MOTILAL OSWAL
Mutual Fund

ECS Autosave for Systematic Investment Plan

Application No.		
	Distributor ARN	EUIN
	ARN-0155	

ECS Debit facility for SIP is currently available for

Account holders of all banks participating in local clearing at 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, Durgapur, Erode, Gadag, Gangtok, Goa, Gorakhpur, Gulbarga, Guwahati, Gwalior, Haldia, Hasan, Hubli, 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, Rajkot, Ranchi, Salem, Shillong, Shimla, Shimoga, Sholapur, Siliguri, Surat, Tirunelveli, Tirupati, Tiruppur, Trichur, Trichy, Trivandrum, Tumkur, Udaipur, Udipi, Varanasi, Vijaywada, Vizag

Electronic Debit for the account holders of the following banks

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, Punjab National Bank, South Indian Bank, State Bank of India, State Bank of Patiala, UCO Bank, Union Bank of India, United Bank of India

Authorization to pay SIP installments through Electronic Clearing Service (ECS) / Electronic Debit

I/We hereby, authorise Motilal Oswal Mutual Fund or their authorised service provider for Motilal Oswal Asset Management Company Limited to debit my/our bank account by ECS (Debit Clearing) / Electronic Debit for the collection of SIP installments.

1 UNIT HOLDER INFORMATION

Existing Folio Number ☐☐☐☐☐☐☐☐☐☐

Name of the First Holder _____

Mobile No. ☐☐☐☐☐☐☐☐☐☐ **Email ID** _____

2 SYSTEMATIC INVESTMENT PLAN (SIP) / MICRO SIP

Scheme - _____ **Plan -** ☐ Direct (Default Plan) ☐ Regular **Option -** ☐ Growth(Default Option) ☐ Div - Payout ☐ Div - Reinvest

Subsequent SIP Instalment Amount (₹) _____

SIP Frequency

☐ Monthly ☐ Quarterly

Motilal Oswal MOSt 10 Year Gilt Fund /
Motilal Oswal MOSt Ultra Short Term Bond Fund

SIP Date

Motilal Oswal MOSt Focused 25 Fund/
Motilal Oswal MOSt Focused Midcap 30 Fund
Motilal Oswal MOSt Focused Multicap 35 Fund

☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly

☐ 1st ☐ 7th ☐ 14th ☐ 21st ☐ 28th of the Month

SIP Period From ☐☐ M M Y Y **To** ☐ Perpetual ☐ Other M M Y Y

3 BANK DETAILS (Centralised Bank Account (CBS) Number is mandatory for ECS and Direct Debit)

Name of the Account Holder _____

Name of the Bank _____ **Branch** _____

Account Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **City** _____

Account Type ☐ Current ☐ Savings ☐ NRO ☐ NRE ☐ FCNR ☐ Others _____ (please specify)

MICR Code ☐☐☐☐☐☐☐☐☐

Please specifically mention the MICR code of you bank branch in case you have a payable at par cheque book. In case of incorrect/ incomplete bank details it will be captured from attached cheque copy on a best effort basis.

I/We hereby declare that the particulars given above are correct and express my willingness to pay the installments to pay the installments referred above through participation in ECS / Electronic Debit. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform Motilal Oswal Asset Managment Company Ltd. about any changes in my bank account. I/We also agree to bear any charges pertaining to availing of this facility.

Signatures

X First / Sole Applicant	Second Applicant	Third Applicant

Place _____

Date _____

4 FOR BANK USE ONLY

We, hereby, certify that the particulars furnished above are correct as per our records, and we, hereby, declare that a copy of this form, duly completed, has been submitted to us.

Branch _____ **Date** _____

Signature of the Authorised Official from the Bank

Bank Stamp

5 AUTHORISATION OF THE BANK ACCOUNT HOLDER

This is to inform that I / We have registered for the RBI's ECS (Debit Clearing) / Electronic Debit and that my payment towards SIP installments shall be made from my / our below mentioned bank account with your bank. I / We authorise the representative carrying this ECS / Electronic Debit mandate form to get it verified and executed.

X Account Holder's Signature	Joint Account Holder's Signature	Account Number