MOTILAL OSWAL	NACH/ EC	S/ Direct Debit Ma	ndate Form		Application No.	
		ributor Name	Sub-Distributor ARN/RIA# ARN		nternal Sub-Broker/Employee Code	EUIN
						E133071
mentioning RIA code, I/We authorize you to sh hereby confirm that the EUIN box has been inter he employee/relationship manager/sales person loyee/relationship manager/sales person of the d	tionally left blank by me/us as of the above distributor or ne	s this is an "execution-only" transaction withou otwithstanding the advice of in-appropriatenes	t any interaction or advice ss, if any, provided by the	ilal Oswal Mutual First Holder		Third Holder
UNIT HOLDER INFORMATIO	N				☐ Mr. ☐ Ms.	☐ M/s
sting Folio Number		Mobile No.		Email		
me F	R S T		M I D D L E		L	A S T
Scheme Names		SIP Frequency and Date		SIP Month / Year/ Perpetual		SIP Amount Min. ₹ 1000/- (Weekly/Fortnigh Monthly) & ₹ 2000/- (Qtrl
Motilal Oswal MOSt Focused 25 Fund Plan: Regular Direct* Option: Growth* Div Payout Div Reinvestment		Monthly 1st 7th*	1 st , 28 th) 7 th -21 st	M M Y	to Perpetual SIP	
Motilal Oswal MOSt Focused Midcap 30 Fund Plan: □ Regular □ Direct* Option: □ Growth* □ Div Payout □ Div Reinvestment			7 th -21 st	M M Y	to Perpetual SIP	
Motilal Oswal MOSt Focused Multicap 35 Fund Plan: Regular Direct* Option: Growth* Div Payout Div Reinvestment			$7^{\text{th}} - 21^{\text{st}}$	M M Y	to Perpetual SIP	
Motilal Oswal MOSt Focused Long Term Fund Plan: □ Regular □ Direct* Option: □ Growth* □ Div Payout		Monthly 1st 7th*	7^{th} -21 st 14 th -28 th	M M Y	to Perpetual SIP	
Motilal Oswal MOSt Focused Dynamic Equity Fund Plan: □ Regular □ Direct* Option: □ Growth* □ Div Payout □ Quarterly □ Annually* □ Div Reinvestment* □ Quarterly □ Annually*		Monthly 1st 7th*	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	M M Y	to Perpetual SIP	
Motilal Oswal MOSt Ultra Short Term Bond Fund Plan: ☐ Regular ☐ Direct* Option: ☐ Growth* ☐ Div Payout ☐ Div Reinvestment		Monthly 1st 7th*	1 st , 28 th) 7 th -21 st	M M Y	to Perpetual SIP	
nis is to confirm that the declaration/instructity or the bank where I have authorized the bebits/Direct Debits/Standing Instructions.swal Mutual Fund shall be made from my/ou	tion has been carefully rea te debit and express my v Authorization to Bank: This r bank account with your B			mend this mand H/ECS/Direct Di ect Debit / Stand g this mandate f	(Plea	cancellation/amendment request to the onfirm adherence to the terms of NACH ayment towards my/our investment in M ase attach a cancelled cheque/cheque or ard Applicant
be signed by all holders if mode of operation of Ba						
Mutual Fund UM		ct Debit Mandate Form [Ar Fpr Official Use	pplicable for Lumpsum Addi	tional Purcha		ate D D M M Y Y Y
ick (✓) Sponsor Bank Co	_		lity Code		For Official Use	
lodify I/We hereby author		Motilal Oswal Mutual Fund	To Debit (to tick	(✓) SB	CA CC SB-NRE	SB-NRO Other
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amount of Rupees	IIK L	or outstand want	IFSC L		U Or MICR ₹	
EQUENCY Mthly	Qtly H.Y	rly Yrly As & when	presented	DEBIT TYPE	Fixed Amount	Maximum Amount
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ference 2				Email II		
gree for the debit of mandate proc	essing charges by the	e bank whom I am authorizing to	debit my account as per lat	est schedule	of charges of the bank.	
From 0 D M M Y Y Y To 3 1 1 2 2 0 9	1. Signa 9 1.	ature Primary account holder	2. Signatur	re of account	3333333333333333333333333	Signature of account holder
Or Until cancelled	This is to confirm	ed by me. Id that I am authorized to cancel/ amend	this mandate by appropriately c	communicating	rizing the User entity/ Corporate to debit the cancellation/amendment request to	the User entity/ corporate or the bank v
ACKNOWLEDGMENT SLIP			Application No.			
o No.		Investor Name				
eme Name		Plan		Option		
Period From D D M M Y	Y To D D M	MYY	Perpetual SIP			Stamp & Signatu

SYSTEMATIC INVESTMENT PLAN DETAILS

- The Mandate will be registered under the best suited mode i.e. NACH or ECS or SI at the discretion of its appointed payment
- Aggregator through whom the mandate will be registered for the SIP debit facility.

 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 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.
- Where the cancelled cheque or a copy of the cheque does not mention the bank account holder's name(s), Investor should provide self-attested bank pass book copy / bank statement / bank letter to substantiate that the first unit holder is one of the joint holder of the bank account. In case of a mismatch, it will be deemed to be a 3rd party payment and rejected except under the following exceptional circumstances
 - Payment by parents / grand-parents / related person on behalf of a minor in consideration of natural love and affection or as gift 6. provided the purchase value is less than or equal to `50,000/- and KYC is completed for the registered Guardian and the person making the payment. However, single subscription value shall not exceed above `50,000/- (including investment through each 7. regular purchase or single SIP instalment). However, this restriction will not to be applicable for payment made by a guardian whose name is registered in the records of Mutual Fund in that folio. Additional declaration in the prescribed format signed by the guardian and parents/grand -parents/ related person is also required along with the application form. Payment by an Employer on behalf of employee under Systematic Investment plans through, Payroll deductions provided KYC
 - is completed for the employee who is the beneficiary investor and the employer who is making the payment. Additional

- declaration in the prescribed format signed by employee and employer is also required along with the application form
- c) Custodian on behalf of an Fill or a Client provided KYC is completed for the investor and custodian. Additional declaration in the prescribed format signed by Custodian and Fill / Client is also required along with the application form.

 Please not that in the event of a minor mismatch between the bank account number mentioned in the application from and as appearing in the cheque
- leaf submitted, bank account number would be updated based on the cancelled cheque leaf provided the name(s) of the investor/applicant appears in the cheque leaf.
- AUTHORISATION BY BANK ACCOUNT HOLDER(S)
 - a) Please indicate the name of the bank & branch, bank account number.
- b) If the mode of operation of bank account is joint, all bank account holders would need to sign at the place marked.

 Applications incomplete in any respect are liable to be rejected. AMC/ Service Provider shall have absolute discretion to reject any such Application
- AMC or other service providers shall not be responsible and liable for any damages / compensation for any loss, damage etc. The investor assumes
- the entire risk of using this facility and takes full responsibility.

 DECLARATION & SIGNATURES

 This section need to be signed by the applicant(s) / unit holder(s) at the places marked as per the mode of holding recorded with us (i.e. "Single", "Anyone or Survivor" or "Joint").

TERMS AND CONDITIONS FOR ECS (Debit Clearing)

- The cities/ banks/ branches in the list may be modified /updated / changed / removed at any time in future entirely at the discretion of Motifal Oswal Mutual Fund without assigning any reasons or prior notice. If any city / bank/ branch is removed, SIP instructions for investors in such city/bank/branch via (ECS) (Debit Clearing) Direct Debit route will be discontinued without prior notice.
 - List of Cities for SIP Auto Debit Facility via ECS (Debit Clearing):Agra, Ahmedabad, Allahabad, Amritsar, Anand, Asansol, Aurangabad, Bangalore, Bardhaman, Baroda, Belgaum, Bhavnagar, Bhilwara, Bhopal, Bhubaneshwar, Bijapur, Bikaner, Calicut, Chandigarh, Chennai, Cochin, Coimbatore, Cuttack, Davangere, Dehradun, Delhi, Dhanbad, Dungappur, Erode, Gadag, Gangtok, Goa, Gorakhpur, Gulbarga, Guwahati, Gwallor, Haldia, Hasan, H u b l T, Hyderabad, Imphal, Indore, Jabalpur, Jaipur, Jalandhar, Jammu, Jamnagar, Jamshedpur, Jodhpur, Kakinada, Kanpur, Kolhapur, Kolkata, Kota, Lucknow, Ludhiana, Madurai, Mandya, Mangalore, Mumbai, Mysore, Nagpur, Nasik, Nellore, Patna, Pondicherry, Pune, Raichur, Raipur, Raikot, Ranchi, Salem, Shillong, Shimla, Shimoga, Sholapur, Siliguri, Surat, Tirunelveli, Ti

Trichy, Trivandrum, Tumkur, Udaipur, Udipi, Varanasi, Vijaywada, Vizaq

Thors, meantain, talana, todapa, copp., etailas, rijayvada, vizag List of Banks for SIP <u>Direct Debit Facility:-</u> Allahabad Bank, Axis Bank, Bank of Baroda, Bank of India, Citi Bank, Corporation Bank, Federal Bank, ICICI Bank, IDBI Bank, IndusInd Bank, Kotak Mahindra Bank, Puniah National Bank, South Indian Bank, State Bank of India, State Bank of Patiala, UCO Bank, Union Bank of India, United Bank of

- Applications for SIP Auto Debit (ECS/ Direct Debit) Facility would be accepted only if the bank branch participates in local MICR/ECS clearing.
- In case the investor's bank chooses to cross verify the auto debit mandate with him/ her as the bank's customer, investor would need to promptly act on the same.AMC/Service Provider will not be liable for any transaction failures due to rejection of the transaction by investor's bank/ branch or its refusal to register the SIP mandate or any charges that may be levied by the Bank/ Branch on investor / applicant.

INSTRUCTIONS TO FILL THE NACH / ECS / SI MANDATE

- UMRN Code, Sponsor Code, and Utility Code are for official use only. Please do not write anything in these boxes/spaces. The following information has to be mandatorily filled in the Mandates. In case any of these fields are not filled, the mandate is liable
- - tor rejection.

 a) Please tick the Appropriate Account Type and furnish the Bank Account Number from which the SIP installment/s is/are to be debited.

 b) Please mention the Bank Name, 11 Digit IFSC code, 9 Digit MICR Code of your Bank in the appropriate boxes provided for the purpose. The MICR code is the number appearing next to the cheque number on the MICR band at the bottom of the cheque. In the absence of these information, Mandate registration is liable to be rejected.
- c) Please mention the maximum amount that can be debited using this mandate. The amount needs to be mentioned both in words as
- Cyriadea mention the maximum amount dat can be declined using his manuale. The amount needs to be mentioned both in words as well as numbers.

 d) Please mention your Mobile Number and Email Id on the mandate form.
 e) Please provide the Start and End date for the period which the Mandate should be active. If you do not wish to provide an End date, please tick the check box for 'Until Cancelled'.
- The mandate needs to be signed by all the account holders in line with the mode of holding recorded with the investor's bank. The Account holder's names have to be mentioned as per their mode of holding in Account.