





MANDATE FORM FOR ELECTRONIC DEBIT SYSTEMATIC INVESTMENT PLAN (SIP)

Account number

BHAVESH MODH 27030 Application No : S

Please submit this form along with the SIP application form (i.e. Form 2)

Electronic Debit facility for SIP is currently available for

Account holders of all banks participating in local clearing at Agra, Ahmedabad, Allahabad, Amritsar, Asansol, Aurangabad, Bangalore, Bardwan, Baroda, Belgaum, Bhilwara, Bhopal, Bhubaneshwar, Bijapur, Bikaner, Calicut, Chandigarh, Chennai, Cochin, Coimbatore, Cuttack, Darjeeling, Davangere, Dehradun, Delhi, Dhanbad, Durgapur, Erode, Gadak, Gangtok, Gorakhpur, Guwahati, Gwalior, Gulbarga, Hubli, Hyderabad, Indore, Jabalpur, Jaipur, Jalandhar, Jammu, Jamshedpur, Jodhpur, Kakinada, Kanpur, Kolhapur, Kolkata, Lucknow, Ludhiana, Madurai, Mangalore, Mumbai, Mysore, Nagpur, Nasik, Nellore, Panjim, Patna, Pondicherry, Pune, Raipur, Rajkot, Ranchi, Salem, Shimla, Sholapur, Siliguri, Surat, Thirupur, Tirupati, Trichur, Trichy, Trivandrum, Tumkur, Udaipur, Varanasi, Vijaywada (also covers Guntur, Tenali & Mangalgiri), Vizag.

Account holders of the following banks

our account as mention above

Account Holder's signature

(As in bank records)

Axis Bank, Bank of Baroda, Bank of India, HDFC Bank, IDBI Bank, IndusInd Bank, Kotak Mahindra Bank, Punjab National Bank, Union Bank of India and State Bank of India

Authorization to pay SIP instalments through Electronic Debit Arrangement

I/We hereby, authorise Indiaideas.com, the authorised service provider for Axis Mutual Fund to debit my/our bank account by Electronic Debit for the collection of SIP instalments.

UNIT HOLDER INFOR	MATION																	
Folio No.																		
Name of first applicant																		
PAN							M	lobile										
E-mail																		
Preferred messaging mediur	n SMS -	□Yes [□No	E-mail	- □Yes	□No												
SIP DETAILS																		
Scheme name	Treasury A	Advantag	ge Fund	☐ Axis	Equity F	und [☐ Axis	Tax Sav	er Fun	d (SIP)	facility	is curre	ently	not ava	ilable in	Axis Liq	juid Fund)	1
SIP Start Date	MY	Y	nd Date (should be	a minim	um of 3 y	ears fro	m the st	art date	e) 🔼	D	М	Υ	Υ	No of I	Installme	ents	
Monthly SIP amount Rs.		(in figu	ıres)		Rs.						(in wor	ds)						
BANK DETAILS (Please	attach a cop	y of the ch	eque of bel	low mentio	ned bank a	account wit	th this ap	plication i	orm.)									
Account holder's name																		
Name of bank																		
Branch								Accoun	No.									
Account type	Current	☐ Sav	ings	□NRO	□N	RE		Others						(sp	ecify)			
9 digit MICR code (Please ent	er the 9 digi	t number th	nat appears	after your	cheque nu	ımber)												
Please specifically mention t		•			•	'	•											
I/ We hereby declare that the If the transaction is delayed of Fund about any changes in m	or not effect	ted at all fo	ove are co or reasons	rrect and s of incom	express r plete or in	my willing ncorrect i	ness to propertion	pay the i on, I/ we	nstalme would	ents refo not hold	erred a d the us	bove th	nroug itutio	n partion n respo	ipation i nsible. I	in Electro / We will	onic Debit l also infor	arrangement. m Axis Mutua
Bank Account Holder (1)					Bank Account Holder (2)							Bank Account Holder (3)						
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ridce															Dai		D IVI	IVI I I
FOR BANK USE ON	ILY																	
We, hereby, certify that the p	articulars f	furnished :	above are	correct a	is per our	records.	and we	hereby	declar	e that a	conv	of this f	form.	duly co	moletec	d has be	een submi	itted to us
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Branch [Dat	te 📙	D M	MYY
Signature of the authorised official from the bank															Bank	stamp		
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AUTHORISATION C	E THE	BANK	ACCO	UNT H	OLDF	R												
This is to inform you that I/ we							paymen	t toward	s SIP in	stallme	nts sha	all be ma	ade f	rom my	our bel	ow ment	tioned ban	nk account with
your bank. I/ We authorise the	e represent	tative carr	ying this E	CS mand	ate form t	to get it ve	erified an	nd execu	ted. I/V	Ve here	by auth	norised	the b	ank to	debit ve	rification	charges in	fany from my.

Joint Account Holder's signature

(As in bank records)