

Registration Cum Mandate Form For NACH/Dir		-	pplication No.:				RAE ASS	
Name & Broker Code / ARN / RIA Code	Sub Bro Agent ARN		Sub Agent Code	EUIN*		nternal Code for b-Agent/Employee	ISC Date Time Reference	
South Gujarat ARN: 54854								
Declaration for "Execution Only" Transaction (wh has been intentionally left blank by me/us as the advice of in-appropriateness, if any, provided by	ere Employee Unique Ide is transaction is execute the employee/relationship	entification Nu d without any o manager/sale	mber-EUIN* box is left blank). I interaction or advice by the eres person of the distributor/sub	Please refer instrumployee/relations broker.	ruction 12 of KIN ship manager/sa	l for complete details on EUI les person of the above dis	IN. I/We hereby confirm th tributor/sub broker or not	nat the EUIN box withstanding the
Signature of 1 st Applicant / Guardian / Authorised :	Signatory / PoA / Karta	Signatu	rre of 2 nd Applicant / Guardian / Au	thorised Signatory	/ PoA	Signature of 3 ^{et} Applicant /	Guardian / Authorised Sign	atory / PoA
Please 🖌 🔿 Enrollment for New	<u> </u>		,			• ()	SIP Top-up Facilities	ility
1. EXISTING UNIT HOLDER INFO Name of 1 st Unit Holder	RMATION (The deta	alls in our	records under the follo	number men		olio No.	tion.)	
Aadhaar No.							ar Copy (Please√)	
2. SIP ENROLMENT DETAILS (Ple	ase check the Min	imum Amo	ount Criteria for the sch	eme applied	for. [Refer li			
Frequency Please 🕢 🔘 Monthly (Default) 🔵 Quart	erly 🔿	Regular Plan 🔿 Direct	Plan 0	Growth (Defa	ult) 🛛 🔿 Dividend P	ayout O Dividend I	Reinvestmen
Scheme						 Div freque 	ncy*	
*Dividend frequency is applicable only	for Mirae Asset Cas	h Managen	nent Fund & Mirae Asset	Savings Fund	d.			
SIP Date Please 🕢 🔿 01 st 🔿 10 ^{tt}	(Default) O 15th	○ 21 st () 28 th SIP Amount (₹	5,000	○ 10,000	◯ 25,000 ◯ Any ot	her Amount. (₹)	
SIP Start Date: M M Y Y Y Y OR Ent	er SIP End Date: M	мүүүү	End Date : Perpetual) Dec 2099 (Till you instr	uct Mirae Asset Mutu	al Fund to discontin	nue your SIP
2a. SIP TOP-UP FACILITY (You can	n start SIP Top-up f	facility afte	r minimum 6 months fr	rom 1st SIP) I	Refer Instru	ction No. 23 on the re	everse on SIP Top-u	ıb
All Applicants have to submit NACH	mandate and will ne	ed to fill th	e maximum amount in I	ine with Top I	Up amount,	SIP amount & tenure.		
Top-up Amount (₹)	(minir	mum ₹ 500/-	- and in multiples of ₹ 1/- o	only)	Top-up	Start Date M M		
Frequency Please 🥢 🛛 Ha	alf Yearly) Yearly (I	Default)		Top-up	End Date M M	ТҮҮҮҮ	
For Existing Investors: Original SIP d	etails - SIP Date -	SIF	PAmount (₹)-	0.1	heme -			
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