

Sponsor: Samco Securities Limited

Trustee Company: Samco Trustee Private Limited Investment Manager: Samco Asset Management Private Limited

Samco Mutual Fund 1003 – A, Naman Midtown, Senapati Bapat Marg, Prabhadevi (W), Mumbai - 400 013

COMMON APPLICATION FORM

Please read instructions before filling this form All sections to be completed in ENGLISH in BLACK / BLUE Coloured Ink and in BLOCK LETTERS.

| 1. Distributor In | formation | | Application | on No. |
|---|--|--|--|--|
| Distributor Code | Sub-Broker Code | Internal Sub-Broker Code | EUIN* | RIA CODE^ |
| | ARN - | INTERNAL CODE | Employee Unique IDENTIFICATION NO. | |
| eft blank by me/us as this tr n-appropriateness, if any, pro pfront commission shall be | EUIN of the person who has advised the investor. If I ransaction is executed without any interaction or advided by the employee/relationship manager/sales paid directly by the investor to the AMFI registered 'Direct' in the column 'Distributor Code'. | vice by the employee/relationship manager, erson of the distributor/sub broker". | aration by the investor "I/We hereby sales person of the above distribu | tor/sub broker or notwithstanding the advice of |
| | elow mentioned scheme of Samco Mutual Fund und saction, to the SEBI Registered Investment Advisor (F | | | ction data feed / portfolio holdings / NAV etc. in |
| Signature (s) | SOLE / FIRST APPLICANT | SECOND APPLIC | ANT | THIRD APPLICANT |
| Mode of Holding | 1 | | | |
| | se Mode of Holding should be same as in De | emat Account) Single | Joint Anyone or Survivor | (Default) |
| 1. Applicant Info | Drmation (Mandatory) to be filled in bloc | k letters | | (Refer Instruction No.II) |
| olio No. | · · · · · · · · · · · · · · · · · · · | iting unit holders) Gen | der Male Female | e Transgender |
| PAN | CKYC No. | | Date of B | irth DDDMMYYYYY |
| Mailing address | 5 | State | | Pin code |
| Nobile No. | | Email ID | | |
| he Email ID belongs to (he Mobile No. belongs to | (Mandatory Please ✔) Self | Spouse Dependents Spouse Dependents | POA POA | Custodian Guardian Custodian Guardian |
| Please note: In the event | that the mobile number or the email id provid | ed herein above does not appear to be | that of the unit holder's, then t | he AMC shall send suitable |
| El Code | | Valid upto | D M M Y Y Y Y | (Legal Entity Identifier Number is Mandatory for transaction value of INR 50 crore and above for Non-Individual investors. Refer instruction no. XXII) |
| Guardian Details | (In case First / Sole Applicant is minor) / C | Contact Person- Designation / POA Ho | lder (In case of Non- Individua | al Investors) |
| /Ir. / Ms. | | Relationship wi | th Minor/Designation | |
| PAN | CKYC No. | | Gender | Male Female Transgender |
| Nobile No. | | Email ID | | |
| he Email ID belongs to(he Mobile No. belongs to | (Mandatory Please ✓) Self Self (Mandatory Please ✓) Self | Spouse Dependents Spouse Dependents | POA | Custodian Guardian Custodian Guardian |
| Date of Birth Pr | oof for minors (Any One) | | | |
| Birth Certificate | Marksheet (HSC/ICSE/CBSE) Schoo | Leaving Certificate Passport | Others | |
| Second Applica | nt | | | |
| /Ir. / Ms. | | | | |
| PAN | CKYC No. | | Gender | Male Female Transgender |
| | | | | |
| ASAMCO MUTUAL FUND EXASHIELD TESTED INVESTMENTS | | | ACKNO | OWLEDGEMENT SLIP (To be filled by the investor |
| Received from: Mr. / N | Ms. / M/s | | Applicat | ion No. |
| n application for units | s of Samco | Plan: Regular | Direct Option: Grow | th |
| ide Cheque No | Dated DDM | | | |
| rawn on Bank | | | | Collection Contar's Stome 9 |
| Branch | | | | |

Please note: All purchases are subject to realization of cheques and as per applicable load structure (please refer Scheme Information Document)

| Mobile No. | | | | | | | | | | | |
|--|--|--|--|---|----------------|--|---|---|--|--|--|
| The Email ID belongs to | (Mandatory Please 🗸 |) Self | | Spouse | Dep | endents | POA | Custodia | in [| Guardiar | ı |
| The Mobile No. belongs | to (Mandatory Please | ✓) Self | | Spouse | Dep | endents | POA | Custodia | in | Guardiar | ı |
| Third Applican | † | | | | | | | | | | |
| Mr. / Ms. | • | | | | | | | | | | |
| | | CKYC No. | 1 1 1 | 1 1 1 1 | 1 1 1 | 1 1 1 1 | Gender | Male | Female | Tran | sgender |
| PAN | | CKYC NO. | | | | | Gender | Iviale | remale | IIIai | syender |
| Mobile No. | | | | | Email I | D | | | | | |
| The Email ID belongs to | ` . | | | Spouse | | endents | POA | Custodia | ın 🗌 | Guardiar | 1 |
| The Mobile No. belongs | to (Mandatory Please | ✓) Self | | Spouse | Dep | endents | POA | Custodia | ın | Guardiar | 1 |
| Demat Accoun | t Details | | | | | | | | NSD | L C | DSL |
| Physical Mode | Demat Mode (Mar | ndatory to prov | ide the dem | at details in c | ase mode of | holding tick as d | lemat mode) | | | | |
| CDSL | | | | | | NSDL | N | | 1 1 1 | 1 1 1 | |
| Beneficiary A/C No. | | | | | | | | | | | |
| Depository Participa | nt Name | | | | | | Sole A | | Note: Demat Ad ame should be | | |
| | | | | | | | | (Note: Ple | ase attach cop | y of Client Ma | aster List.) |
| | olicable for First / Sole | | | | | | | | | | |
| Resident Individual | | RI - NRO | HUF | Body Co | | Club / Society | | Minor _ | Governme | nt Body | Trust |
| NRI - NRE | Bank & FI | Proprietor | snip Firm | Partnersh | nip Firm | QFI | Provident Fund | O1 | hers | | |
| Overseas Addı | ess | | | | Address | for Communic | ation (for NRI applica | nts) | Indian | Oversea | as |
| Address (Mandatory for | NRI/FII applicant*) | | | | | | | | | | |
| | | | | Cour | ntrv | | | Zip C | ode | 1 1 | |
| | | | | | , | | | | | | |
| Email Commu | nication (Please ti | ick ✔) | | | | | | | | | |
| Default communication | _ | | ess is not p | ovided then p | olease 'Opt-ir | ı' to receive belov | v documents in physic | al copy by | ticking the c | ption belov | v: |
| Annual Report | Abridged Annual Repo | ort Other | Statutory Inf | ormation | | | | | | | |
| 2. KYC Details | (Mandatory - Refer In: | struction No X | I for details | | | | | | | | |
| First Applicant: | Business | Service | | Professional | | agriculturist | Housewife | | tudent | Defer | 100 |
| i ii st Applicant. | Bureaucrat | Forex De | | Unlisted Comp | | Body Corporate | Listed Compan | | thers | Delei | |
| Second Applicant: | Business | Service | | Professional | | Agriculturist | Housewife | S | tudent | Defe | nce |
| | Bureaucrat | Forex De | ealer | Unlisted Comp | pany E | Body Corporate | Listed Compan | у 🗌 О | thers | | 1 |
| Third Applicant: | Business | Service | | | | | | | | | |
| | Bureaucrat | | | Professional | | Agriculturist | Housewife | S | tudent | Defe | nce |
| | | Forex De | ealer | Professional Unlisted Comp | | Agriculturist Body Corporate | Housewife Listed Compan | | tudent thers | Defe | nce |
| Cross Annual | Incomo (DI 👑 | | ealer | | | • | | | | Defe | nce |
| | Income (Please tic | k ✓) | | Unlisted Comp | pany 🗌 E | Body Corporate | Listed Compan | у 🗍 о | thers | Defe | nce |
| Gross Annual First Applicant: | Below 1 Lac | k ✓) | 5 | Unlisted Comp | pany E | • | Listed Compan | у 🗍 о | thers 1 Crore | | |
| First Applicant: | Below 1 Lac | k✓) ☐ 1-5 Lacs n (Mandatory fo | 5. or Non - Indi | Unlisted Comp | pany ☐ E | 3-25 Lac | Listed Compan | y | thers 1 Crore | Defe | |
| | Below 1 Lac OR Net worth Below 1 Lac | k ✓) | 5. or Non - Indi 5. | Unlisted Comp -10 Lacs viduals) -10 Lacs | pany ☐ E | Body Corporate | Listed Compan | y | thers 1 Crore Y (No | | n 1 year) |
| First Applicant: Second Applicant: | Below 1 Lac OR Net worth Below 1 Lac OR Net worth | 1-5 Lacs (Mandatory fo | 5 pr Non - Indi | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) | pany | 3-25 Lac | Listed Compan >25 Lacs - 1 Cro as on DDMM >25 Lacs - 1 Cro as on DDMMM | re | thers Land Crore Y (No | ot older than | n 1 year) |
| First Applicant: | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac | k /) 1-5 Lacs (Mandatory fo | 5. T Non - Indi 5. T Non - Indi 5. | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) -10 Lacs | pany | 3-25 Lac | Listed Compan >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro | re | 1 Crore Y (No. 1 Crore Y (No. | ot older than | n 1 year) |
| First Applicant: Second Applicant: | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth | 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs | 5. T Non - Indi 5. T Non - Indi 5. | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) -10 Lacs | pany | 3-25 Lac | Listed Compan >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro | re | 1 Crore Y (No. 1 Crore Y (No. | ot older than | n 1 year) |
| First Applicant: Second Applicant: | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth | 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs | 5 5 5 5 5 5 5 5 5 5 6 5 6 6 6 6 6 6 6 6 | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) -10 Lacs viduals) | pany | 3-25 Lac | Listed Compan >25 Lacs - 1 Cro as on DDDMM >25 Lacs - 1 Cro as on DDMMM >25 Lacs - 1 Cro as on DDMMM | re | 1 Crore Y (No 1 Crore Y (No 1 Crore Y (No | ot older than | n 1 year) |
| First Applicant: Second Applicant: Third Applicant: | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth | 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs (Mandatory for 1-5 Lacs | 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5 | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) -10 Lacs viduals) | pany | 3-25 Lac | Listed Compan >25 Lacs - 1 Cro as on DDDMM >25 Lacs - 1 Cro as on DDMMM >25 Lacs - 1 Cro as on DDMMM | re | 1 Crore Y (No 1 Crore Y (No 1 Crore Y (No | ot older than | n 1 year) |
| First Applicant: Second Applicant: Third Applicant: CHECKLIST: Please submit the formula to t | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth | 1-5 Lacs (Mandatory for 1-5 La | 5 5 5 5 5 5 7 Non - Indi | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) -10 Lacs viduals) | pany ☐ E | 30-25 Lac 0-25 Lac 0-25 Lac 0-25 Lac 0-27 Lac 0-28 Certified by a Director Partnership Firms | Listed Compan >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro as on D D M M /Trustee /Company Secretary / | y O | 1 Crore Y | ot older that ot older that ot older that outlieblieblieblieblieblieblieblieblieblieb | n 1 year) n 1 year) n 1 year) |
| First Applicant: Second Applicant: Third Applicant: CHECKLIST: Please submit the formula to t | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth | 1-5 Lacs (Mandatory for 1-5 La | 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5 | Unlisted Comp | pany ☐ E | Body Corporate 0-25 Lac 0-25 Lac 0-25 Lac Partnership Firms V V | Listed Compan >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro as on D D M M >25 Lacs - 1 Cro as on D D M M >7 Listed Company Secretary / | y 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | thers (Note of the second seco | ot older that ot older that ot older that outlic) PIO PIO PIO PIO PIO PIO PIO PI | n 1 year) n 1 year) n 1 year) FPI# V |
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| First Applicant: Second Applicant: Third Applicant: CHECKLIST: Please submit the form to be produments Copy of PAN Card KYC Compliance Declaration under FATCA Resolution/ Authorization to in List of authorized signatories Trust Deed Ultimate Beneficial Ownership Bye-laws | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth Net worth OR Net worth OR Net worth | 1-5 Lacs (Mandatory for 1-5 La | 5- 5 or Non - Indi 5- 6 or Non - Indi 5- 7 or Non - Indi 5- 8 or Non - Indi 5- 9 o | Unlisted Comp -10 Lacs viduals) -10 Lacs | pany ☐ E | Body Corporate D-25 Lac D-25 Lac D-25 Lac Partnership Firms V V V | Listed Compan >25 Lacs - 1 Cro as on DDMM >25 Lacs - 1 Cro as on DDMMM >25 Lacs - 1 Cro as on DDMMM >7 Location Secretary / Investment through POA V | y O re > Y Y Y Y re > Y Y Y Y Y Y Y re > Y Y Y Y Y Y Y Y re > Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | thers (Notary P) NRI File V V V V V V V V V V V V V V V V V V V | ot older than | n 1 year) n 1 year) n 1 year) FPI# |
| First Applicant: Second Applicant: Third Applicant: CHECKLIST: Please submit the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to the form to be a compared to the form to be a compared to the for | Below 1 Lac OR Net worth Below 1 Lac OR Net worth Below 1 Lac OR Net worth Net worth OR Net worth OR Net worth | 1-5 Lacs (Mandatory for 1-5 La | 5- 5 or Non - Indi 5- 6 or Non - Indi 5- 7 or Non - Indi 5- 8 or Non - Indi 5- 9 o | Unlisted Comp -10 Lacs viduals) -10 Lacs viduals) -10 Lacs viduals) -10 Lacs viduals) | pany E | 38-ody Corporate 30-25 Lac 30-25 Lac 30-25 Lac 40-25 Lac Partnership Firms 40-40 | Listed Compan >25 Lacs - 1 Cro as on DDMM >25 Lacs - 1 Cro as on DDMMM >25 Lacs - 1 Cro as on DDMMM >7 Location Secretary / Investment through POA V | y O re > Y Y Y Y re > Y Y Y Y Y Y Y re > Y Y Y Y Y Y Y Y re > Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | thers (Notary P) NRI File V V V V V V V V V V V V V V V V V V V | ot older that ot older that ot older that ublic) | n 1 year) n 1 year) n 1 year) FPI# |
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| For Individuals (Please tick ✓) | | | | | | | | | | | |
|--|---|------------------------|------------------|----------------------------|----------------|-----------------------------------|--|---------------|--------------|---------------------------------|---|
| | | | First Ap | plicant: | | Seco | nd Applicant | | | Third Applic | ant |
| I am Politically E | xposed Person | | | | | | | | | | |
| I am Related to I | Politically Expos | sed | | | | | | | | | |
| Not Applicable | | | | | | | | | | | |
| For Non-I | ndividual Ir | nvestors (| Please tick v | () | | | | | | | |
| Is the company a Foreign Exchar Charger Servic | nge / Money | ny or Subsidiar | No G | | • | Listed Company ottery / Casino | | ` | | attach mandato nding / Pawni | ry UBO Declaration) ng Yes No |
| 3. FATCA/ | CRS Detail | s - Non Indi | ividual Inve | stors should | d mandator | y to fill separa | te FATCA/CRS | details fo | rm | (Refer In | struction No.XVIII) |
| | | Sole / Firs | st Applicant / | t / Guardian 2nd Applicant | | | | | 3rd | Applicant | POA |
| Place & Country of Birth | | Toy Doyor | Identifica | tion Typo | | Terr Devices | Identification Tv | 20 | | Tou Double | Identification Type |
| | Country # | Tax Payer Ref ID No | (TIN or other, I | | Country # | Tax Payer Ref ID No | (TIN or other, please | | Country # | Tax Payer Ref ID No | Identification Type (TIN or other, please specify) |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| #Pleas | se indicate all co | untries, other th | nan India, in wh | ich you are a r | esident for ta | x purpose, associ | ated Taxpayer Iden | tification Nu | ımber & it's | Identification typ | pe e.g: TIN etc |
| | | (5.0.1) | | | | | | | | | |
| 4. Power o | of Attorney | (POA) If i | nvestment is | being made b | oy a Constitu | tional Attorney, | please submit no | tarised cop | y of POA | | |
| POA NAME M | r. / Ms. / M/s. | | | | | | | | PAN | 1 | |
| | | | | | | | | | | | |
| | tion Detail | | | | | | | | | | |
| | | | | | | | ir folio in the event of arge by the AMC/Mu | | | | all payment and settlements |
| further are av | vare that in case o | f death of all the | | | | | | | | | intment of nominee(s) and authority, based on the |
| value of asse | ts held in the mutu | Jai tund tollo. | | | | | | | | | |
| Nominee deta | ils | | Nominee 1 | | | | Nominee 2 | | | Nomi | nee 3 |
| Name | | | | | | | | | | | |
| - Tunio | | | | | | | | | | | |
| Address | | | | | | | | | | | |
| | | | | | | | | | | | |
| PAN | | | | | | | | | | | |
| Date of Birth | | | | | | | | | | | |
| | | | | | | | | | | | |
| Relationship | | | | | | | | | | | |
| Proportion (% |)* | | | | | | | | | | |
| | Address of the | | | | | | | | | | |
| the nominee is | | | | | | | | | | | |
| Signature of G | Guardian / Nomi | inee | | | | | | | | | |
| *(%) by which the | units will be sh | nared by each r | nominee (% to | aggregate to | o 100%) | | | | | | |
| Signature (s | *(%) by which the units will be shared by each nominee (% to aggregate to 100%) Signature (s) "Should be signed by all unit holders including joint holders, irrespective of mode of holding" | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | ANT |

| 6. Lumpsum/New SIP-Investment Details* Choice of Sc | heme/Plan/Option For SIP Investment Auto-Debit Form is mandat | tory (Refer Instruction No.VI) | | | | | |
|--|---|---|--|--|--|--|--|
| Scheme | Plan: Reg | gular Direct Option: Growth | | | | | |
| 7. Bank Account Details | | | | | | | |
| Account No | Account Type (Please ✔): SB Bank Address | Current NRO NRE FCNR | | | | | |
| City Pin II | SC CODE | MICR CODE | | | | | |
| 8. Payment Details | | | | | | | |
| Cheque No Date Net Amount ₹ | mand Draft | ount ₹ some and fill in the details below) | | | | | |
| Account No | Account Type (Please ✔): SB | Current NRO NRE FCNR | | | | | |
| 9. Systematic Transaction Registration Details | | | | | | | |
| | vestment it is mandate to submit SIP Mandate Registrat | | | | | | |
| Scheme | | egular Direct Option: Growth | | | | | |
| | stallment amount (in words) | | | | | | |
| SIP Frequency: (Please ✓): | arly Debit Date DDDOR No. of Installm | nents OR Perpetual: | | | | | |
| System | atic Transfer Plan (STP) | | | | | | |
| From Scheme Plan: Regular Direct | Option: Growth To Scheme | Plan: Regular Direct Option: Growth | | | | | |
| Amount (in figures): ₹ STP Frequency: (Please ✓): | Daily Weekly (Monday to Friday) Day of Transfe | er: Fortnightly | | | | | |
| Monthly Quarterly Debit Date: 1 7 10 15 | 25 STP Period: From D D M M Y Y Y | | | | | | |
| | | | | | | | |
| 10.Declaration and Signature(s) | | | | | | | |
| Having read and understood the contents of the Scheme Information Document (SID) of the on who cannot invest, "Prevention of Money Laundering" and "Know Your Customer", I/We conditions, rules and regulations of the Scheme. I/We further declare, I am / we are auth legitimate sources and is not held or designed for the purpose of contravention of any a governmental or statutory authority from time to time. It is expressly understood that I/We ee/Fund would not be responsible if the investment is ultra vires thereto and the investment. | e hereby apply to Samco Mutual fund for units of such Scheme as orised to invest the amount & that the amount invested by me/us cts, rules, regulations or any statute or legislation or any other ap have the express authority from our constitutional documents to ir | s indicated above and agree to abide by the terms and in the above mentioned Scheme(s) is derived through oplicable laws or notifications, directions issued by the | | | | | |
| I/We undertake that these investments are my/our own and acknowledge that AMC reserved. I/We hereby, further agree that the Fund can directly credit all the redemption amount to recommend to the contract of | | | | | | | |
| The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We further agree that the Fund/AMC can send us all types of SMS relating to the products offered by them. Applicable to investors who have not opted for nomination | | | | | | | |
| facility. I/We hereby confirm that it is my/our informed decision not to avail the nomination facility offered by Samco Mutual Fund. Applicable to NRI only: I/We confirm that I am / we are Non Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking | | | | | | | |
| channels from funds in my/our Non-Resident External/Ordinary Account/FCNR Account. Please (ü) (Including amount of Additional Purchase Transaction made in future) Repatriation Non Repatriation | | | | | | | |
| Date D D M M Y Y Y | | | | | | | |
| Place | | | | | | | |
| Signature (s) SOLE / FIRST APPLICANT | SECOND APPLICANT | THIRD APPLICANT | | | | | |



From DDDMMYYYY

OR Until Cancelled

Sponsor: Samco Securities Limited

Samco Mutual Fund

SYSTEMATIC INVESTMENT

| MUTUAL FUND HEXASHIELD TESTED INVESTMENTS | Trustee Company: Samco Trustee Pri Investment Manager: Samco Asset M Private Limited | | | PLAN (SIP) Mandate Registration Form |
|--|---|---|---|---|
| 1. Distributor Inf | ormation | | Applic | cation No S |
| Distributor Co | ode Sub-Broker Code | Internal sub broker | code EUIN* | RIA Code^ |
| ARN- | ARN- | INTERNAL COL | DE Employee Unique IDENTIFICATION NO. | |
| left blank by me/us as this train-appropriateness, if any, provi ^I/We, have invested in the belo | nsaction is executed without any interaction of ded by the employee/relationship manager/sa | or advice by the employee/relationship les person of the distributor/sub broken under the Direct Plan. I/We hereby give | manager/sales person of the above dis ". my/our consent to share/provide the tra | ereby confirm that the EUIN box has been intentionally tributor/sub broker or notwithstanding the advice of ansaction data feed / portfolio holdings / NAV etc. in |
| Sign Here | First / Sole Applicant / Guardian Authorised Signatory | Second A Authorised | | Third Applicant Authorised Signatory |
| 2. Unitholder Inf | | | | |
| Name of First / Sole Ap Folio No. (For Existing Unit | • | | CKYC No. | PAN _ |
| | etails (Choice of Plan [Please ✓]) | | OKTO NO. | |
| Scheme | ctans (Choice of Plan [Please V]) | Plan Regular D | Direct Option: Growth | |
| Scrienie | | Fidii Regulai E | onect Option. Glowth | |
| Enrolment Period | From D D M M Y Y Y Y | To \square | Y OR Perpetual (Default | OR No. of Installments |
| Each SIP Amount ₹ | Amount in w | ords | | |
| | | SIP Frequency: (Please | _) | |
| SIP Date DDDPreferred Debit Date (Any day f | | onthly OR | Quaterly OR | Half Yearly |
| | | SIP Step UP FACILITY | : | |
| | Fixed Amount | | | (in Percentage) |
| Amount (Minimum Rs | | Percen | tage (Minimum 10% and in multiple of 5%) ₹ | |
| Freeze # Amou | | ear M M Y Y Freeze | | OR Month-Year M M Y Y |
| Frequency \$ | Half Yearly Yearl | , 110420 | , + | Yearly Yearly |
| | the Yearly frequency is available under SIP TOP | | <u>. </u> | |
| 4. Unit Holding (| <u>. </u> | | | r wishes to hold the units in Demat Mode) |
| CDSL / NSDL DP Name | | | Beneficiary A/C No. | |
| 5. Declaration & | Signature(s) | | | |
| charged to my/our account. | s furnished here are correct. I/We authorize San Electronic Debit arrangement/NACH (National tion, I/we would not hold the user institution rehave registered for making payment towards at andorsed the Mandate Form. Further, I authorespective SID and SAI of the mutual fund before | | | ount towards payment of SIP installments and/or any action is delayed or not effected at all for reasons of pank account. hrough NACH. I/We hereby authorize to honour such verified. Mandate verification charges, if any, may be |

| Place | | | |
|---|---|---|--|
| SAMCO | FOR OFFICE | USE ONLY | ONE TIME BANK MANDATE (NACH/OTM/Direct Debit Mandate Form) |
| HEXASHIELD TESTED INVESTMENTS | UMRN | | Date D D M M Y Y Y Y |
| | Tick (🗸) 🗸 Create 🔀 | Modify 🔀 Cancel | |
| Sponsor Bank Code | | Utility Code | |
| I/We hereby authorize SAMCO MUTU | JAL FUND to debit (tick ✓) | SB CA CC SB-NF | RE SB-NRO Other |
| Bank A/c No. | | Bank Name | Name of customers bank |
| IFSC | OR MICR | | |
| an amount of Rupees | Amount in words | | Amount ₹ |
| Frequency Monthly Quaterly | 🔀 Half Yearly 🔀 Yearly 📝 As an | d when presented Debit | Type X Fixed Amt V Maximum Amt |
| PAN | Phone No. +91 | Email | |
| Scheme Name | | | |
| I agree for the debit of mandate processing charges | by the bank whom I am authorizing to debit my accou | unt as per latest schedule of charges of th | ne bank. |
| Period | | | |

Terms and Conditions

- 1. Please refer SID for minimum SIP investment amount under the Scheme.
- Please refer the Key Information Memorandum (KIM) and Scheme Information Document (SID) of the respective Scheme for applicable NAV, risk factors, load (exit/entry) and other information on the respective Scheme before investing.
- Complete Application form and SIP Mandate Registration Form along with the first cheque if any to be submitted to the AMC/RTA ISC's.
- 4. Investors can give a cheque for the first Installment. The first cheque should be drawn on the same bank account which is to be registered for NACH. Alternatively, the cheque may be drawn on any bank, for which investor should provide a photocopy of the cheque or cancelled cheque of the bank/branch for which NACH is to be registered.
- First SIP cheque (if any) and subsequent SIP installments via NACH should be of the same amount.
- If any chosen day falls on a non business day, the next business day will be considered as the transaction date. However, all SIP installment transactions will be processed after realisation of funds and cut off timings.
- Incorrect/Incomplete applications are liable to be rejected.
- Samco Asset Management Private Ltd. reserves the right to reject any application without assigning any reason thereof and the Trustee reserves the right to change/ modify the terms and conditions of SIP.
- 9. NACH instructions will take a minimum of one month for registration with the bank and hence the first debit will be carried out only after one month, on the SIP date mentioned on the form. The AMC reserves the right to modify the SIP period depending on the one month period for registration to ensure minimum number of installments as mentioned in SID.
- 10. The mandate registration form will be submitted through National Automated Clearing House (NACH) and Banks participating in Direct Debit Facility. This facility is offered to investors having Bank accounts in select banks mentioned in the link under Product and Services tab The Banks http://www.npci.org.in/ in the list may be modified/updated/changed/removed at any time in future entirely at the discretion of National Payments Corporation of India without assigning any reasons or prior notice. Standing instructions for investors in such Banks will be discontinued. We will inform on such discontinuation.
- 11. Existing Unit holders in Scheme of Samco Mutual Fund are required to submit only the SIP Mandate registration form. Existing unit holders should note that the unit holder's details & the mode of holding will be as per the existing account. New investors, who wish to enroll for SIP through NACH, should fill the Application Form & SIP Mandate registration form.
- 12. Initial cheque should be drawn on any bank, which is situated at & is a member of the Banker's Clearing House located at the place where the SIP application is submitted or payable at par & should participate in local MICR clearing. Please contact the nearest designated Investor Service Centre for the updated list. For outstation applications, the initial DD has to be payable at the nearest AMC locations. No outstation cheques will be accepted. The cheque should be drawn in favor of the Scheme chosen and crossed "A/c Payee Only".
- 13. Payments will be accepted by NACH mode. For this purpose, investors/unit holders are required to give NACH Mandate Form to debit their bank accounts at periodic intervals & credit the subscription proceeds to Samco Mutual Fund Bank Account.
- 14. Returned/Dishonored cheque/NACH Rejects will not be presented again for collection.
- 15. The SIP Enrollment will be discontinued in cases where three consecutive SIP installments are not honored or the bank account is closed and no request for change in bank account has been submitted.
- 16. If investor has not provided the SIP frequency/period/date, the default SIP frequency would be Monthly & the SIP installments would be perpectual. The default date will be considered as 10th of the month for Monthly option.
- 17. If an Existing investor wants to enroll in another Scheme & continue for the existing folio, then the investor has to submit a duly filled & signed SIP Mandate registration form along with the first cheque (if investment is in the new Scheme).
- You can choose to discontinue this facility by giving 30 Calendar days written notice to any of AMC/Registrar Investor Service centers.
- Request for change in bank mandate to be submitted atleast 30 Calendar days before the due date of next SIP installment.

- 20. The bank account provided for NACH (Debit) should be in the list of banks participating in NACH
- MICR code or IFSC code should be mandatory filled on NACH mandate, MICR code starting and/or ending with 000 are not valid for NACH.
- 22. The investor agrees to abide by the terms and conditions of NACH facility of NPCI as applicable at the time of investment and as may be modified from time to time.
- 23. The investor undertakes to keep sufficient funds in the account till the date of execution of the debit. The investor hereby declares that the particulars given overleaf are correct and complete. If the date of debit to the investors account happens to be a non Business day as per the fund, execution of the debit will not happen on the day of the holiday and allotment of Units will happen as per the terms and conditions listed in the concerned SID. The Fund, its Registrars, Auto Debit Banks and other service providers shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligation under this agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riots, strike, mutiny, revolution, fire, flood, fog, war, change of government policies, unavailability of banks computer system, force majeure events or any other cause of peril which is beyond their reasonable control and which has the effect of preventing the performance of contract by them.
- 24. Investors will not hold Samco Asset Management Private Ltd., its registrars, banks and other service providers responsible if the transaction is delayed or not effected or the investor's bank account is debited in advance or after the specific SIP date due to the local holidays or any other reason.
- Samco Asset Management Private Ltd. reserves the right to reject any application without assigning any reason thereof.
- Incorrect, incomplete or ambiguous forms will not be accepted and will be returned to the investor within 10 business days via normal post.
- To avail of SIP in separate Scheme via NACH facility, an investor will have to fill a separate form for each Scheme. A single form cannot be used for different Schemes simultaneously.
- As per Prevention of Money Laundering Act 2002, it is mandatory for all investors to be KYC compliant. For more details please refer point on "Instructions to Investor" for Filling up the Application Form.
- 29. SYSTEMATIC INVESTMENT PLAN (SIP) Step UP FACILITY
- a. Investors can opt for SIP TOP UP facility with Fixed Top Up option or Variable Top Up option, wherein the amount of the SIP can be increased at fixed intervals. In case the investor opts for both options, the Variable Top Up option shall be considered.
- b. The minimum amount for Fixed TOP UP shall be ₹500 .And for variable TOP UP would be available in at 10%, 15% and 20% and in multiples of 5%.
- c. The frequency is fixed at Yearly and Half Yearly basis. In case the TOP UP facility is not opted by ticking the appropriate box and frequency is not selected, the TOP UP facility may not be registered. In case of Quarterly SIP, only the Yearly frequency is available under SIP TOP UP.
- d. Top-Up Cap amount: Investor has an option to freeze the SIP Top-Up amount once it reaches a fixed predefined amount. The fixed pre-defined amount should be same as the maximum amount mentioned by the investor in the bank mandate. In case of difference between the Cap amount & the maximum amount mentioned on Bank mandate, then amount which is lower of the two amounts shall be considered as the default amount of SIP Cap amount. In case the top up amount arrived in decimals the amount will be rounding off in nearest 500rupee.
- e. Top-Up Cap month-year: It is the date from which SIP Top-Up amount will cease and last SIP installment including Top-Up amount will remain constant from Cap date till the end of SIP tenure. Investor shall have flexibility to choose either Top-Up Cap amount or Top-Up Cap month- year. In case of multiple selection, Top-Up Cap amount will be considered as default selection.
- f. In case of no selection, the SIP Variable Top Up amount will be capped at a default amount of ₹10 Lakhs.
- Under the said facility, SIP amount will remain constant from Top Up Cap date/ amount till the end of SIP Tenure.

Instructions to fill the nach debit mandate form

- Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the ones as already existing in the folio, the details provided on the mandate will be updated in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
- 2. Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/bank account details are subject to third party verification.
- Investors are deemed to have read and understood the terms and conditions of NACH Facility, SIP registration through NACH facility, the Scheme Information Document,
- Statement of Additional Information, Key Information Memorandum, Instructions and Addendum issued from time to time of the respective Scheme(s) of Samco Mutual Fund.
- 1. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format
- 5. Please mention the amount in figures and words.
- Please fill all the required details in the Debit Mandate Form for NACH. The sole/first holder must be one of the holders in the bank account.
- The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
- The 9 digit MICR and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.

Toll free number: 18001034757 Fax: 022-41708989 Email ID: mfassist@samcomf.com Website: www.samcomf.com