



SIP Auto Debit Facility Form

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ARN - 36250

Principal Pnb Asset Management Company Private Limited
Investment Manager for Principal Mutual Fund

REGISTRATION CUM MANDATE FORM FOR ECS (Debit clearing / Auto Debit)

First Investment in SIP vide a cheque and subsequent investments via **Auto Debit**, available in select cities only.
Applications should be submitted atleast **SEVEN DAYS** before the 1st SIP cheque date

<input type="checkbox"/>	New SIP Registration - by an existing investor	<input type="checkbox"/>	Change in Bank Account for an existing Investor with Principal Mutual Fund
<input type="checkbox"/>	New SIP Registration - by a new investor (Also attach the new application form duly filled & signed)		

INVESTOR AND INVESTMENT DETAILS

Sole / First Investor Name	<input type="text"/>
MF Account No.	<input type="text"/>
Scheme	<input type="text"/>
Plan	<input type="text"/>
Option & Sub Option	<input type="text"/>

SIP AND BANK DETAILS

Each SIP Amount (Rs.)	<input type="text"/>	Frequency	<input type="checkbox"/> Month	<input type="checkbox"/> Quarterly
First SIP Cheque No.:	<input type="text"/>	Cheque date should be either 1st, 5th, 15th, 25th of the month/quarter.		
(Submit atleast 7 days before this SIP Cheque Date)		(Note: Cheque should be drawn on bank details provided below)		
SIP Auto Debit Dates :	<input type="checkbox"/> 1 st	<input type="checkbox"/> 5 th	<input type="checkbox"/> 15 th	<input type="checkbox"/> 25 th of the month / quarter.
SIP Period	Start From	End on		
	MM YY	MM YY		

(Note: Please allow minimum one month for auto debit to register and start)

I/We hereby, authorise Principal Mutual Fund and their authorised service providers, to debit my/our following bank account by ECS (Debit Clearing) / auto debit to account for collection of SIP payments.

PARTICULARS OF BANK ACCOUNT

Accountholder Name as in the Bank Account	<input type="text"/>
Bank Name & Branch	<input type="text"/>
City	<input type="text"/> Pincode <input type="text"/>
Account Number	<input type="text"/> Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Cash Credit
9 Digit MICR Code	<input type="text"/> ◀ (Please enter the 9 digit number that appears after your cheque number)

I/We hereby, declare that the particulars given above are correct and express my willingness to make payments referred above through participation in ECS / Auto 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 Principal Pnb Asset Management Company Pvt. Ltd. about any changes in my bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

First Account Holder's Signature

Second Account Holder's Signature

Third Account Holder's Signature

FOR OFFICE USE ONLY (Not to be filled in by Investor)

Recorded on	<input type="text"/>	Scheme Code	<input type="text"/>
Recorded by	<input type="text"/>	Credit Account Number	<input type="text"/>
Bank use Mandate Ref. No.	<input type="text"/>	Customer Ref. No.	<input type="text"/>

Authorisation of the Bank Account Holder (to be signed by the Account Holder)

This is to inform that I/We have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Auto Debit Facility and that my payment towards my investment in Principal Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorise the representative carrying this ECS/Auto Debit to account mandate Form to get it verified & executed.

Bank Account Number

First Account Holder's Signature
(As in Bank Records)

Second Account Holder's Signature
(As in Bank Records)

Third Account Holder's Signature
(As in Bank Records)