

| ARN & ARN Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Sub Agent's ARN / Bank Branch Code | Employee Unique Identification Number (EUIIN)                                                         | RIA/PMRN Name & Code | Internal Code for Sub-Agent / Employee                                                                 | FOR OFFICE USE ONLY (TIME STAMP) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------------|----------------------------------|
| <p>ARN Declaration - Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors assessment of various factors including the service rendered by the distributor.</p> <p><b>Consent for sharing Transaction Feed with RIA/PMRN (Applicable for investments through RIA/PMRN only):</b> <input type="checkbox"/> I/We hereby give my/our consent to share/provide the transaction feed / portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan in the scheme(s) of Mahindra Manulife Mutual Fund, to the above mentioned SEBI Registered Investment Advisor (RIA) or SEBI Registered Portfolio Manager (PMRN).</p> <p><b>EUIIN Declaration (only where EUIIN box is left blank) (Refer General Instruction 1):</b> <input type="checkbox"/> I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or not with standing the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.</p> |                                    |                                                                                                       |                      |                                                                                                        |                                  |
| <br>First/ Sole Applicant/ Guardian / PoA Holder / Karta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                    | <br>Second Applicant |                      | <br>Third Applicant |                                  |

(✓) ☐ SIP/ Top-Up SIP ☐ Micro SIP ☐ Change in Bank Account for Auto Debit (Proceed directly to fill the NACH mandate and provide a cancelled cheque)

|                                                      |      |  |
|------------------------------------------------------|------|--|
| 1. Investment and SIP Details: First / Sole Investor | Name |  |
|                                                      |      |  |

|                                       |                                                                                                                                                                                                                                                                                                                                                                                                                         |                                  |                                                                         |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------|
| <b>Folio No.(Existing Unitholder)</b> | <div style="border: 1px solid black; height: 20px; width: 100%; display: flex; justify-content: space-between;"> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> <div style="width: 10%;"></div> </div> | <b>KYC Identification Number</b> | <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------|

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|                                                                                                                                              |  |                                                                                                                                                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PAYMENT THROUGH <input type="checkbox"/> SINGLE CHEQUE <input type="checkbox"/> MULTIPLE CHEQUES Refer Note (i) and general instruction 4 D. |  | In case of, Payment through single cheque, for investment in more than 1 Scheme the cheque/DD should be issued in favour of 'Mahindra Manulife MF Multiple Scheme' for the total investment amount mentioned below and the cheque/DD details need to be filled only once. |
|----------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| <input type="checkbox"/> New SIP <input type="checkbox"/> Upgrade Existing SIP | SIP Installment Amount (₹) | Frequency                                  | SIP Date(s)/Days for Weekly/<br>Monthly/ Quarterly Frequency<br>(Refer instruction 1(a))                                                                   | Period                                         | Top-Up for Monthly & Quarterly Frequency<br>(Optional) (Refer instruction 1b) |                                            |                                           |
|--------------------------------------------------------------------------------|----------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------|
| <b>1. Mahindra Manulife</b>                                                    |                            |                                            |                                                                                                                                                            |                                                | Top-Up Details                                                                | CAP Details (Optional)                     | Frequency                                 |
| <br><br>                                                                       |                            | <input type="checkbox"/> Weekly            | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed (Default) <input type="checkbox"/> Thu <input type="checkbox"/> Fri | Start: [M][M][Y][Y][Y][Y]                      | Amount*(₹)<br>[ ] [ ] [ ] [ ] [ ] [ ]                                         | CAP Amount* (₹)<br>[ ] [ ] [ ] [ ] [ ] [ ] | <input type="checkbox"/> Yearly (Default) |
| Cheque No.                                                                     |                            | <input type="checkbox"/> Monthly (Default) | [1] [2] [3] [4] [5] [6] [7] [8] [9] [10] [11]<br>[12] [13] [14] [15] [16] [17] [18] [19] [20] [21] [22]                                                    | End: [M][M][Y][Y][Y][Y]                        | Or<br>Percentage<br>[ ] [ ] [ ] [ ] [ ] [ ]                                   | Or<br>CAP Month-Year<br>[M][M][Y][Y][Y][Y] | <input type="checkbox"/> Half yearly      |
| Cheque Date                                                                    |                            | <input type="checkbox"/> Quarterly         | [23] [24] [25] [26] [27] [28] [29] [30] [31]                                                                                                               | Ensure SIP Duration is not more than 40 years. |                                                                               |                                            |                                           |
| <input type="checkbox"/> New SIP <input type="checkbox"/> Upgrade Existing SIP |                            | <input type="checkbox"/> Weekly            | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed (Default) <input type="checkbox"/> Thu <input type="checkbox"/> Fri | Start: [M][M][Y][Y][Y][Y]                      | Amount*(₹)<br>[ ] [ ] [ ] [ ] [ ] [ ]                                         | CAP Amount* (₹)<br>[ ] [ ] [ ] [ ] [ ] [ ] | <input type="checkbox"/> Yearly (Default) |
| <b>2. Mahindra Manulife</b>                                                    |                            | <input type="checkbox"/> Monthly (Default) | [1] [2] [3] [4] [5] [6] [7] [8] [9] [10] [11]<br>[12] [13] [14] [15] [16] [17] [18] [19] [20] [21] [22]                                                    | End: [M][M][Y][Y][Y][Y]                        | Or<br>Percentage<br>[ ] [ ] [ ] [ ] [ ] [ ]                                   | Or<br>CAP Month-Year<br>[M][M][Y][Y][Y][Y] | <input type="checkbox"/> Half yearly      |
| <br><br>                                                                       |                            | <input type="checkbox"/> Quarterly         | [23] [24] [25] [26] [27] [28] [29] [30] [31]                                                                                                               | Ensure SIP Duration is not more than 40 years. |                                                                               |                                            |                                           |
| Cheque No.                                                                     |                            |                                            |                                                                                                                                                            |                                                |                                                                               |                                            |                                           |
| Cheque Date                                                                    |                            |                                            |                                                                                                                                                            |                                                |                                                                               |                                            |                                           |

## 2. Demat Account Details (Optional)

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The investors shall receive payments of Redemption/ IDCW proceeds in the Bank Account linked to the Demat A/c. <sup>A</sup>Refer General instruction No 14 in the KJM for PAN/PEKRN. <sup>#</sup> Please attach KYC proof if not already KYC validated

**Declaration:** I/We have read and understood the contents of the Scheme Information Document and Statement of Additional Information and the terms & conditions of SIP enrolment through Auto Debit/NACH and agree to abide by the same. I/We hereby apply for enrolment under the SIP of above mentioned Scheme - 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 true and correct and we agree to make all payments referred through participating bank/ banks authorised 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 and I/We agree that the AMC/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 Auto Debit instruction 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 of this mandate form 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.

|                                                                                    |                                                                                     |                                                                                       |
|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
|  |  |  |
| <b>First/ Sole Applicant/ Guardian / PoA Holder / Karta</b>                        | <b>Second Applicant</b>                                                             | <b>Third Applicant</b>                                                                |



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**One Time Bank Mandate** (NACH/Direct Debit Mandate Form)
 Date: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

[illegible][illegible]

I/We hereby authorize: **Mahindra Manulife Mutual Fund** to debit (Please ✓) ☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Others\_\_\_\_\_

Bank A/c No.: 



 IFSC:

[illegible]

|                     |          |   |            |
|---------------------|----------|---|------------|
| an amount of Rupees | In Words | ₹ | In Figures |
|---------------------|----------|---|------------|

Frequency: ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ Yearly ☒ As & when presented Debit Type: ☐ Fixed Amount ☒ Maximum Amount

|                  |  |            |  |
|------------------|--|------------|--|
| <b>Folio No.</b> |  | <b>PAN</b> |  |
|------------------|--|------------|--|

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 banks. 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. 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 | From | DD / MM / YYYY |                                          |                                  |                                  |
|        | To   | DD / MM / YYYY | Signature of Primary Bank Account Holder | Signature of Bank Account Holder | Signature of Bank Account Holder |

|       |                         |                         |                         |  |
|-------|-------------------------|-------------------------|-------------------------|--|
| Phone |                         |                         |                         |  |
|       | Name as in bank records | Name as in bank records | Name as in bank records |  |

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

## Terms & Conditions for SIP/ Top-Up SIP

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

| Particulars                                                    | Frequency available (Default day for weekly frequency: Wednesday), (Default Frequency: Monthly)                                                                                                                                                                                                                                  |         |                                                                                                                                                                                                                  |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                | Weekly                                                                                                                                                                                                                                                                                                                           | Monthly | Quarterly                                                                                                                                                                                                        |
| SIP Transaction Dates                                          | Any day of the Week (except Saturday & Sunday)                                                                                                                                                                                                                                                                                   |         | Any date*                                                                                                                                                                                                        |
| Minimum no. of installments and Minimum amount per installment | <b>For MMETSF</b> - 6 installments of Rs. 500/- each and in multiples of Rs. 500/- thereafter;<br><b>For MMAPRF</b> - 6 installments of Rs. 1,000/- each and in multiples of Re. 1/- thereafter;<br><b>For schemes other than MMAPRF &amp; MMETSF</b> - 6 installments of Rs. 500/- each and in multiples of Re. 1/- thereafter. |         | <b>For MMETSF</b> - 4 installments of Rs. 1500/- each and in multiples of Rs. 500/- thereafter; <b>For schemes other than MMETSF</b> - 4 installments of Rs. 1500/- each and in multiples of Re. 1/- thereafter. |
| Mode of Payment                                                | National Automated Clearing House (NACH) Facility and Direct Debit mandate through select banks with whom AMC may have an arrangement, from time to time.                                                                                                                                                                        |         |                                                                                                                                                                                                                  |

\* 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 31st, SIP installment for the month of September will be processed on 30th September. However, if 30th September happens to be a Non-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. Any day of the week or more day(s) can be selected by the Unit Holders under the Weekly frequency.

**MMETSF:** Mahindra Manulife ELSS Tax Saver Fund; **MMAPRF:** Mahindra Manulife Asia Pacific REITs FOF;

1 (b). Top-Up SIP Specifications facility available for monthly and quarterly frequencies only

| Particulars          | Minimum Top-up installment                                                                |                                               | Top Up Frequency       |                   |
|----------------------|-------------------------------------------------------------------------------------------|-----------------------------------------------|------------------------|-------------------|
|                      | For schemes other than MMETSF                                                             | For MMETSF                                    | 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 • Half Yearly | • Yearly          |
| Top up by Percentage | 10% and in multiples of 1% thereafter.<br>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 and the 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.

Investors/Unit holders are also requested to note that, in case of cancellation/discontinuation of SIP enrolment, any SIP Top-up enrolment linked with the underlying SIP (whether existing OR future Top-Ups) shall also stand cancelled.

**Default options :** Default day for weekly frequency - Wednesday Default Frequency - Monthly Default Date (for both monthly and quarterly frequency) - 10th Default Mode - Top-up by amount. Default Top-up frequency - Yearly.

- For New / Existing investors if 1st SIP Installment is through NACH mandate kindly attach Blank cancelled cheque or Copy of cheque.
- Ensure the duration in the SIP Registration as well as Debit Mandate form is not more than 40 years.
- 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.
  - 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.
- The first installment will be processed at Applicable NAV based on the timing of credit receipt of funds to the bank account of the Scheme before the cut-off time i.e. available for utilization before the cut-off time 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.
- In case of MMETSF each SIP installment will be subject to a Lock In period of three years from the date of allotment of Units.
- In case of auto cancellation, the below given uniform timeline for treating a SIP as closed/cancelled will be adopted by the AMC

| S No. | SIP Frequency   | No. of failed debit attempts prior to cancellation of SIP |
|-------|-----------------|-----------------------------------------------------------|
| 1     | Weekly, Monthly | 3                                                         |
| 2     | Quarterly       | 2                                                         |

- SIP registered for more than one day or all days of the week under the **Weekly** frequency OR 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.
- 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.
- The Load structure prevailing at the time of submission of the SIP application (whether fresh or extension) will apply for all the Installments indicated in such application.
- AMC will ensure cancellation of auto-debit/SIP within 2 working days of such request submitted by the investor.
- The facility will be automatically terminated upon receipt of intimation of death of the Unit holder.
- 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.
- Investors will not hold Mahindra Manulife Mutual Fund / Mahindra Manulife Investment Management 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.
- 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.
- Mahindra Manulife Mutual Fund / MMIMPL, its 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.
- Top-up SIP facility is available only through NACH debit mandate. For Upgrading fill complete information for active SIP. In case of Quarterly SIP and Percentage based Top up, only Yearly Top-up frequency is available. Percentage based Top-up feature is not available for Mahindra Manulife ELSS Tax Saver Fund.
- CAP Amount:** Max SIP installment amount (including Top-up). In case, the SIP installment amount exceeds the maximum amount mentioned in the debit mandate, the SIP will continue with the last SIP installment amount. CAP Month-Year: Month-Year from which SIP Top-Up will be discontinued.



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## 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](http://www.npci.org.in).
- 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.
- By signing the NACH mandate form the investor agrees to abide by the terms and conditions of NACH facility through NPCI ([www.npci.org.in](http://www.npci.org.in)).
- 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.
  - The Registration cum Mandate Form for NACH should be submitted at least 30 calendar days prior to next SIP cycle date.
  - 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.
  - 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.
- Please provide the cancelled cheque leaf of the Bank A/c no. for which NACH facility is registered.
- 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 investor service centre.
- Investor can choose to discontinue the SIP facility under folio without cancelling the UMRN.
- 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 cheque next to the cheque number.
- In case of existing investor, if application is received without existing UMRN then the last UMRN registered in the folio would be considered.
- As per NPCI Circular, with effect from 1<sup>st</sup> April 2024, the duration of the NACH mandate can be for a maximum period of 40 years i.e. the gap between the "From" date and "To" date mentioned in the NACH Mandate form cannot exceed 40 years.

## 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 eligible for Auto Debit Facility.