PRUDENTIAL TO

PAN BASED MANDATE CUM SIP REGISTRATION FORM Application No. [For investment through NACH]

AICICI	PAN BASED MA	ANDATE	
PRUDENTIAL TO UMRN		SEONLY	Date
Tick (✓) Sponsor Ba	nk Code FOR OFFICE USE ONLY	Utility Code	FOR OFFICE USE ONLY
CREATE ✓ I/We hereby authorize			
CANCEL Bank a/c number			
With Bank	of customers bank IFSC	or f	/ICR
an amount of Rupees Maximum Amount (Rupees in words)			
FREQUENCY Multiple And Amount Amount PAN FREQUENCY Multiple And Amount			
Reference APPLICATION NUMBER Email ID			
I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.			
PERIOD —			
To	Sign:Siç		
Or		Name as in bank records	
Declaration: I/We hereby declare that the particulars given on this mandate are correct and complete and express my willingness and authorize to make payments referred above through participants in NACH/SI/any other mode as may be preferred by the AMC from time to time. I/We hereby confirm adherence to the terms of this facility offered by ICIC Prudential Asset Management Company Limited (the AMC) as specified in Terms & Conditions under Registration of OTM/PAN Based Mandate Facility and amended from time to time and of NACH (Debits). Authorization to Bank: This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corpo-			
rate to debit my account. I/We have understood that I/we authorized to cancel/amend this mandate by appropriately communicating/amendment to the User entity/corporate or the or the bank where I have authorized the debit. This is to inform that I/we have registered for this facility and that my/our investment in ICICI Prudential Mutual Fund shall be made from my/our above mentioned bank account with your Bank and to debit my/our account for any charges towards mandate verification, registration, transactions, traums, etc., as applicable.			
PRUDENTIALTO	SIP REGISTRATIO		
MUTUAL FUND	Features and Instructions before completing this form. All se		
BROKER CODE (ARN CODE)/ RIA CODE#	SUB-BROKER ARN CODE	SUB-BROKER CODE (As allotted by ARN holder)	Employee Unique Identification No. (EUIN)
#By mentioning RIA code, I/We authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund.			
TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY: In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invested. Upfront commission shall be paid directly by the investor to			
the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. Declaration for "execution-only" transaction (only where EUIN box is left blank) - I/We hereby confirm that the EUIN box has been intentionally left blank by me/ us as this is an "execu-			
tion-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.			
SIGNATURE OF SOLE / FIRST APPLICANT SIGNATURE OF SECOND APPLICANT SIGNATURE OF THIRD APPLICANT			
The Trustee, ICICI Prudential Mutual Fund, I/We have read and understood the contents of the Scheme Information Document of the following Scheme and the terms and conditions of the SIP Enrolment.			
FOLIO NO.		Registra	tion via Existing OTM [Please tick (🗸)]
Sole/First Applicant's Name (As per Aadhaar): Mr. /Ms. / M/s			
FIRST MIDDLE LAST			
Scheme: ICICI PRUDENTIAL PLAN: SIP TOP UP (Optional) (Tick to avail this facility)			
OPTION: SUB-OPTION: DIVIDEND FREQUENCY: AEP FREQUENCY Please refer instructions and Key Scheme Features for options, sub-options and other facilities available under each scheme of the Fund. Percentage: 10% 15% 20%			
other (multiples of 5% only)			
Each SIP Amount: Rs. In words: TOP UP Amount: Rs.			
SIP Frequency: Monthly Quarterly* (Default is Monthly) *In case of Quarterly SIP, only Yearly frequency is available under SIP TOP UP: *TOP UP amount in multiples of Rs.500 only. Frequency: Half Yearly Yearly			
SIP Date: SIP Start Month / Year		M Y Y Y	SIP TOP UP CAP Amount:
Date: Month/Year EXISTING OTM / FIRST INSTALLMENT E	ANK DETAILS:		RsOR Month-Year#:
· ·	eque/DD Amount RsA/c No.		M M Y Y Y
Bank Name: #Investor has to choose only one option – either CAP Amount or CAP Month-Year			
DEMAT ACCOUNT STATEMENT DETAILS (OPTIONAL – PLEASE REFER INSTRUCTION NO. 19)			
NSDL: Depository Participant (DP) ID (NSDL on	Beneficiary Account Number (NSDL only)	CDSL: Depository Participant (DP) ID (CDSL or	ly)
YOUR CONFIRMATION/DECLARATION: I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs.50, 000 in a year as described in the Instruction No.IV(d) of the common application form. 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. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)			
Sole/First (Holder	<u> </u>	3rd Holder	
Solo Solo Solo Solo Solo Solo Solo Solo	2nd Holden		
PRUDENTIAL Name of the Investory	IENT SLIP (To be filled in by the investor)		o./ Application No.
Acknowledgement Stamp Scheme Name: Option: SIP Amount Rs SIP Frequency:MonthlyQuarterly			
SIP TOP UP Amt. Rs TOP UP CAP: Amt: Rs OR Month-Year: M M Y Y Y Y Y			