COMMON SIP REGISTRATION CUM ONE TIME DEBIT MANDATE FORM

(New Investors subscribing to the scheme through SIP must submit this form along with Common Application Form)
(all points marked * are mandatory)

TRUST MUTUAL FUND
CLEAR * CREDIBLE * CONSISTENT

1. DISTRIBUTOR INFORMATION

ARN/ RIA Code/ Portfolio Manager's Registration (PMRN)#	Sub Broker's ARN	Internal Code for Sub-Broker/ Employee	Employee Unique Identification Number (EUIN)	FOR OFFICE USE ONLY Registrar/ Bank Serial No./ Date and Time of Receipt
ARN- 95070	ARN-		E- (Of Individual ARN holder or of employee/ Relationship Manager/Sales Person of the Distributor) E-101834	

#By mentioning RIA / PMRN code, I/We authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of TRUST Mutual Fund.

Declaration for "execution-only" transaction (only where EUIN box is left blank) – I/We hereby 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 or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales /sub broker of the distributor and the distributor has not charged any advisory fees on this transaction .

Signature of First/Sole Unit Holder/Guardian	Signature of Second Unit Holder	Signature of Third Unit Holder

Please (✓) as applicable:

☐ **OTM Debit Mandate is already registered in the folio. [No need to submit again]. SIP Auto debit can start in 10 Days i.e. for debit date 15th, form can be submitted till 4th of the month.**

☐ **OTM Debit Mandate is attached and to be registered in the folio. SIP Auto debit will start after mandate registration which takes upto 21 days.**

1. UNITHOLDER INFORMATION

Folio No. | | | | | | | | | | | | | PAN No. | | | | | | | | | | |

1st Unit Holder Name (As per PAN) Mr. Ms. M/S

Name of the Guardian / POA Holder Mr. Ms. M/S

2. INVESTMENT DETAILS

Scheme Name **TRUSTMF**

Plan - ☐ Regular ☐ Direct

Option - ☐ Growth ☐ IDCW* Reinvestment ☐ IDCW* Payout

*IDCW - Income Distribution cum Capital Withdrawal Option

Note: Default Option will be Growth in case option not selected or in case of any ambiguity

3. SIP DETAILS

OTM Reference No. | | | | | | | | | | | | | | | | | | | | | (If Multiple One Time Mandate are registered)

Installment Period: From Date D D M M Y Y Y Y To Date* D D M M Y Y Y Y *(Maximum SIP end date should be upto 40 years from the start date)

First SIP Instalment via: Cheque No. | | | | | | Drawn on Bank and Branch

Amount: ₹ A/c. No. | | | | | | | | | | | | | | | | |

Amount per installment: ₹ Amount in Words

I/We hereby authorize TRUST Mutual Fund and their authorized service providers to debit my/our following bank account by NACH clearing for collection of SIP payments.
Note: Please allow 1 month for NACH Mandate to register and start.

Frequency: (Please ✓)	☐ Weekly (Please ✓)	☐ Fortnightly (Please ✓)	☐ Monthly** (Please ✓)	☐ Quarterly (Please ✓)
	Dates: ☐ 1 ☐ 8 ☐ 15 ☐ 22	Dates: ☐ 1 ☐ 16	SIP Date: D D (Any day from 1st to 28th of the month)	SIP Date: D D (Any day from 1st to 28th of the month)

** Tenth of the month will be the default frequency if not ticked

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ACKNOWLEDGMENT SLIP (To be filled in by the investor)

Stamp & Signature

TRUST MUTUAL FUND

Received From

Instrument No.	Dated	SIP Frequency	SIP Amount (Rs.)	Scheme
	D D M M Y Y			

4. SIP TOP-UP (OPTIONAL)

TOP-UP Frequency (Please tick ✓) ☐ Half-Yearly ☐ Yearly (If TOP-UP frequency is not selected, then the default option will be Yearly.)

☐ FIXED SIP TOP-UP	☐ VARIABLE SIP TOP-UP
SIP TOP-UP Amount: ₹ (Minimum Top-up Amount is Rs. 500)	**SIP TOP-UP (In percentage):** ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ Other_____ (multiples of 5% only)
If SIP TOP-UP type is not selected, then the default will be FIXED TOP-UP with minimum TOP-UP Amount.	(If variable SIP TOP-UP percentage not selected then default will be 5%)

SIP TOP-UP CAP

Cap Amount*: ₹ **OR** **Cap Month-Year#:** M M Y Y Y Y

(Investor has to choose only one option – either CAP Amount or CAP Month-Year)

***TOP-UP CAP Amount:** Investor has an option to freeze the SIP TOP-UP amount once it reaches a fixed predefined amount. This amount should be same as the maximum amount mentioned in the bank mandate. In case of discrepancy between the CAP Amount & the maximum amount then whichever is lower shall be considered as the default amount of SIP till the end of SIP tenure.

 # TOP-UP CAP Month - Year: It is the date from which SIP TOP-UP amount will cease and last SIP installment including TOP-UP amount will remain constant from Cap date till the end of SIP tenure.

5. DECLARATION & SIGNATURE(S)

I/We have read and understood the contents of the Scheme Information Document(s) and Statement of Additional Information and the terms & conditions of SIP enrolment through Direct Debit/NACH and agree to abide by the same. I/We hereby apply for the units of the scheme for enrolment under the SIP of the following Scheme(s)/ Plan(s) / Option(s) and agree to abide by the terms and conditions of the same. I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in NACH/Direct Debit.

I/We authorise the bank to honour the instructions as mentioned in the application form. I/We also hereby authorise bank to debit charges towards verification of this mandate, if any. I/We agree that Trust Asset Management Private Limited / Trust Mutual Fund (including its affiliates), and any of its officers directors, personnel and employees, shall not be held responsible for any delay/wrong debits on the part of the bank for executing the direct debit instructions of additional sum on a specified date from my account. 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 responsible. I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I/We have not received nor been 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/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

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.

Date D D M M Y Y Y Y	✕ Signature of First Applicant.	Signature of Second Applicant.	Signature of Third Applicant.

This form should be accompanied with One Time Mandate Form (OTM)

Toll Free Number	Email ID	Website
1800 267 7878	investor.service@trustmf.com	www.trustmf.com

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

TRUST MUTUAL FUND
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ONE TIME BANK MANDATE

(NACH / OTM / DIRECT DEBIT FORM)

UMRN | FOR OFFICE USE ONLY | Date | D D M M Y Y Y Y

Tick (✓)	
CREATE	✓
MODIFY	X
CANCEL	X

Sponsor Bank Code: FOR OFFICE USE ONLY

Utility Code: FOR OFFICE USE ONLY

I/We hereby authorize **TRUST MUTUAL FUND** to debit (tick ✓) SB | CA | CC | SB-NRE | SB-NRO | Other

Bank Account No.

With Bank: Name of customers bank

IFSC

or MICR

An amount of Rupees: IN WORDS

₹ IN FIGURES

Frequency: [X] Daily [X] Weekly [X] Bi-Monthly [X] Monthly [X] Quarterly [X] Half-yearly [X] Annually [✓] As & when presented

Debit Type: [X] Fixed Amount [✓] Maximum Amount

Reference/Application No.

Phone No.

Scheme Name

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 confirm 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. (3) 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. (4) I/We understand and accept that in case transaction/s initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law (including Negotiable Instruments Act).

PERIOD

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.

Signature of Primary Account Holder As per Bank Record	Signature of Account Holder As per Bank Record	Signature of Account Holder As per Bank Record
1. Name as in Bank records	2. Name as in Bank records	3. Name as in Bank records

INSTRUCTIONS TO INVESTORS FOR FILLING UP THE SYSTEMATIC INVESTMENT PLAN (SIP) FORM

Please refer the Key Information Memorandum (KIM) and Scheme Information Document (SID) of the respective Scheme for applicable NAV, risk factors, load (exit entry) and other information on the respective schemes before investing.

1. Investors are required to submit Form along with a photo copy/cancelled cheque of Debit Bank Account at least 15 Business days before the first SIP Installment date.
2. Investor shall have the option of choosing any date of the month as the SIP date. If SIP date is not mentioned, default date would be considered as 10th of every month. If the SIP date falls on a non-business day or a bank holiday, the SIP debit will be processed on the following business day.
3. Default Option for SIP - The Investor is required to furnish all the stipulated details in the Application, SIP Mandate, NACH Forms etc. However, in case, any Investor fails to mention the "start date" and/ or "end date" for the SIP Instalment, the NACH application may be rejected by the Bank. Further, If Investor fails to mention the "start date" the default date is 10th of the subsequent month, after completing 21 days from the date of registration of SIP. The maximum end period for any New SIPs registered through the OTMs will be up to 40 years in line with the OTM or the maximum period of the SIP is not more than 40 years.
4. Please refer below table for minimum SIP amounts and minimum SIP instalments:

Frequency under SIP Facility	Minimum Amount	Minimum number of installments
Weekly	Rs. 1000 and in multiples of any amount thereafter	24 installments
Fortnightly	Rs. 1000 and in multiples of any amount thereafter	12 installments
Monthly	Rs. 1000 and in multiples of any amount thereafter	6 installments
Quarterly	Rs. 3000 and in multiples of any amount thereafter	4 installments

5. If no amount is mentioned in the NACH application minimum SIP instalment amount would be considered.
6. For details about the Scheme and its facility please refer the SID, SAI & KIM of the respective schemes / Addendum issued from time to time carefully before investing.
7. The SIP will be discontinued automatically if payment is not received for three successive instalments.
8. Investors can discontinue a SIP at any time by sending a written request to any Official Point of Acceptance or to the registrar KFin Technologies Limited. Further, same can be stopped through our website through investor portal.
9. Mandate will be processed through NACH platform offered by NPCI.
10. Investor will not hold TRUST 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 NACH Debit/ Local/Bank holiday. TRUST Mutual Fund, its registrars and other service providers shall not be held responsible or liable for damages / compensation / loss incurred by the investor as a result of using the SIP or NACH/ Auto debt facility. The investor assumes the entire risk of using this facility and takes full responsibility.
11. If date selected by the investor is prior to the 15 Business days, the SIP will be start from next available date.
12. As per the latest circular number NPCI/2023-24/NACH/008 dated August 18,2023 from NPCI, the maximum end period for any New SIPs registered through the OTMs will be up to 40 years in line with the OTM or the maximum period of the SIP is not more than 40 years. Existing SIPs will not get impacted on the above conditions.
13. Maximum limit of 1 Crore for Physical OTM/ E-mandate/ E-Sign.

INSTRUCTIONS TO FILL THE NACH DEBIT MANDATE FORM

1. The Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form.
2. Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque bank account details are subject to third party verification.
3. Investors are deemed to have read and understood the terms and conditions of NACH Facility, SIP registration through NACH facility, the Scheme Information Document, Statement of Additional Information, Key Information memorandum, Instructions and Addendum issued from time to time of the respective Scheme(s) of TRUST Mutual Fund.
4. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
5. Please mention the amount in figures and words.
6. Please fill all the required details in the Debit mandate Form for NACH. The sole/first holder must be one of the holders in the bank account.
7. The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
8. The 9 digit MICR or the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You will be able to find these code on cheque leaf.

Toll Free Number	Email ID	Website
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Mutual Fund investments are subject to market risks, read all scheme related documents carefully.