

APP No.:

**AUTO DEBIT / ECS MANDATE FORM**

Application to be submitted at least 21 working days before the commencement of SIP  
**TO BE FILLED IN CAPITAL LETTERS. PLEASE (✓) WHICHEVER IS APPLICABLE**

Please read the instructions carefully, before filling up the application.  
 Leave one box blank between two words.

**REGISTRATION CUM MANDATE FORM FOR AUTODEBIT/ECS (Debit clearing)**

- New SIP Registration - by existing investor  Change in Bank Account for an existing Investor with Reliance Mutual Fund (Applicable only for ECS)  
 New SIP Registration - by new investor (Also attach the new application form duly filled & signed)

**1. DISTRIBUTOR / BROKER INFORMATION**

Name & Broker Code / ARN <b>ARN-33512</b>	Sub Broker / Sub Agent Code
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**APPLICANT DETAILS**

Folio No.	
Name of Sole/1st holder	PAN No. MANDATORY KYC : Yes / No
Name of 2nd holder	PAN No. MANDATORY KYC : Yes / No
Name of 3rd holder	PAN No. MANDATORY KYC : Yes / No

SCHEME NAME \_\_\_\_\_ Option \_\_\_\_\_ Plan \_\_\_\_\_ SIP Amount [M i n i m u m R s . 2 0 , 0 0 0 / ]  
 Frequency (Please ✓)  Monthly (default) or  Quarterly SIP Date  2  10  18  28 Enrollment Period: From: [M M Y Y ] To: [M M Y Y ]

**BANK ACCOUNT DETAILS**

Accountholder Name as in Bank Records \_\_\_\_\_ Date of Birth\* [D D M M Y Y Y Y Y Y ]  
 A/c. Type ✓  SB  Current  NRO  NRE  FCNR Account No [M a n d a t o r y ]  
 Bank [M a n d a t o r y ]  
 Branch Address \_\_\_\_\_ Branch City \_\_\_\_\_  
 PIN \_\_\_\_\_ 9 Digit MICR Code\* [M a n d a t o r y ]

**Mandatory Enclosures:**  
 Blank cancelled cheque  Copy of cheque

\*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**

This is to inform you that I/We have registered with Reliance Mutual Fund through their authorised Service Provider TechProcess Solutions Ltd / respective banks for the RBI's Electronic Clearing Service (Debit Clearing) / Auto Debit Facility and 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 authorised the representative carrying this ECS / Auto Debit to account mandate form to get it verified & executed. I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I 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 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 or a Bank holiday, execution of the SIP will happen on the next working day and allotment of units will happen as per the Terms and Conditions listed in the Offer Document of the Mutual Fund. The above mentioned Bank shall not be liable for, nor be in default by reason of, any failure or delay in completion of this service, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, 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 above mentioned Banks reasonable control and which has the effect of preventing the performance this service by the above mentioned Bank.

**SIGNATURE/S AS PER RELIANCE MUTUAL FUND (MANDATORY)**

Sole/ 1 <sup>st</sup> applicant/ Guardian Authorised Signatory	
2 <sup>nd</sup> applicant / Authorised Signatory	
3 <sup>rd</sup> applicant Authorised Signatory	

**SIGNATURE/S AS PER BANK RECORDS (MANDATORY)**

Sole/ 1 <sup>st</sup> applicant/ Guardian Authorised Signatory	
2 <sup>nd</sup> applicant / Authorised Signatory	
3 <sup>rd</sup> applicant Authorised Signatory	

Place : \_\_\_\_\_ Date: [D D M M Y Y Y Y Y Y ]

Place : \_\_\_\_\_ Date: [D D M M Y Y Y Y Y Y ]

**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. \_\_\_\_\_