

ECS Debit facility for SIP is currently available for:

Account holders of all banks participating in local clearing at Agra, Ahmedabad, Allahabad, Amritsar, Anand, Asansol, Aurangabad, Bangalore, Bardhaman, Baroda, Belgaum, Bhavnagar, Bhillwara, Bhopal, Bhubaneswar, Bijapur, Bikaner, Calicut, Chandigarh, Chennai, Cochin, Coimbatore, Cuttack, Davangere, Dehradun, Delhi, Dhanbad, Durgapur, Erode, Gadag, Gangtok, Goa, Gorakhpur, Gulbarga, Guwahati, Gwalior, Haldia, Hasan, Hubli, Hyderabad, Imphal, Indore, Jabalpur, Jaipur, Jalandhar, Jammu, Jamnagar, Jamshedpur, Jodhpur, Kakinada, Kanpur, Kolhapur, Kolkata, Kota, Lucknow, Ludhiana, Madurai, Mandya, Mangalore, Mumbai, Mysore, Nagpur, Nasik, Nellore, Patna, Pondicherry, Pune, Raichur, Raipur, Rajkot, Ranchi, Salem, Shillong, Shimla, Shimoga, Sholapur, Siliguri, Surat, Tirunelveli, Tirupati, Tiruppur, Trichur, Trichy, Trivandrum, Tumkur, Udaipur, Udipi, Varanasi, Vijaywada, Vizag

Electronic Debit for the account holders of the following banks:

Allahabad Bank, Axis Bank, Bank of Baroda, Bank of India, Citi Bank, Corporation Bank, Federal Bank, ICICI Bank, IDBI Bank, IndusInd Bank, Kotak Mahindra Bank, Punjab National Bank, South Indian Bank, State Bank of India, State Bank of Patiala, UCO Bank, Union Bank of India, United Bank of India

Authorization to pay SIP installments through Electronic Clearing Service (ECS) / Electronic Debit

I/We hereby, authorise Motilal Oswal Mutual Fund or their authorised service provider for Motilal Oswal Asset Management Company Limited to debit my/our bank account by ECS (Debit Clearing) / Electronic Debit for the collection of SIP installments.

Distributor ARN

EUIN

1 UNIT HOLDER INFORMATION

Existing Folio Number

Name of the First Holder

Mobile No.

Email ID

2 SYSTEMATIC INVESTMENT PLAN (SIP) / MICRO SIP

Scheme

Plan

☐ Direct (Default Option)

☐ Regular

Option

☐ Growth (Default Option)

☐ Div - Payout

☐ Div - Reinvest (Default Option)
(N/A for MOST Focused Long Term Fund)

Subsequent SIP Instalment Amount (₹)

Weekly ☐ 1st ☐ 7th ☐ 14th ☐ 21st ☐ 28th
Fortnightly ☐ 1st-14 ☐ 7th-21st ☐ 14th-28th
Monthly ☐ 1st ☐ 7th(Default) ☐ 14th ☐ 21st ☐ 28th
Quarterly ☐ 1st ☐ 7th(Default) ☐ 14th ☐ 21st ☐ 28th

SIP Period From

M M Y Y To Perpetual ☐ other M M Y Y

3 BANK DETAILS (Centralised Bank Account (CBS) Number is mandatory for ECS and Direct Debit)

A/c Holder Name

Bank Name

Bank A/c No.

Type

☐ Current

☐ Savings

☐ NRO

☐ NRE

☐ FCNR

☐ Others

Specify

Branch Name

City

Pin

IFSC Code (11 digit)*

MICR Code (9 digit)*

*Mentioned on your cheque leaf

Please specifically mention the MICR code of you bank branch in case you have a payable at par cheque book. In case of incorrect/ incomplete bank details it will be captured from attached cheque copy on a best effort basis.

I/We hereby declare that the particulars given above are correct and express my willingness to pay the installments referred above through participation in ECS / Electronic Debit. 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 will also inform Motilal Oswal Asset Management Company Ltd. about any changes in my bank account. I/We also agree to bear any charges pertaining to availing of this facility.

Signatures

X First / Sole Applicant

Second Applicant

Third Applicant

Place

Date

4 FOR BANK USE ONLY

We hereby, certify that the particulars furnished above are correct as per our records, and we hereby, declare that a copy of this form, duly completed, has been submitted to us.

Branch

Date

Signature of the Authorised Official from the Bank

Bank Stamp

5 AUTHORISATION OF THE BANK ACCOUNT HOLDER

This is to inform that I / We have registered for the RBI's ECS (Debit Clearing) / Electronic Debit and that my payment towards SIP installments shall be made from my / our below mentioned bank account with your bank. I / We authorise the representative carrying this ECS / Electronic Debit mandate form to get it verified and executed.

X Account Holder's Signature

Joint Account Holder's Signature

Account Number



Standing Instructions/ Auto Debit form for Systematic Investment Plan (SIP) (Only for HDFC Bank Investors)

Distributor ARN

EUIN

UNIT HOLDER INFORMATION

Existing Folio Number / Name of the First Holder

Debit Mandate for HDFC Bank. Application for Standing Instruction Maintenance for SIP / MICRO SIP

To, The Manager,

☐ HDFC Bank Ltd.

Branch

Date

Sub: Request for Maintenance of a Standing Instruction for SIP / MICRO SIP

I / We

hereby authorize you to deduct on a Monthly basis (as a Standing Instruction) from my / our following Current / Savings Account and remit the same to Motilal Oswal Mutual Fund as per the details given below.

| | | | |
|--|--|------|--------|
| Nature of Instruction | Standing Instruction | | |
| Purpose of Standing Instruction | Payment of SIP Installment of Motilal Oswal Mutual Fund | | |
| Name of the Scheme | <input type="text"/> | Plan | Option |
| Debit Account no. | <input type="text"/> | | |
| Account Holder's Name | <input type="text"/> | | |
| SIP Amount (₹) | <input type="text"/> | | |
| Frequency, Date & Period | <p> Weekly <input checked="" type="checkbox"/> 1st <input checked="" type="checkbox"/> 7th <input checked="" type="checkbox"/> 14th <input checked="" type="checkbox"/> 21st <input checked="" type="checkbox"/> 28th Fortnightly <input type="checkbox"/> 1-14 <input type="checkbox"/> 7-21 <input type="checkbox"/> 14-28 Monthly <input type="checkbox"/> 1 <input type="checkbox"/> 7 (Default) <input type="checkbox"/> 14 <input type="checkbox"/> 21 <input type="checkbox"/> 28 Quarterly <input type="checkbox"/> 1 <input type="checkbox"/> 7 (Default) <input type="checkbox"/> 14 <input type="checkbox"/> 21 <input type="checkbox"/> 28 SIP Period Form <input type="text"/> To <input type="checkbox"/> Perpetual <input type="checkbox"/> Other <input type="text"/> </p> | | |

In case of incorrect/ incomplete bank details it will be captured from attached cheque copy on a best effort basis.

I/We (name of unit holder) undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I/We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the Mutual Fund or the bank responsible. If the date of debit to my/our account happens to be a non-business day as per the Mutual Fund, execution of the SIP will happen on the day of holiday and allotment of units will happen as per the terms and conditions listed in the Offer Document / SID of the Mutual Fund. HDFC Bank shall not be liable for, not be in default by reason of, any failure or delay in completion due to riot, strike, mutiny, revolution, fire flood, fog, war, lightning, earthquake, change of government policies, unavailability of Bank's computer system, force majeure events, or any other cause of peril which is beyond the bank's reasonable control and which has the effect of preventing the performance of the contract by HDFC Bank. I/We acknowledge that no separate intimation will be received from HDFC Bank in case of non-execution of the instructions for any reasons whatsoever.

Yours faithfully,

X

Account Holder/s Signature

Sign for HDFC Bank Auto Debit facility.

Signature also required in Form 1.

For CPU Use Only

Maintained on:

Account Holder's Name:

Account No.: Amount:

SIP Start Date: SIP End Date: Next SIP Date:

Maintained by: