COMMON APPLICATION FORM For Resident Indians and NRIs/FIIs/FPIs



	Name / ARN No.	EFUKE FI	ILLING UP THE FOR Sub Broker			o dompio		ub Broker Cod		JUNEL	_		e Uniq			(EUII	N)	Арр	lication No.	
N is mandatory for	'Execution Only" transa	ctions. Ref	f. Instruction No. 9	this transaction	on in avagud	tod without	t any interaction	or advice by the arm	loves (rolati	ionohin	managari	nalaa nar	oon of the	abouto	diatribut	or/oub	brokov	or note	ithatanding the o	adviso s
	t the EUIN box has been i y, provided by the employ						t any interaction	or advice by the em	ioyee/reiau	ionsnip	manager/	sales per	SON OF UN	e above	JISTIDUT	OI/SUD	Droker	or notw	iurstanding the a	.avice o
Firs	st Applicant / Autho	rised Sig	gnatory				Second Ap	plicant							Third	Applio	cant			
	N CHARGES FO														nveetr	or) or	₹100	V- (for	investor othe	or than
	iption (lumpsum) ar ovestor) will be dedu																			
	THOLDER pleas	e till in	your Folio No.,	, Name &	Email I	ID and	then proc	eed to Sectio	1 5 (App	licabl	le detai	ls and	Mode	of ho	ding v	will b	ie as	per tl	ie existing F	olio
xisting Folio No																				
RST/SOLE A	PPLICANT INFOF	RMATIO	N (MANDATORY) (Ref	er Instruction	No. 2,3,4)	Fresh / No	ew Investors fil	in all the blocks. (1	o 10) In ca	ase of in	vestmen	t "On bel	half of Mi	nor", Pl	ease Re	fer Ins	tructio	n no. 2(i)	
ME OF FIRST /	SOLE APPLICANT	Mr.	Ms. M/s.																	
N / PEKRN (Ma	andatory)							Date of	Birth**			M	M	Υ			Υ	Υ	☐ KYC	
DHAR Card N	umber																			
ME OF THE SE	COND APPLICANT	Mr.	Ms. M/s.																	
N / PEKRN (M:	andatory)							Date of	Birth**			M	M	γ			γ	Υ	KYC	
DHAR Card N	,																			
ME OF THE TH	IRD APPLICANT	Mr.	Ms. M/s.																	
N / PEKRN (Ma	andatory)							Date of	Birth**			M	M	Υ			Υ	Υ	☐ KYC	
DHAR Card N	umber																			
AME OF THE G	UARDIAN (In case	e First /	Sole Applicant i	s minor) /	CONTA	CT PER	SON - DES	GNATION / Po	HOLDE	ER (Ir	case	of Non	-indivi	idual	nves	tors)				
r. Ms. M/s.																				
N / PEKRN (Ma	andatory)							Date of	Birth**			M	M	Υ			Υ	Υ	☐ KYC	
DHAR Card N	umber																			
ELATIONSHIP	OF GUARDIAN (R	efer Instru	uction No. 2(ii))																	
SD CODE			TEL: OFF.		Т		1.													
			TEL: RESI		T															
			_																	
	ationship with Mi												** [Vlanda	tory in	case	the	First /	Sole Applicar	nt is N
	ase tick (🗸)] (Applic				ır [□ Olub	/ Casish	□ DIO	□ Dod	h. Cam			7 M:					t Dod		
☐ Trust	Individual NRI - NRE	Flls	□ NRI - NRO□ Bank & FI	☐ HU			/ Society	☐ PIO ership Firm	Bod	QFI	porate		Mind Oth		6	overi		nt Body Hease Spe		
	NG [Please tick (🗸)] (P				☐ Join		Si		☐ Anyo		r Surviv				nr survivo	ur)				
	SS OF FIRST / SOL			ress is not suff							Ourviv	OT (Bella	пориот	ranyono	or survivo	.,				
CITY																				
STATE														PIN C	ODE					
CKNOWLEDO	GEMENT SLIP (To 1	ha fillad in	hy the Investor		COMM	INN AR	PLICATION	FORM				⊁ -			 I			Λ	lination M-	
AGINIUWIED(JEWIEWI SEIF (10	se miled in		Sun Lit				ment Co	mnan	ny I	imit	ed.						App	lication No.	
Birla	Sun Life	On	ne India Bulls Centre ,				•		•	•			400 013				DC		ction Centre / Stamp & Signa	
	- GII - III																		MUDIC O CHIDIS	acute
Mutu	ial Fund		Toll Free : 1	1-800-270-70	00/ 1-800-	-22-7000	sms 'GAII	l' to 567679 En			asunlife.	com					БЭ	LAWIO		

Email Id													
Default Communication	node is E-mail	only. if you w	ish to recei	ive follov	vina doc	cument(s) via i	physical mode: 1	Please tick (🗸)	Account 9	Statement Annua	I Report	Other Statutory	Inforn
Facebook Id							Twitte					,	
ANK ACCOUNT DET	AII S (Please no	to that as nor	SERI Romu	latione it	ie mand	latory for invo			ount datails) Re	fer Instruction No. 3(Δ)			
lame of the Bank	TILO (FICASC IIO	le tilat as pei	SEDI Negu	iativiis ii	15 Illaliu	iatory for mive	stors to provide ti	ICII DAIIK ACC	Junt uetans) ne	iei ilisuucuon No. 5(A)			
Branch Address													
Pin Code				City									
Account No.													
Account Type (Please tick (✓)I SAVING	S CURREI	NT NRE	E NR	0 🗆 F0	CNR OTHE	RS (please specify)						
1 Digit IFSC Code							9 Digit MICR C	ode					
NVESTMENT DETAIL	C [Dlassa siels] /	11 (Rafar Instruction	on No. 5. Q. 8. 1	1/I) /If this s	action is la	ft blank only folio	will be created)						
S. *Cheque / D Scheme Name (r) Favouring		Plan/Optior Option	T	Swee	ep to r Dividend option)	Amount Invested (₹)	^DD Charges	Net Amount Paid (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and B	ranch and Account	t Num
Type of Account : Saving	datory)	NRO / FCNR / I	NRSR) *AI	II purchas	Plan / l	Option	ation of funds ^I	Refer to Instru	ction No. 5 (vi)				
Type of Account: Saving AYC DETAILS (MAIN DCCUPATION IPlease tick (datory) / II Private Se	NRO / FCNR / I	☐ Pub	lic Secto	es are s	Option ubject to realize ce Gover	nment Service	☐ Busines	s Profess	_ 0		d Housewife	ie e
Type of Account : Saving YC DETAILS (Man	datory) / II Private So Student	ector Service	☐ Pub	lic Secto	es are si or Servic	Option ubject to realize ce Gover	nment Service	☐ Busines	s Profess		lease specify)		
Type of Account : Saving YC DETAILS (Man	datory) / II Private Se	ector Service	☐ Pub	lic Secto	ees are so or Service r	Option ubject to realize ce Gover Others	nment Service s	☐ Busines	s Profess	_ 0	elease specify)		
Type of Account : Saving YC DETAILS (Man CCUPATION (Please tick (datory) /) Private So Student Private So	ector Service	☐ Pub☐ Fore	lic Sector ex Deale lic Sector ex Deale	or Servicer or Servicer or Servicer	Option ubject to realize ce Gover Others ce Gover Others	nment Service s nment Service s	□ Busines □ Busines	s Profess s Profess profess	sional	st Retired	d	ie
Type of Account: Saving YCC DETAILS (Man ICCUPATION IPlease tick (FIRST APPLICANT SECOND APPLICANT	datory) Private So Student Private So Student Private So Student	ector Service	Pub Fore	lic Sector ex Deale lic Sector ex Deale	or Servicer or Servicer or Servicer	Option ubject to realize ce Gover Others ce Gover Others	nment Service s nment Service s	□ Busines □ Busines	s Profess s Profess profess	sional	st Retired	d	e
Type of Account: Saving YCC DETAILS (Man CCUPATION IPlease tick (FIRST APPLICANT SECOND APPLICANT THIRD APPLICANT GROSS ANNUAL INCOM	datory) Private Solution Student Private Solution Private	ector Service ector Service ector Service	Pub Fore	ex Deale lic Secto ex Deale ex Deale lic Secto ex Deale	or Servicer For Servicer For Servicer	Option ubject to realize ce	nment Service s nment Service s	☐ Busines ☐ Busines ☐ Busines	s Profess s Profess Profess	sional	st Retired	d	e
Type of Account: Saving YC DETAILS (Man ICCUPATION IPlease tick (FIRST APPLICANT SECOND APPLICANT THIRD APPLICANT	datory) Private So Student Private So Student Private So Student Private So Student Below 1 L	ector Service ector Service ector Service	Pub Fore Pub Fore	llic Sector ex Deale llic Sector ex Deale llic Sector ex Deale	or Service r r r r r r r r r r r r r	Option ubject to realize ce Gover Others ce Gover Others te Gover Others 10-25 Lacs	nment Service s nment Service s nment Service s	Busines Busines Crore	s Profess s Profess	sional	elease specify) st	d Housewife	e e
Type of Account: Saving YCC DETAILS (Man CCUPATION IPlease tick (FIRST APPLICANT SECOND APPLICANT THIRD APPLICANT GROSS ANNUAL INCOM	datory) Private So Student Private So Student Private So Student Private So Student Net worth (M	ector Service ector Service ector Service actor Service 1 ac	Pub Fore Pub Fore Pub Fore	lic Sector ex Deale lic Sector ex Deale lic Sector ex Deale 5-10 La viduals F	or Service r r r r r r r ccs	Option ubject to realize ce	nment Service s nment Service s nment Service s	☐ Busines ☐ Busines ☐ Busines ☐ 1 Crore ☐	s Profess s Profess Profess > 1 Crore as on	ional Agriculturi Agricult	st Retirer lease specify) St Retirer Retirer lease specify)	d Housewife	n 1 ye
Type of Account: Saving IYC DETAILS (Man ICCUPATION IPlease tick (FIRST APPLICANT SECOND APPLICANT THIRD APPLICANT FROSS ANNUAL INCOM	datory) Private So Student Private So Student Private So Student Private So Below 1 L	ector Service ector Service ac	Pub Fore Pub Fore Pub Fore Non - Indiv	lic Sector ex Deale lic Sector ex Deale state of the sector of the sector of the sector of the sector of the secto	r r Service r r service r r ccs ccs ccs ccs ccs ccs ccs ccs ccs	Option ubject to realize ce Gover Others ce Gover Others 10-25 Lacs	nment Service s nment Service s nment Service s	□ Busines □ Busines □ Busines □ 1 Crore □	s Profess s Profess > 1 Crore as on	Agriculturi (psional Agriculturi Agriculturi (psional Agric	st Retired Recify) St Retired Recify) St Recify Recify Y Y Y Y	d Housewife	n 1 ye
Type of Account: Saving TYC DETAILS (Man DCCUPATION IPlease tick (FIRST APPLICANT SECOND APPLICANT FIRST APPLICANT FIRST APPLICANT FIRST APPLICANT SECOND APPLICANT	datory) Private So Student Private So Student Private So Student Private So Below 1 L	ector Service ector Service ac	Pub Fore Pub Fore Pub Fore Non - Indiv	llic Sector ex Deale llic Sector ex Deale llic Sector ex Deale structure for the sector of the secto	or Servicer r r r servicer r r cs	Option ubject to realize ce Gover Others ce Gover Others 10-25 Lacs	nment Service s nment Service s nment Service s	Busines Busines Crore 1 Crore	s Profess s Profess Profess > 1 Crore as on > 1 Crore OF	Agriculturi	st Retired Recify) St Retired Recify) St Recify Recify Y Y Y Y	d Housewife	rie
Type of Account: Saving TYC DETAILS (Man CCUPATION Please tick (FIRST APPLICANT SECOND APPLICANT FIRST APPLICANT FIRST APPLICANT SECOND APPLICANT FIRST APPLICANT SECOND APPLICANT SECOND APPLICANT THIRD APPLICANT THIRD APPLICANT THIRD APPLICANT TO Individuals	datory) Private So Student Private So Student Private So Student Private So Student Below 1 L Net worth (M	ector Service ector Service ector Service ac	Pub Fore Pub Fore Pub Teres Pub Fore Fore Fore	llic Sector ex Deale	or Service r r r Service r cs dual Inv a Listete	Option ubject to realize ce	nment Service s nment Service s nment Service s 25 Lacs -	Busines Busines Crore 1 Crore 1 Crore Partnership	s Profess s Profess	Agriculturi	st Retirer lease specify) St Retirer Retirer lease specify)	d Housewife	re n 1 ye
Type of Account: Saving TYC DETAILS (Man	datory) Private So Student Private So Student Private So Student Private So Student Below 1 L Net worth (M	ector Service ector Service ector Service ac	Pub Fore Pub Fore Pub Fore Pub Fore Is the co (If No, p	lic Sector ex Dealer lic Sector lic sector ex Dealer lic sector ex Deale	or Service r r r Service r r r Service r ccs ccs ccs cda dual Inv a Listeet tach ma	Option ubject to realize ce Gover Others ce Gover Others 10-25 Lacs 10-25 Lacs vestors (Com d Company or	nment Service s nment Service s nment Service s > 25 Lacs -	Busines Busines Crore 1 Crore 1 Crore Partnership	s Profess s Profess	Agriculturi	st Retirer lease specify) St Retirer Retirer lease specify)	d	n 1 ye
Type of Account: Saving TYC DETAILS (Man CCUPATION Please tick (FIRST APPLICANT SECOND APPLICANT FIRST APPLICANT FIRST APPLICANT SECOND APPLICANT FIRST APPLICANT SECOND APPLICANT SECOND APPLICANT THIRD APPLICANT THIRD APPLICANT THIRD APPLICANT TO Individuals	datory) Private So Student Private So Student Private So Student Private So Student Below 1 L Net worth (M	ector Service ector Service ector Service ac	Pub Fore Pub Fore Pub Fore Pub Fore Pub Fore Cacs For Non - Indiv	llic Sector ex Deale llic Sector ex Deale llic Sector ex Deale llic Sector ex Deale solution solution solution solution solution ex Deale solution solution ex Deale solution solution ex Deale	or Service r r or Service r r or Service cs dual Im a Listed a Listed tach ma gge / Mo	option ubject to realize ce Gover Others ce Gover Others de Gover Others to	nment Service s nment Service s nment Service s 1 > 25 Lacs - 26 Lacs - 27 Lacs - 28 Lacs - 38 Lacs - 39 Lacs - 30 L	Busines Busines Crore 1 Crore 1 Crore Partnership	s Profess s Profess	Agriculturi	st Retirer lease specify) St Retirer Retirer lease specify)	d	rie

S.	Scheme Name	Plan / Option	Net Amount Paid (₹)	Pa	ayment Details	Ŀ
Vo.	Soneme Hame	rian / option		Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch]; -
1.	BSL					
						ŀ
1		0.			Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Cheque DD No./UTR No. (in case of NEFT/RTGS) Bank and Branch

NSDL: Depository Participant Na	me·		DPID No.: I N	Beneficia	ry A/c No.	
CDSL: Depository Participant Na			Beneficiary A/c No.			
nclosed: Client Master		nny/ DIS Cony				
DMINATION DETAILS (Mandatory		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
			Guardian Name (in case of Minor)		t Signature (Mandatory) Nominee/ Guard	lian Cianatura
Nominee 1	Nominee Name and Address	1	dualdian Name (iii case oi Nimor)	Allocation %	Nonlinee/ Guaru	ian Signature
To register multiple nominee please	fill separate Multiple nomina	ation Form.				
	· · · · · · · · · · · · · · · · · · ·		Non Individual investors should mandato	orily fill seperate	e FATCA detail form	
Is the applicant(s)/ guardian's Could If Yes, please provide the following	Business Residential intry of Birth / Citizenship / g information [mandatory]	Business Regi	stered Office (for address mentioned in for idency other than India? Yes	m/existing addre □ No	ss appearing in Folio)	
Category	First Applicant (inc	cluding Minor)	Second Applicant/ Guardian		Third Applic	eant
Name of Applicant						
Place/ City of Birth						
Country of Birth						
Country of Tax Residency#						
Tax Payer Ref. ID No^						
Identification Type [TIN or other, please specify]						
Country of Tax Residency 2						
Tax Payer Ref. ID No. 2						
Identification Type [TIN or other, please specify]						
Country of Tax Residency 3						
Tax Payer Ref. ID No. 3						
Identification Type [TIN or other, please specify]						
#To also include USA, where the	ne individual is a citizen/	green card holder of	USA. ^In case Tax Identification Numb	oer is not availa	ble, kindly provide its fu	ınctional equivalent.
CLARATION(S) & SIGNATURE(S)	(Refer Instruction No. 1)					
inditions, rules and regulations governintravention of any Act, Rules, Regulativernment of India from time to time. In the Non-Individual Investors: I/We herebutual fund and the application is being is emay arise so, hereby agree to indem in NRIs only: I/We confirm that I am/weternal /Non-Resident Ordinary /FCNR ave confirm that details provided by me/I have voluntarily subscribed to the on-infirm of having read, understood and nund by the same. I further undertake insequences thereof. The ARN holder has disclosed to me/us a theme is being recommended to me/us at theme is being recommended to me/us at the CRS Declaration: I/We have untered to the control of	ing the scheme. I/We hereby ditions, Notifications or Directio We have understood the details by confirm that the object claus made within the limits for the sinnify BSLAMC / BSLMF in case e are Non Residents of Indian laccount. (Refer Inst. No. 6) / us are true and correct. Line access for transacting thragree to abide the terms and to discharge the obligations could be commissions (in the form standards).	eclare that the amount in ns of the provisions of the so of the scheme & I/we hat the of the constitution doc- tame. I/We are complying of any dispute regarding Nationality/Origin and the ough the internet facility conditions for availing of ast on me and shall not a or of trail commission or a uirements of this Form (r	e Information Document of the Scheme, I/We hivested in the scheme is through legitimate sourche Income Tax Act, Anti Money Laundering Lawive not received nor have been induced by any reument of the entity (viz. MOA / AOA / Trust Deed, gwith all requirements / conditions of the entity the eligibility, validity and authorization of the erat I/we have remitted funds from abroad through provided by Birla Sun Life Asset Management Of the internet facility more particularly mentione at any time deny or repudiate the on-line transative other mode), payable to him for the different of the dead along with FATCA & CRS Instructions) and hereby accept the	ces only and does n rs, Anti Corruption bate or gifts, direct etc.), allows us to a while applying for t titly and/or the app ph approved bankin company Ltd. (Inve- ed on the website actions effected by competing Scheme ereby confirm that	tot involve and is not designe Laws or any other applicable ty or indirectly in making this apply for investment in this such investments and I/We, income dicants who have applied on ng channels or from funds in stment Manager of Birla Sur www.birlasunlife.com and had me and I shall be solely liable es of various Mutual Funds from the information provided by	to abide by the terms, id for the purpose of the le laws enacted by the sinvestment. cheme of Birla Sun Life cluding the entity, if the behalf of the entity. In my/our Non-Resident in Life Mutual Fund) and nereby undertake to be ole for all the costs and form amongst which the
Signature of First Applicant / A	uthorised Signatory	e	gnature of Second Applicant		Signature of Third Applicant	
=-5/10/01/01/10/1/ppilouitt / Al		l o	o v pprount			

SYSTEMATIC INVESTMENT APPLICATION FORM SIP (WITH MICRO SIP) / CENTURY SIP



Investment Advisor's Na		S/RECS/AUT(ub-Broker's Name				TRUCTIONS BEFORE FI		SE ENSURE COMPLETION OF SECTION 4 INCASE OF CEN Employee Unique ID. No. (EUIN
UIN is mandatory for "Execution Only" ' we hereby confirm that the EUIN box has t-appropriateness, if any, provided by the e	been intentionally left blank my me/	us as this transaction is ex erson of the distributor/sub	ecuted withou broker.	t any interaction or a	lvice by the em	ployee/relationship m	anager/sales person of the	e above distributor/sub broker or notwithstanding the
First Applicant / A	Authorised Signatory			Second Applica	nt			Third Applicant
Request for Registration o	f SIP Registration of C	SIP Renewal o	f SIP	Change in Bank	Details	Additional Mic	ro SIP in same folio	Date D D M M Y Y
TRANSACTION CHARGES FOR A	PPLICATIONS ROUTED THROU	JGH DISTRIBUTORS/	GENTS ON	LY (Refer Instruction	on G (9))			
case of subscriptions through SIP: le transaction charges. In such case sued against the balance of the inst			d investor) (Ilments but	or₹100/- (for inve only where total co		n first time mutual e. amount per SIP i	fund investor) will be d nstallment x No. of inst	educted and paid to your distributor if opted to allments) amounts to ₹ 10,000/- or more. Uni
Existing Investor Folio No.			Applica	ation No.				(New Folio will be Generated for CSIP)
FIRST / SOLE APPLICANT IN	FORMATION (MANDATORY)	Foreitte						
Mobile No. Ame of First / Sole Applic	ANT Mr. Ms. M/s.	Email Id						
AME OF THE SECOND APPLIC								
AME OF THE THIRD APPLICAN	T Mr. Ms. M/s.							
Applicant	PAN* (Mandatory)	KYC Mandato	ry	Date of bir	h**	Docu (Photo le	ment Type# d/ Address Proof)	Document No. * Mandatory for Micro SIP, not for additional Micro SIP in s
Sole / First Applicant			D D	MMY	YY	Υ		
Second Applicant			D D	M M Y	YY	Υ		
Third Applicant			DD	M M Y	YY	Υ		
Guardian/POA Holder			D D	MMY	VV	V		
	licro SIP Only ** Mandatory i	n case the First/Colo	Annlicant in			1		
	e issued for each investment draw	n in favour of respective	scheme nam	e and the instrumen	t should be cr	ossed "A/c Payee Or		oriate scheme name as well as the Plan/Option/
S. *Cheque / DD Favouring O. Scheme Name (refer Instruc	ng Plan / Option	Sweep to (Ref (applicable only for Div	er G-4) idend option)	Amount Invested (₹)	^DD Charges	Net Amount Paid (₹)	Cheque/DD No./UTR No (in case of NEFT/RTGS	
. BSL		Scheme Na	me					
		Plan / Opti						
(Type of Account : Saving / Curren Please tick (\checkmark) any ONE of the		'All purchases are subje nount OR enter the a			fer to Instruc se of multip	. ,	ihest amount will be	chosen.
Each Installment Amount (₹)	, –	10,000/-	₹ 6,000		3,000/-	Amour		
								-
DEBIT MANDATE - NACI	H/ECS/DIRECT DEBIT/0	ONE TIME MAND	ATE [App	licable for Lumps	um Addition	al Purchases as w	rell as SIP Registratio	ns] Please attach a cancelled cheque/che
	UMRN							Date D D M M Y Y Y
tick √) ☑ CREATE Sponsor Bar		Office use of	nlv		Litilit	v Code		Office use only
MODIFY IAMa hara		SUN LIFE MUTU		<u> </u>			it (tick./) SB / (CA / CC / SB-NRE / SB-NRO / 01
LI CANCEL	BINEA (AL I OIL	, 		10 000	1 (1014) 057	
ank A/c No.:				1500	$\overline{+}$			
ank:	Bank Name & Bra	ınch		IFSC			OR	MICR
n amount of Rupees								₹
	As & when presented							Fixed Amount 🛮 Maximum Am
eference 1 Folio No:						IVI	obile	
eference 2 Appln No:			1 · · · · · · ·	Em			Lie exert	.1.
I agree for the de	bit of mandate processing cha	irges by the bank who	m ı am autl	norizing to debit n	ıy account a	s per latest sched	uie ot charges of bar	IK.
From DDDMM	YYY			2 5:				
3 1 1 2 2	0 9 9 1. Sign .			2. Si	jn		Si	gn
or	Name	as in bank records	(mandato	rv) Ns	me as in h	ank records (ma	indatory) —	Name as in bank records (mandatory
• This is to confirm that the declarat appropriately communicating the car	ion has been carefully read, under scellation/ amendment request to f	rstood & made by me/us Birla Sun Life Mutual Fun	s. I am autho	rizing Birla Sun Life where I have author	Mutual Fund	to debit my accoun	t. • I have understood to I/We hereby declare th	that I am authorized to cancel/ amend this man at the particulars given on this mandate are corr
complete and express my willingness Facility offered by Birla Sun Life Mutu Providers which may result in a delay	and authorize to make payments al Fund and as amended from time in application of NAV. This is to co	referred above through p to time and of NACH/ECS nfirm that the declaration	articipation in (Debits)/Dir has been ca	n NACH/ECS/Direct ect Debits /Standing refully read_unders	Debit/Standing Instructions. ood and made	Instructions. I/We I The AMC would not by me/us. Authoris	nereby confirm adheren be liable for any delay in ation to Bank: This is to	that I am authorized to cancel/ amend this man at the particulars given on this mandate are con ce to the terms of NACH/ECS/NECS/RECS/AUTI crediting the scheme collection accounts by the inform that I/We have registered for ECS / NACI count with your Bank. I/We authorize the represe transactions, returns, etc, as applicable.
Dearing) / Direct Debit / Standing inst of Birla Sun Life Mutual Fund carrying	ructions facility and that my/our pa this mandate form to get it verified	yment towards my/our in and executed. I/We autho	vestment in E rize the bank	Birla Sun Life Mutual to debit my account	Fund shall be i for any charge	nade from my/our a s towards mandate	bove mentioned bank ac verification, registration,	count with your Bank. I/We authorize the represe transactions, returns, etc, as applicable.
- *								-
WLEDGEMENT SLIP (To be fille	d in by the Investor) SYSTE	MATIC INVESTMENT	THROUGH	NACH/ NECS / D	RECT DEBI	T / PDC FACILITY	APPLICATION FOR	M Application No.
	Birla Sur	Life Asse					mited	

Mutual Fund $\label{total formula} \mbox{Toll Free}: 1-800-270-7000/\ 1-800-22-7000 \ \ | \ \ \mbox{sms `GAIN' to 567679} \ \ | \ \ \mbox{Email: connect@birlasunlife.com}$

Date :

Received from Mr. / Ms. _

BSLAMC Stamp & Signature

INVESTMENT DETAILS (PLEASE REFER INST			ATION FORM)	Co
First Installment through Cheque / DD. (MANDA	TORY FOR CSIP) 1st Cheque /	DD No.		eque Dated D / M M / Y Y
Drawn on Bank			Amount (₹)	(in figures)
Branch Champion dates Franci		City		
For PDC Cheques dates From: Cheque No. From:		Y Y Y To D D / M		
Investment Start Date D D M M Y	Y Y Y Frequency	MONTHLY (max 4 debit dates) (Only one	e date for CSIP and Sten I	Un SIP)
		oth 28th	auto for con una ctop	op 6 /
At Birla Sun Life Mutual Fund, we provide YO		ate (31st December 2099)	SELECT YOUR SIP PERIO	D Refer Instruction E-11 & F-5
flexibility to discontinue your SIP at ANYTIME. Cal 1800-270-7000/1800-22-7000 or email u connect@birlasunlife.com to know how.	us at CSIP Tenure (Insurance	Sun Life Mutual Fund to discontinue you e cover would be as per 1st installment): 55 ye	ears - Your Current Age	Enter SIP End Date D D M M Y Y years = years Frequency: Montageneral Section Secti
_		ot mentioned by the investor in the Form, the sa nents through NECS) (Refer Instruction E-2		i1st December, 2099 by default". For CSIP – refer instructi
Amount (Default of ₹ 500/-) ₹ 500/-		(In multiples of ₹ 500/-)	· .	quency (Default Yearly) Half Yearly Yea
FOR CENTURY SIP (Please read detailed			0121 01 011 1100	rum roung
Date of Birth D D M M Y Y Y				
	uziizzii		vail over nemination de	etails provided in Common Application Form.
		•		understand that all payments and settlements mad
Nominee (upon such documentation) shall be a				Date Of Birth (in case of minor): / /
Nominee Name :				Date of Birth (in case of Hillion).
	Guardian / Parent Name (in case	of minor):		Signature of Nominee or Parent / Guardian
Address :	Albert and a			
			itches with that of the A/c. held v	with the depository participant.) Refer Instruction No. E (27)
NSDL: Depository Participant Name:		DPID No.: I N	В	eneficiary A/c No.
CDSL: Depository Participant Name:		Beneficiary	A/c No.	
DECLARATION(S) & SIGNATURE(S)				
Name of First Unit Holder (As in First Applicant		second Unit Holder (As in E Second Applicant (To be signed by All Applicants if mode of ope	,	Name of Third Unit Holder (As in Bank Red
		(10 be signed by All Applicants II mode of ope	<u> </u>	~ 0
Investors who have already submitted submit NACH/ECS/NECS/RECS/AUTO Investors, who have not registered for Name mentioned. Mobile Number and Email Id: Unit hold mentioned on the mandate form differs whatsoever would be, thereafter, sent to Unit holder(s) need to provide along wiregistered or bank account verification are subject to third party verification. Investors are deemed to have read and	d an NACH/ECS/NECS/REC DEBIT form again as NACH NACH/ECS/NECS/RECS/AL der(s) should mandatorily from the ones as already ex to the updated mobile number ith the mandate form an orial letter for registration of the I understood the terms and the Information Document, Si	/ECS/NECS/RECS/AUTO DEBIT regi JTO DEBIT facility, may fill the NACH/ provide their mobile number and en kisting in the folio, the details provide er and email id. ginal cancelled cheque (or a copy) of mandate failing which registration no conditions of NACH/ECS/NECS/RE tatement of Additional Information, K	gistered for NACH/ECS stration is a one-time pr ECS/NECS/RECS/AUTO mail id on the mandate d on the mandate will be with name and account nay not be accepted. The CS/AUTO DEBIT Facility	/NECS/RECS/AUTO DEBIT facility should n
Acknowledgement				ISC Stamp
Investor Name: □ DEBIT MANDATE FORM □ SIP FOI		Folio No/Application No		-
		 nnect@birlasunlife.com Contac	ot Centre • 1_800_270	
	·	•		
				BIT / PDC FACILITY APPLICATION F
NOWLEDGEMENT SLIP (To be filled in by the In	vestor) SYSTEMATIC INV	VESTMENT THROUGH NACH/	NECS / DIRECT DE	Request for
NOWLEDGEMENT SLIP (To be filled in by the In	vestor) SYSTEMATIC INV	VESTMENT THROUGH NACH/	NECS / DIRECT DE	Renewal of SIP