

# SIP REGISTRATION CUM MANDATE FORM

(For investment through NACH)

Distributor Name & ARN No.	Sub-Broker Code	Employee Unique Identification No.*	RIA Name & RIA Code <sup>#</sup>	Date & Time of Receipt
67723				

\*Please sign alongside in case the EUIN is left blank/not provided. I/We hereby confirm that the EUIN 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 notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor / sub broker.

<b>Sign Here</b>	First / Sole Applicant / Guardian / Authorised Signatory	Second Applicant / Authorised Signatory	Third Applicant / Authorised Signatory
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Up-front commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

I/We hereby give my/our consent to share/ provide transaction data feed/ unit holding in respect of my/our investments under Direct Plan to the above mentioned RIA.

## 1 UNITHOLDER INFORMATION

Folio Number/ Application No.  PAN

Name of the First Holder

Scheme  Option  Plan

**2 REQUEST FOR**  Registration of SIP  Renewal of SIP

## 3 SYSTEMATIC INVESTMENT PLAN DETAIL (SIP DETAIL)

Frequency	Enrolment Period	SIP Date	Instalment Amount
<input type="checkbox"/> Monthly (Any date: 1 <sup>st</sup> to 28 <sup>th</sup> , 7 <sup>th</sup> is default) <input type="checkbox"/> Weekly (Every Tuesday) <input type="checkbox"/> Quarterly (Any date: 1 <sup>st</sup> to 28 <sup>th</sup> , 7 <sup>th</sup> is default) <input type="checkbox"/> Fortnightly (2 <sup>nd</sup> & 16 <sup>th</sup> every month)	From <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> To <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Perpetual (Till 30 Years from SIP start date)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Multiples of 1/- (500 for ELSS)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Multiples of 100/- (500 for ELSS)

4 First Installment Cheque Date  Cheque No.  Amount

Bank A/C No.  Bank Name  Drawn on Bank and Branch

5 **Demat Mode**  **Physical Mode**  These details are compulsory if the investor wishes to hold the units in DEMAT mode.

Please ensure that the sequence of Names as mentioned in the application form matches with that of the account held with any one of the Depository Participant.

National Securities Depository Limited (NSDL)	Central Depository Securities Limited (CDSL)
DP ID No. <input type="text"/> Beneficiary Account No. <input type="text"/>	Target ID No. <input type="text"/>

Enclosures (Please tick any one box)  Client Master List (CML)  Transaction cum Holding Statement  Cancelled Delivery Instruction Slip (DIS)

## 6 DECLARATION

I/We wish to inform you that I/We have registered for the subject scheme for the contribution payment to the 360 ONE Mutual Fund as per account details as above by debit to said Bank account. I declare that the particulars given above are correct and complete. I/We agree to discharge the responsibility expected of me as a participant under the Electronic Debit arrangement of the SIP facility. I/We hereby authorize the beneficiary or their authorized Service Providers to get this mandate lodged with bank / get verified and further execute by raising debits on the applicable dates. If the mandate is not lodged / transaction is not collected or delayed for reasons beyond control of the 360 ONE Mutual Fund/ service provider or on account of incomplete or incorrect information, I/We shall not hold them responsible. I/We shall keep indemnified for claims and actions, that 360 ONE Mutual Fund/ service provider may incur, for execution of transactions in conformity with this mandate. 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.

7 I/We hereby request and authorise the Bank to honor the periodic debit instructions raised as above and cause my account to be debited accordingly. Charges, if any, for mandate verification may be debited to my account. I hereby undertake to keep sufficient funds in the account well prior to the applicable date and till the date of execution. Debited contributions may be passed on to the 360 ONE Mutual Fund / Service Provider as per rules, procedures and practices in force. I/We shall not dispute any debit raised under this mandate and as specified therein and during or for the validity period. I/We shall keep indemnified for claims that Bank may incur for reason of execution in conformity with this mandate.

1st Account Holder's Signature  2nd Account Holder's Signature  3rd Account Holder's Signature

FOR OFFICE USE ONLY

Utility Code

FOR OFFICE USE ONLY

UMRN  360 ONE AMC to debit tick (✓)  SB  CA  CC  SB-NRE  SB-NRO  Other

Tick (✓)

CREATE  I/We hereby authorize

MODIFY

CANCEL

Bank A/c number

with Bank  IFSC  or MICR

an amount of Rupees  (Amount in Words)  (Amount in Figures)

FREQUENCY  Monthly  Quarterly  Half Yearly  Yearly  As & when presented

PAN / Application No.  Mobile No.  +91

Reference  Email ID

I agree for the debit mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule for charges of the bank.

- This is to confirm the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account, based on the instructions as agreed & 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 the debit.

## PERIOD

From

To

Signature of Primary Account Holder as per Bank records

Signature of Second Account Holder as per Bank records

Signature of Third Account Holder as per Bank records



## SIP payment through NACH

- 1) The bank account provided for NACH/Auto Debit should be participating in MICR and NACH clearing respectively. List of banks is available on NPCI website [www.npci.org.in](http://www.npci.org.in).
  - 2) The investor agrees to abide by the terms and conditions of NACH/Auto Debit facility of Reserve Bank of India/Banks. 360 ONE Mutual Fund/ 360 ONE AMC, its registrars and other service providers shall not be held responsible or will not be liable for any damages and will not compensate for any loss, damage etc. incurred to the investor. The investor assumes the entire risk of using this facility and takes full responsibility. Investor will not hold 360 ONE AMC, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles of Auto Debit/ local holidays.
  - 3) Investors are required to submit One Time Bank Mandate Form and SIP Enrollment Form along with a photocopy/cancelled cheque of Debit Bank Account (as mentioned on the One Time Bank Mandate Form) at least 30 days before the first SIP Installment date for NACH Debit.
  - 4) An investor can opt for Monthly, Quarterly, Weekly, or Fortnightly frequency for SIP. In case the investor has not specified the frequency then by default the frequency will be treated as Monthly. If an investor does not mention SIP start date appropriately, the SIP will by default start from the 7th of next month after meeting the minimum registration requirement of 30 days. Weekly and Fortnightly SIP frequencies are not available on BSE STAR MF platform.
  - 5) SIP start date should be within 6 months from the date of submission of SIP application for any frequencies. In case the SIP start date is more than 6 months from the date of submission, such SIP application shall be liable for rejection. If an investor does not mention SIP end date, appropriately the tenure of SIP will be treated as perpetual i.e. till 30 Years from SIP start date. In case an investor, who has opted for Perpetual SIP, subsequently intends to discontinue the same, a written communication thereof will be required to be furnished.
  - 6) The investor can choose the SIP Dates from 1 to 28 of any given month for SIP registered through One Time Bank Mandate. If an investor does not mention SIP Date in the application form or multiple SIP dates are mentioned in the SIP Mandate or the SIP Date is unclear in the application form / SIP Mandate, the default SIP date shall be treated as 7th as per the frequency defined by the investor. In case the criteria are not met the SIP would start on the same date from the next month.
  - 7) For details about the Scheme and its facility please refer the SID, SAI & KIM, of the respective scheme/Addendum issued from time to time carefully before investing.
  - 8) In case of three consecutive failures due to insufficient balance in bank account while processing request for SIP, 360 ONE Mutual Fund shall reserve the right to terminate the SIP without any written request from the investor.
  - 9) For SIP through monthly option - ` 1,000/- per month for a minimum period of 6 months. For quarterly option - in Quant fund & Focused Equity Fund - ` 1,000/- per quarter for a minimum period of 6 quarters, in Dynamic Bond fund & Liquid Fund - ` 1,500/- per quarter for a minimum period of 4 quarters. For fortnightly option - ` 1,000/- per instalment for a minimum period of 6 fortnights. For weekly option - ` 1,000/- per week for a minimum period of 6 weeks. Investments above the minimum amount mentioned, shall be made in multiples of ` 1/- for all SIP irrespective of frequency of SIP or the Option. For 360 ONE ELSS NIFTY 50 TAX SAVER INDEX FUND minimum SIP amount is 500/- and in multiples of ` 500/-.
  - 10) Step-Up facility: Under this facility the Investor can increase the SIP installment (excluding MICRO SIP) at pre-defined intervals by a fixed amount. This facility is available for all categories of investors. For availing the said facilities, investors are required to note the following: 1. Investor willing to register Step-Up should provide the Step-Up details along with the SIP enrolment details. 2. The minimum amount for Step-Up facility is INR 100/- and in multiples of INR 100/-. For the 360 ONE ELSS NIFTY 50 TAX SAVER INDEX FUND minimum Step-Up amount is 500/- and in multiples of Rs 500/-. 3. Monthly SIP offers Step-Up frequency at half yearly and yearly intervals. Quarterly SIP offers Step-Up frequency at yearly interval only. This feature is not available for weekly & fortnightly option. In case STEP-UP frequency is not indicated, it will be considered as Yearly by default. 4. There should be clear indication about Step-Up limit amount i.e. the amount achieved by the SIP amount through Step-Ups. In case Step-Up amount is mentioned and Step-Up limit amount is not indicated, it will be considered as perpetual till the end of SIP enrolment period, by Default. 5. The date for STEP-UP Facility will correspond to the registered SIP. The enrolment period specified in the STEP-UP form should be less than or equal to the enrolment period mentioned in the SIP. Unit holders opting for investment in DEMAT mode cannot opt for Step-Up facility. This facility is not available on NSE MFSS/BSE STAR MF and MFU platform.
- 11) Modification/Cancellation of SIP : You can request for a modification / cancellation of your SIP at any time. Your modification/cancellation request should be submitted 30 days prior the next Auto Debit date. Any modification request should be accompanied by : (i) A new SIP duly filled in and carrying the revise SIP request details (ii) A written and signed confirmation for discontinuance of existing SIP.
  - 12) For MICRO SIP maximum SIP amount of ` 50,000/- per year per investor shall be exempt from the requirement of PAN
  - 13) SIP is available in selected schemes of 360 ONE Mutual Fund. The initial cheque should be drawn in favor of the "Name of The Scheme A/c. First Investor Name" or "Name of The Scheme A/c. Permanent Account Number" or "Name of The Scheme A/c. Folio Number" and marked "Account Payee" payable locally in the city where the application is submitted. Post dated or outstation cheques/ draft are not permitted. Application received with outstation cheque/ demand draft shall be rejected.
  - 14) Allotment of units would be subject to realization of credit.
  - 15) The Unit holders can choose to opt out from the SIP at any point of time by submitting a written request to the nearest investor service center. Such request for discontinuation should be received at least 30 days prior to the next due date of the SIP. On receipt of such a request, the SIP will be discontinued for the respective scheme(s).
  - 16) Existing unit holders should note that unit holders' details and mode of holding (single, jointly, anyone or survivor) will be as per the existing Account.
  - 17) 360 ONE AMC reserves the right to reject any application without assigning any reason thereof. 360 ONE AMC in consultation with Trustees reserves the right to withdraw these offerings, modify the procedure, frequency, dates, load structure in accordance with the SEBI Regulations and any such change will be applicable only to units transacted pursuant to such change on a prospective basis
  - 18) If the investment is done on behalf of the minor then the guardian cannot undertake any financial and non-financial transactions including fresh registration of Systematic Investment Plan (SIP) and any other options, after the date of the minor attaining majority till the documents for the change in status are provided. In case of existing SIP registered prior to the minor attaining majority, the systematic investment will be continued to be processed beyond the date of the minor attaining majority and till the time a instruction from the major to terminate the SIP is received along with the required documents for change in the status of the folio.

# FATCA, CRS & ULTIMATE BENEFICIAL OWNERSHIP (UBO) SELF CERTIFICATION FORM FOR NON-INDIVIDUALS

(Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

Name of the entity

Type of address given at KRA  Residential or Business  Residential  Business  Registered Office

PAN  Date of Incorporation

City of incorporation  Country of incorporation

## FATCA & CRS DECLARATION

Please tick the applicable tax resident declaration -

1. Is "Entity" a tax resident of any country other than India  YES  NO (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

Sr. No.	Country %	Tax Identification Number	Identification Type % (TIN or Other, please specify)
1.			
2.			
3.			

% In case Tax Identification Number is not available, kindly provide its functional equivalent. In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Intermediary Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. (United States) but Entity is not a Specified U.S. Person, mention Entity's exemption code here

### PART A (to be filled by Financial Institutions or Direct Reporting NFEs)

1.  We are a Financial Institution (Refer 1 of Part C)  
**OR**  
 Direct Reporting NFE (Refer 3(vii) of Part C) (Please tick as appropriate)

GIIN

Name of sponsoring entity

GIIN (of sponsoring Entity, if any)

Applied for  Not obtained – Non-participating FI  
 Not required to apply for - please specify 2 digits sub-category   (Refer 1 A of Part C)

### PART A (to be filled by Financial Institutions or Direct Reporting NFEs)

1. Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C) YES  (If yes, please specify any one stock exchange on which the stock is regularly traded)  
Name of stock exchange

2. Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C) YES  (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)  
Name of listed company   
Nature of relation  Subsidiary of the Listed Company or  Controlled by a Listed Company  
Name of stock exchange

3. Is the Entity an active NFE (Refer 2c of Part C) YES   
Nature of Business   
Please specify the sub-category of Active NFE   (Mention code – refer 2c of Part C)

4. Is the Entity a passive NFE (Refer 3(ii) of Part C) YES   
Nature of Business

### UBO DECLARATION (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category):  Unlisted Company  Partnership Firm Limited  Liability Partnership Company  Unincorporated association / body of individuals  
 Public Charitable Trust  Religious Trust  Private Trust  Others  please specify

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary)

Owner-documented FI's should provide FI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of Part C).