

The Plan & Option is indicated clearly.

The Cheque / DD is drawn in favour of Scheme Name and duly signed.

APP No.:

thereof is attached with the Application.

Application to be submitted at least 21 working days before the commencement of SIP Please read the instructions carefully, before filling up the application			
REGISTRATION CUM MANDATE FORM FOR ECS (Debit clearing / Auto Debit) First Investment in SIP vide a cheque and subsequent investments via ECS or Auto Debit, available in select cities only.			
New SIP Registration - by existing investor			
		SIP SUBSCRIPTION DETAILS (Separate Mandate Form is Required	for Investment in each Scheme / Plan
		SCHEME NAME Growth Option Bonus O	ption Dividend Reinvestment Dividend Payout
		Rs. Each SIP Amount Rs Each	SIPAmount Rs. Each SIPAmount Rs. Each SIPAmount
(SIP Amount in Rupees)			
Frequency (Please 🛩) 🗌 Monthly (default) 🔲 Quarterly	SIP Date : 2 nd 10 th 18 th 28 th		
Enrolment Period : From(MM-YYYY)	To(MM-YYYY)		
1st SIP Instalment Cheque No. Dated	(Note: Cheque should be drawn on the same bank, as per details provided below.		
I/We hereby, authorise Reliance Mutual fund and their authorised service prov			
debit to account for collection of SIP payments. PARTICULAR OF BANK ACCOUNT			
Accountholder Name as in Bank Records	Date of Birth*		
	IIIIIIIIIII		
Bank Name	Account Type SB Current Cash Credit		
Branch	Account No.		
Branch City	Mandatory Enclosures:		
PIN 9 Digit MICR Code* M18101 d1811 0 (*Mandatory: Please enter the 9 digit number that appears after your cheque	number)		
MICR code starting and / or ending with 000 are not valid for ECS. DECLARATION	CICNATURE (C		
I/We hereby, declare that the particulars given above are correct and express	SIGNATURE/S Sole/ 1" applicant/		
my willingness to make payments referred above through participation in ECS/Auto Debit. If the transaction is delayed or not effected at all for reasons	Guardian		
of incomplete or incorrect information. I/We would not hold the user	Authorised Signatory		
institution responsible. I/We will also inform Reliance Mutual Fund about any changes in my bank account. I/We have read and agreed to the terms and	2 rd applicant / Authorised Signatory		
conditions mentioned overleaf.	3 rd applicant		
Place: Date: D _ M _ M _ Y _ Y _ Y _ Y	Authorised Signatory		
FOR OFFICE USE ONLY (Not to be filled in by Investor)			
Recorded on	Scheme Code		
Recorded by	Credit Account Number		
Bank use Mandate Ref. No.	Customer Ref. No.		
Authorisation of the Bank Account Hoder (to be signed by the Acc	ount Holder)		
SIGNATURE/S (As in Bank Records)	This is inform you that I/We have registered with Reliance Mutual Fund through their authorised Service Provider TechProcess Solutions Ltd. for the		
Sole / 1* applicant / Guardian	RBI's Electronic Clearing Service (Debit Clearing) / Auto Debit Facility and		
Authorised Signatory	that my payment towards my investment in Reliance Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We		
2 nd applicant /	authorised the representative carrying this ECS / Auto Debit to account mandate form to get it verified & executed.		
Authorised Signatory	Committee of the Commit		
	2		
3" applicant Authorised Signatory			
national Signature	Bank Account Number		
CHECKLIST BEFORE SUBMITTING APPLICATION			
Please ensure that:	□ Application Number is mentioned on the reverse of the Cheque / DD.		
The application form is completed in all respect and signed by all the	☐ If the payment is being by way of Pay Order / Cheque issued from NRE or		
applicants.	FCNR account, the Banker's Account Debit Certificate specifying the		
Bank Account Details are entered completely and correctly	source account or a photocopy of the Cheque is attached with the application form.		
Income Tax Permanent Account Number (PAN) of ALL the applicants are mentioned (mandatory for investment amount of Rs.50,000/- or more).			
☐ If PAN is not available, Form 60 or Form 61 in duplicate, with requisite	cancelled cheque is attached with the SIP Auto Debit Form.		
address proof has been attached.	☐ If the application is made under a Power of Attorney, a duly attested copy		

SIP AUTO DERIT (ECS) MANDATE