 in a year. I/We have neither received nor been induced by any rebate or gifts directly or indirectly in making this Systematic Investment. I/We hereby declare that the particulars given here are correct and express my/our willingness to make payments referred above through participation in Electronic Debit arrangement/NACH (National Automated Clearing House). If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the user institution or any of their appointed service providers or representatives responsible. I/We will also inform HSBC Mutual Fund about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

I/We hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/ us to the group companies of HSBC Mutual Fund for any valid business purposes including marketing or sales promotion or with any statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.

X	X	X
Sole/First Applicant/Guardian/PoA	**Second Applicant/ PoA**	**Third Applicant/PoA**

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

CALL US AT

Please visit our website www.assetmanagement.hsbc.co.in for an updated list of Official Points of Acceptance of HSBC Mutual Fund. Please visit www.camsonline.com for an updated list of Official Points of Acceptance of our Registrar/Transfer Agent : Computer Age Management System.

TOLL FREE NUMBERS

Description	Investor related queries	Distributor related queries	Online related queries	Investor (Dialing from abroad)
Toll Free Number	1800-4190-200/1800-200-2434	1800-419-9800	1800-4190-200/1800-200-2434	+91 44 39923900
Email ID	investor.line@mutualfunds.hsbc.co.in	partner.line@mutualfunds.hsbc.co.in	onlinemf@mutualfunds.hsbc.co.in	investor.line@mutualfunds.hsbc.co.in