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SIP Auto Debit Form

REGISTRATION CUM MANDATE FORM FOR ECS

First Investment in SIP vide a cheque and subsequent investments via **Auto Debit**, available in selected cities only.

New SIP Registration Micro SIP [Refer Instruction No. A(4)] Change in Bank A/c. (only For Existing Investors)
Application No. of the Main Application Form (only For New Investors)

DISTRIBUTOR INFORMATION & APPLICATION RECEIPT DATE

Broker Name & Code	Sub-Broker Code	I-Code	Registrar Serial No.	Bank Serial No.	Date & Time of Receipt
ARN 2405					

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

1 EXISTING UNITHOLDERS DETAILS (Please note that the applicant details and mode of holding will be as per the existing Folio Number) [Refer instruction No. A(1)]

Please fill the details and proceed to Section 3.

Name of Sole / First Unit Holder Common Account / Folio No.

2 NEW APPLICANT'S DETAILS (Please fill in BLOCK LETTERS with black/blue ink, use one box for one alphabet leaving one box blank between two words)

NAME OF FIRST / SOLE APPLICANT Mr. Ms [Note: No Joint holding permitted in case of minor applicant - *Refer Instruction no. A(3)]

Date of Birth (Mandatory for Minor Applicant - *Enclose Supporting Document) DD MM YY PAN

STATUS - Resident Individual NRI / PIO / FI Partnership Firm BOI Minor Bank / FI Society/Club Trust Company Others (Please specify)

Guardian (Mandatory for Minor Applicant) / POA Holder / Contact Person (In case of non-individual Investors - PAN & KYC not required for contact person) Mr. Ms

Date of Birth DD MM YY PAN Relationship with Minor Applicant Father Mother Legal Guardian [Note: *Enclose Supporting Document]

NAME OF THE SECOND APPLICANT Mr. Ms

Date of Birth DD MM YY PAN

NAME OF THE THIRD APPLICANT Mr. Ms

Date of Birth DD MM YY PAN

Kindly ensure that Copy of PAN & KYC Acknowledgement Letter are enclosed to your Application Form as per Instruction No. A(4) of this Form.

NOTE: IN CASE OF FOLIOS HELD ON BEHALF OF MINOR - STANDING INSTRUCTIONS IN THE NATURE OF SIP WILL BE REGISTERED ONLY TILL THE DATE OF MINOR ATTAINING MAJORITY.

3 SIP AND BANK / PAYMENT DETAILS (Mandatory) (Please note that a minimum 30 days are required to set up Auto Debit)

Scheme Plan Option

(i) Investment Amount (₹) (ii) DD Charges (₹) Net Amount (₹) (i)+(ii)

Mode of Payment (Please Cheque DD*) *First SIP Cheque/DD No. [Note: Cheque/DD should be drawn from Bank A/c details provided below]

Account Type (Please Savings Current NRE NRO FCNR NRSR Others MICR Code [This is a 9 digit number next to your Cheque No.]

Cheque/DD issued from Bank A/c No. Name of 1st Bank A/c holder

Bank Name Name of 2nd Bank A/c holder

Branch & City Pin code Name of 3rd Bank A/c holder

Details of the Payer (In case, the First Unitholder is not a Bank A/c. holder from where the payment is being made) [Refer Instruction No. A(5)]

Parent/Grand Parent/related person: Name Custodian: Name Employer: Name

Enclose both the following Documents
• KYC Acknowledgement Letter of the Payer & Payee
• Joint Declaration

Each SIP Amount (₹) SIP Start Date DD MM YY Frequency Monthly Quarterly No. of Installment (Atleast 6 ind. first instalment)

SIP Period Start From (2nd instalment) MM YY End on (Last instalment) MM YY Second and subsequent instalment dates (the date on which you want to invest for subsequent period) 1st 5th 15th 25th

* In case of payment through DD/Pay order it is mandatory to enclose Declaration / Acknowledgement from Bank Mandatory Enclosure - Blank Cancelled Cheque Copy of Cheque

*Please mentioned Application No., PAN and Name of the First Unitholder on the reverse of the Cheque / DD.

We confirm that I/we have read and understood the contents of the Statement of Additional Information, Scheme Information Document and Key Information Memorandum of the respective Scheme(s). I/We have requested transaction(s) as stated herein and acknowledge that the same shall be governed by the terms of the above mentioned documents. I/We will also inform Principal Mutual Fund of any changes in my/our account details. I/We herein declare that the particulars given above are correct and express my/our willingness to make payments referred above through participation in ECS. In case the cheques/my/our instructions to the Bank are dishonoured or cannot be acted upon, then in such an event the Bank, the AMC and Principal Mutual Fund shall not be held responsible. I/We further confirm that the ARN Holder (Broker/Sub-Broker) 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(s) has been recommended to me/us. I/We further understand that the contents hereof form an integral part of the main application form.

Applicable for Micro SIP: I/We further confirm & declare that I/We do not have any existing Micro SIPs in the scheme(s) of Principal Mutual Fund which together with the current Micro SIP application will result in aggregate investments exceeding ₹ 50,000/- Further, I/We confirm that where the PAN & KYC acknowledgement letter has not been provided for any unitholder the same is on account of the fact that I/We do not hold PAN as on date.

Signature of 1st Holder/POA Holder/Guardian Signature of 2nd Holder/POA Holder/Guardian Signature of 3rd Holder/POA Holder/Guardian

Please note Signature(s) should be as it appears on the application form and in the same order. In case, Mode of Holding is joint, all applicants are requested to sign.

Date DD MM YY YY

(Bank's Stamp)

Signature of the Authorised Official from the Bank

FOR BANK USE ONLY (Not to be filled in by Applicant)

Recorded on DD MM YY YY Customer Ref. No. Recorded by

Scheme Code Credit A/c. No. Bank use Mandate Ref. No.

AUTHORISATION OF THE BANK ACCOUNT HOLDER [to be signed by all the Account Holder(s)]

I/We hereby authorise the bank to debit my / our account for making payment to Principal Mutual Fund through ECS (Debit) as per the details given herein. I/We have read the relevant Scheme Information Document and Statement of Additional Information and agree to discharge the responsibility expected of me/us as a participant under the concerning scheme(s). I/We will also inform Principal Mutual Fund, about any changes in my/our bank account. Further this is to inform you that, I/We have registered with the RBI's Electronic Clearing Service and that the payment towards my investment in Principal Mutual Fund shall be made from my/our within bank account with your bank. I/We authorise the representative carrying this ECS Mandate Form to get it verified & executed, if necessary. The verification charges, if any, may be debited from my/our account. I/We hereby further authorise Principal Mutual Fund, acting through their authorised service providers to debit my / our bank account by ECS (Debit Clearing) for collection of SIP payments.

1st Account Holder's Signature (As in Bank Records) 2nd Account Holder's Signature (As in Bank Records) 3rd Account Holder's Signature (As in Bank Records) Bank Account Number