	TUAL	FUND	• Lon	g term	Capital	apprec	iation	vestors				tiskomete	יר	ANT F	UND				
A PARTN	ER FO	R LIF			Quant m						/3	RISKOMETER stors understand that their pris- will be at very high risk	follow	ing quant-ba	uity scheme sed investing	APPLIC	ΔΤΙΟΝ	NO	
												ct is suitable lease fi			Letters)	AFFLIC	ATION	NO.	
ARN & Nam	ne of D	istribu	utor		anch (only for S			Sub-Bi	oker ode	ARN	Sub-	Broker	Code	(Empl	oyee Uniqu	EUIN* e Identificatio	on Number	Refere	nce No.
Declaration for "ex * I/We hereby confirm distributor or notwiths	that the E	UIN box h	has been ir	tentiona	ally left bla	ank by m	e/us as th	is is an "e	ecution-	only" trans	action with	nout any inte	eraction or listributor	advice by and the dis	the employ stributor has	ee/relationsh not charged	ip manager any adviso	/sales persor ry fees on this	of the above stransaction.
SIGNATURE(S)																			
	1 st Appl	icant /	Guardia	n / Au	thorise	ed Sigr	natory	2 ^{nc}	Applic	ant / A	uthorise	d Signat	ory		3 rd Ap	olicant / A	uthorise	d Signato	ry
EXISTING FO											NAME	=							
1. FIRST APP Name @		T DET	AILS								1 1		1 1		1 1			1 1	1 1
(Mr. / Ms. / M/s.) (Name should be Name of Guardi	as per l		1)																
(in case of Minor) Relationship of ()			Мо	ther	Lega	al Guard	ian (Ple a	ase mano	latorily en	close the	document e	videncino	the relati	onship of N	inor with Gu	ardian]		
Guardian Date					- 1 T		M	М	Y N	Y	Y								
PAN/PEKRN I (Enclose PAN Card C	NO. 🍞	,										e of Birth ber PAN)			n D	D M	М	ΥΥ	Y Y
Legal Entity lo	dentifie	r (LEI)) for No	on-Ind	lividua	ils		1 1							V	alidity _			
(CKYC Identification	n No.)									(Enclose K	YC Acknowl	ledgement)					I.
Email ID pertain			(default)	🗌 Sp	oouse	🗌 Dej	pendent	Childre	n 🔲 C	epende	nt Sibling	g 🗌 Dep	pendent	Parents	🗌 Guar	dian 🔲 F	PMS 🔲	Custodian	POA
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Correspondence Address of																			
1st Applicant																			
City																			
Pin						tate													
Foreign Address	i	for Corr	responde	nce for I	NRI App	licants o	only (Ple	ase (✔))	Indian by	Default		Foreig	n 📘						
(Mandatory for NRI / FII) City)L																		
Zip								Count	tru										
2. MODE OF	HOLDII	NG (PI	lease 🖌)				Court	u y										
Single				nt			Anyon	e or Surv	vivor										
					Sec	ond /	Applic	ant							Third	Applica	nt		
Name (Name sh be as per PAN) PAN/PEKRN	<u> </u>											1 1							
(Enclose KYC Acknow	0															<u> </u>			
(As per PAN) (Ma	andatory)	D	D	M	M Y	Y	Y	Y				D	DN	/ M	Y N		Y		
KIN (CKYC Identification	,				otoilo														
CP4. BANK Name of Bank		ו אונ	Pay Ol	(t) D(etalls		rst Ap	pilcan	(Manda	tory to atta	ach bank ac	ccount proof	in case the	e payout ba	ank account i	s different fro	om the sourc	e/investment i	bank account)
Branch Name																			
and Address		İ									İİ							ÌÌ	
City											ÌÌ					Pin	· · ·		
Account No.																	nt Type (I		
IFS Code										(Please pro	ovide a copy	y of CANCEL	LED chequ	e leaf)	Savin			FCNR	
9 digit MICR Code	e														Curre			Others	
SBI MUTUAL	LFUND	Sponsor nvestme	: State Ba	nk of Inc	dia Funds M	anagem	ent Ltd.		EAR HE	OWLE	DGEN	— — – 1ENT S			— — — ICATIO	N NO			
(To be filled in I Received from	by the Fi								To be	filled in	by the In	ivestor							Signature,
Scheme			Plan (✓)	Option	(✔)	IDC	W Facili	ty(✔)	Che	que Am	iount (Rs	.) Ba	ank and	Branch	Chequ	e No. &	Date	Date & Stamp
SBI QUAI	NT FUN	D	Reg	gular	Grov	vth [estment											·
Attachments						· [L		<i>_</i>					All pure	chases ai	re subject t	o realisatio	n of chequ	e	

X

5. FATCA & CRS INFORMATIO	N: For Ind	ividuals / Propri	etor (Mandatory). N	lon-Indivic	dual inv	estors should ma	Indatorily fill separa	te FATCA/CRS & UBO Form (Annexure-1).
Is the applicant(s) Country o								Think Assolite and
First Applicant (ind	No	Minor)		Second Yes	Аррі	No		Third Applicant P□Yes □No
If "YES", please provide t		ving informat					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Details		-	cant (including			Second A	pplicant	Third Applicant
Country of Birth								
Place/City of Birth								
Nationality								
Country of Tax Residency 1	1							
Tax Payer Ref. ID No^								
Identification Type [TIN or Other, Please specify]								
Country of Tax Residency 2	2							
Tax Payer Ref. ID No.2								
Identification Type [TIN or Other, Please specify]								
Country of Tax Residency 3	3							
Tax Payer Ref. ID No. 3								
Identification Type [TIN or Other, Please specify]								
^ In case Tax Identification Number this to the form. (Please attach ac								ued, please provide an explanation and attach levant details)
6. INVESTMENT AND F								
One time Investment S	-			submit SI	P Enro	Iment & OTM Forn	n) MITRA SIP (PI	lease submit MITRA SIP Enrolment form & OTM form)
Scheme Name	SBI		UND					
Plan (Please 🗸)	Re	gular	Direct			In case of IDCW T	ransfer facility, please i	mention target scheme along with plan/option.
Option (Please ✓)		owth		Frequenc	C.V.			
Income Distribution cum						Scheme / Plan / 0	Option	
Capital Withdrawal (IDCW) Facility (Please ✓)		investment	Payout	Tran	sfer			
Please refer to Note 28 for details Payment Mode	s of IDCW	•	Fund Trans	sfer		RTGS		
Cheque No. & Date			que Amount (Rs.)				Drawn on Bank	k and Branch
7. TAX STATUS (Please ✓) Resident Individual			naion and Datirama	at Fund		Governme	ant Body	
Resident Minor (through Gua	rdian)		ension and Retiremen nancial Institutions	ni Funa		Society*	Jin Dody	NGO
NRI (Repatriable)	,		Iblic Limited Compan	ıy		Trust*		
NRI (Non-Repatriable)		Pri	ivate Limited Compa	any		NPS Trust		PIO +
NRI– Minor (Repatriable)		Bo	ody Corporate			Fund of Fu	Ind	NPO*[Please specify]
NRI – Minor (Non-Repatriable	e)	Pa	artnership Firm			Gratuity F	und	
Sole-Proprietor			I / FPI			AOP BOI		Others [Please specify]
┝━━━━━━		Ba						_ <u></u>
*Non-Profit Organization [NPO]	•	,,					No. of Darpan porta	alause (15) of section 2 of the Income-tax Act,
1961 (43 of 1961), and is registe	red as a tr	ust or a societv	under the Societies	Registrati	on Act	. 1860 (21 of 1860) or any similar State	e legislation or a Company registered under
the section 8 of the Companies	Act, 2013 (v and confi	(18 of 2013). rm with the abov	ve information to ave	oid non pro	ocessir	o of applications.	Failure to get above	confirmation or registration with the portal as
mandated, wherever applicable w	ill force MF	AMC to regist as required und	er your entity name i der the respective st	in the abov	e porta	al and may report to ents and authorize	the relevant authority ou to deduct such f	confirmation or registration with the portal as tites as applicable. We are aware that we may fines/charges under intimation to us or collect
			ble.		1		,	
8. DEMAT ACCOUNT DET			provide below	details a	and er	iclose	t Client Master	/ Demat Account Statement
								held with the Depository Participant.
National Securities	s Deposi	tory Limited	(NSDL)	-		Central Depos	sitory Services	(India) Limited (CDSL)
Depository Participant Name				Depos – Partici	sitory ipant N	ame		
DP ID No.	N				•			
Beneficiary Account No.				Beneti	ciary A	ccount No.		
Please note wherever units are	e allotted	in Demat Mod				ssued by the Dep	oository concerned	, I.
						Dealetter "		- <u> </u>
Any communication in con	nection wi	th this applica	tion should be ad	dressed 1	to the	Registrar or the		jer
Investment Manager : SBI Funds Management L	td			. 4000		4000 000000	Registrar:	e Management Services Ltd.,
(A Joint Venture between	SBI & AM	IUNDI)	TOLL FREE NO ALTERNA					ation No. : INR000002813)
9th Floor, Crescenzo, C-38 G Block, Bandra Kurla Com			+91-22-625	511600 / +9	91-80-2	25512131	Rayala Towe	rs, 158, Anna Salai,Chennai – 600 002
Bandra (East), Mumbai – 4			Webs	ite : www.	sbimf.	com	Email: enq_s	bimf@camsonline.com

Bandra (East), Mumbai – 400 051
Tel: 022- 61793537
Email: customer.delight@sbimf.com

Website: www.camsonline.com

9. OTHER PERS	ONAL INFORMATIC									
		Fi	rst Applic	ant		econd Appli of investments		(NA in case	Third Appl	icant ts from minors)
Gender		Male	Female	Other	Male		Other		Female	
Father's Name										
Spouse's Name										
Occupation (Please ✓)		Profession		Business	Profession		Business	Professio		Business
		Governme	nt Service ctor Service	Agriculturist	Governme	nt Service	Agriculturist Retired		ent Service Sector Service	Agriculturist
			tor Service	Housewife	=	tor Service	Housewife	_	ector Service	Housewife
		Student		Forex Dealer	Student	Ľ	Forex Dealer	Student		Forex Dealer
		Doctor			Doctor			Doctor		
0		Others		1-5 Lacs	Others	20 Г	1-5 Lacs	Others _	1.20	1-5 Lacs
Gross Annual Ir (Please ✓):	ncome in Rs.	5-10 Lacs		10-25 Lacs	5-10 Lacs		10-25 Lacs	5-10 La		10-25 Lacs
		25 Lacs -	1 Cr.	□ > 1 Cr.	25 Lacs -	1 Cr.	> 1 Cr.	25 Lacs	- 1 Cr.	> 1 Cr.
OR Networth in	Rs.									
Networth as of	date			vlvlvl						
									IVI IVI Y	ΥΥΥΥ
	sed Person [PEP]		No	Related to PEP	Yes		Related to PEP	Yes		Related to PEP
Type of address	-	Residential	Business	— •	Residential	Business	Reg. Office	Residentia		
Nomination is n	N: I/We wish to n nandatory. Howeve	er, in case y	<u>ou do not</u>	t wish to nom	nate please	sign in poir	nt 11)	or death. (Nominee	
NA in case of investr Name of the Nomine			Nominee 1			Nominee 2			Nommee	b
PAN of the Nominee										
Name of the Guardi (In case Nominee is Mir										
Allocation % (Manda (Should not be in decima	atory if more than one Nominee II))								
Relationship with N	lominee									
Date of Birth* (Mand	datory if Nominee is Minor)	DDI	M M Y	Y Y Y	DDN	И М Ү Г	Y Y Y	DD	M M Y	YYY
Signature of Nomin										
(*Mandatory in case of N	Minor Nominee)				0					
		Signa	ture of Nomine	e/Guardian	Signati	ure of Nominee/G			ature of Nominee	
11. NO NOMINEE	DECLARATION : 1/		firm that I / W	/e do not wish to a	ppoint any nomi	nee(s) for mv/ c	our mutual fund	units held in r	nv / our folio ar	nd understand the
issues involved in nor	DECLARATION : I/ n-appointment of nomined ther such competent auth	We hereby con e(s) and further	are aware tha	t in case of death o	f all the account	holder(s), my / c	our mutual fund our legal heirs wo	units held in r ould need to s	ny / our folio ar ubmit all the rec	nd understand the quisite documents
issues involved in nor	DECLARATION : I / n-appointment of nomined ther such competent auth	We hereby con e(s) and further	are aware tha	t in case of death o	f all the account	holder(s), my / c	our mutual fund (our legal heirs wo	units held in r ould need to s	ny / our folio ar ubmit all the rec	nd understand the quisite documents
issues involved in nor issued by Court or ot Signature(s)	n-appointment of nomine	We hereby con e(s) and further	are aware tha	t in case of death o	f all the account	holder(s), my / c	bur mutual fund bur legal heirs wo	units held in r ould need to s	ny / our folio ar ubmit all the rec	nd understand the quisite documents
issues involved in nor issued by Court or ot	n-appointment of nomine	We hereby con e(s) and further nority, based or	are aware than the value of	t in case of death c assets held in the	f all the account	holder(s), my / d io.	our mutual fund our legal heirs wo	ould need to s	ubmit all the rec	quisite documents
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign)	n-appointment of nomined ther such competent auth	We hereby con e(s) and further nority, based or Authorised Sign	are aware than the value of a the va	t in case of death of assets held in the assets held in the 2 nd Applic	f all the account mutual fund fol	holder(s), my / d io.	our mutual fund our legal heirs wo	ould need to s	ny / our folio ar ubmit all the red / Authorised Sig	quisite documents
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign)	n-appointment of nomine ther such competent auth 1st Applicant / Guardian / J	We hereby con e(s) and further nority, based or Authorised Sign	are aware than the value of a the va	t in case of death of assets held in the assets held in the 2 nd Applic	f all the account mutual fund fol	holder(s), my / d io.	our mutual fund our legal heirs wo	ould need to s	ubmit all the rec	quisite documents
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign) 12.INSTITUTION Name of Contact Is the entity involved	1 st Applicant / Guardian / J IAL INVESTORS AI Ct Person	We hereby con e(s) and further pority, based of Authorised Sign DDITIONAL	are aware that the value of atory	t in case of death c assets held in the 2 nd Applic TION	f all the account mutual fund fol ant / Authorised	holder(s), my / c io. Signatory	our mutual fund our legal heirs wo	3 rd Applicant	ubmit all the red	quisite documents
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign) 12.INSTITUTION Name of Contact Is the entity involved For Foreign Exchange	n-appointment of nomine ther such competent auth 1**Applicant / Guardian / / IAL INVESTORS AI ct Person d / providing any of the ge / Money Changer Ser	We hereby con e(s) and further nority, based or Authorised Sign DDITIONAL following servivices	are aware tha the value of atory INFORMA ces Yes Yes	2 nd Applic 2 nd Applic TION No G No M	f all the account mutual fund fol ant / Authorised aming / Gambl loney Lending /	holder(s), my / d io. Signatory ing / Lottery Se Pawning	our legal heirs wo	3 rd Applicant	ubmit all the red	natory
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign) 12.INSTITUTION Name of Contact Is the entity involved For Foreign Exchange NOTE: Non-Individue 13. GO-GREEN	appointment of nomine ther such competent authors 1**Applicant / Guardian / / IAL INVESTORS AI ct Person d / providing any of the ge / Money Changer Ser ial investors should mar INITIATIVE:	We hereby con e(s) and further nority, based of Authorised Sign DDITIONAL following servivices ndatorily fill se	are aware tha the value of atory INFORMA ces Yes Yes parate FATC	2 nd Applic 2 nd Applic TION No G No M A/CRS & UBO Fo	f all the account mutual fund fol aming / Authorised aming / Gambl loney Lending / rm (Annexure-I)	holder(s), my / d io. Signatory ing / Lottery Se Pawning alongwith this	our legal heirs wo	3 rd Applicant a sinos, Betting	/ Authorised Sig	natory
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign) 12.INSTITUTION Name of Contact Is the entity involved For Foreign Exchang NOTE: Non-Individu 13. GO-GREEN As part of Go-Green	n-appointment of nominer ther such competent auth 1 st Applicant / Guardian / J IAL INVESTORS AI Ct Person d / providing any of the ge / Money Changer Ser tal investors should mar INITIATIVE: ninitiative, issuance of p to receive it in physical	We hereby con e(s) and further nority, based or Authorised Sign DDITIONAL following servivices Indatorily fill se hysical copy of form. Please t	are aware tha the value of atory INFORMA Ces Yes Yes parate FATC f scheme-wis ick here only	2nd Applie 2nd Applie TION No G No M A/CRS & UBO Fo se annual reports r if you wish to rep	f all the account mutual fund fol aant / Authorised aaming / Gambl loney Lending / rm (Annexure-I) or abridged sui ceive the same	holder(s), my / d io. Signatory ing / Lottery Se Pawning alongwith this mmary is limite in physical mo	ervices (e.g. Ca	3 rd Applicant sinos, Betting	dubmit all the red Authorised Sig Syndicates)	natory Yes No Yes No available and
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign) 12.INSTITUTION Name of Contact Is the entity involved For Foreign Exchang NOTE: Non-Individu 13. GO-GREEN As part of Go-Green who specifically opt 14. DECLARATIO that (i) twe have not rece		We hereby con e(s) and further pority, based of Authorised Sign DDITIONAL following servivices ndatorily fill se hysical copy of form. Please t he information provoate or offs, direct	are aware tha the value of atory INFORMA Cess Yes Yes parate FATC f scheme-wis ided in this form y or indirectly, in	2 nd Applie 2 nd Applie TION No G No M A/CRS & UBO Fo Se annual reports r if you wish to re- is true & accurate. IM making this investment	f all the account mutual fund fol aming / Authorised aming / Gambl loney Lending / rm (Annexure-I) or abridged sui ceive the same le have read and un (ii) the amount inve	holder(s), my / d io. Signatory Signatory ing / Lottery Se Pawning alongwith this mmary is limite in physical mo derstood the content sted/to be invested	ervices (e.g. Ca s form.	3rd Applicant / sinos, Betting stors whose of e related docume eme(s) of SBI M	/ Authorised Sig / Authorised Sig g Syndicates) email id is not nts and I/We herek utual Fund ('the Fur	Inatory
issues involved in not issued by Court or of Signature(s) (ALL Applicants must sign) 12.INSTITUTION Name of Contact Is the entity involved For Foreign Exchang NOTE: Non-Individu 13. GO-GREEN As part of Go-Green who specifically opt 14. DECLARATIO that ii) i/We have not rece legitimate sources and is r authority from time to time	1** Applicant / Guardian / J 1** Applicant / Guardian / J AL INVESTORS AI Ct Person d / providing any of the ge / Money Changer Ser Ial investors should mar INITIATIVE: ninitative, issuance of p to receive it in physical DN	We hereby con e(s) and further pority, based or Authorised Sign DDITIONAL following servivices ndatorily fill se hysical copy of form. Please t he information pro- bate or gifts, direct pose of contraventii pose of contraventii	are aware tha the value of atory INFORMA Cess Yes Yes parate FATC f scheme-wis ick here only ided in this form y or indirectly, in or of any act, rull	2nd Applie 2nd Applie TION No G No M A/CRS & UBO Fo Se annual reports if you wish to re- is true & accurate. I/M making this investment es, regulations or any s not attract the provision	f all the account mutual fund fol ant / Authorised aming / Gambl loney Lending / rm (Annexure-I) or abridged sur seive the same le have read and un ; (ii) the amount inve alute or legislations	holder(s), my / d io. Signatory Signatory ing / Lottery Se Pawning alongwith this mmary is limite in physical mo derstood the conte issted/to be invested or any other applied is other applied	ervices (e.g. Ca s form. d to those inver de [] hts of all the scheme ble laws or any notifi Act ("FCRA"); (iv) I/	3 rd Applicant <i>i</i> sinos, Betting stors whose <i>d</i> e related docume eme(s) of SBI Mn. We am/are aware	Authorised Sig Authorised Sig Syndicates) comail id is not trual I/We heret trual Fund ("the Fund issued by any gerso that a U.S. perso	natory Yes No Yes No Ves No available and oy confirm and declare nd") is derived through remmental or statutory in (within the definition
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INSTRUCTIONS TO FILL ONE TIME DEBIT MANDATE (OTM)

- Investors who have already submitted One Time Debit Mandate (OTM) form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account in the Folio. However, if such investors wish to add a new bank account towards OTM facility may submit the new OTM form.
- Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned (as per bank records).
- Along with OTM, investors should enclose an original CANCELLED cheque (or a copy) with name and account number pre-printed of the bank account to be registered failing which registration may not be accepted.
- 4. First applicant / unitholder must be one of the account holder in the bank account. Investor's cheque / bank account details are subject to third party validation.
- Investors are deemed to have read and understood the terms and conditions of Systematic Investment Plan mentioned in SID, SAI & KIM of the respective Scheme(s) of SBI Mutual Fund.
- 6. UMRN, Sponsor Bank Code and Utility Code are meant for Office use only and need not be filled by investors.
- Please mention OTM date and OTM "From date" in DDMMYYYY format.
 For the convenience of the investors the frequency of the mandate mentioned as "As and When Presented".
- From date & to date is mandatory. However, the maximum duration for enrollment is 40 years.

10. Please provide all the information / details in the OTM.

<u>Mandatory information to be provided in One</u> <u>Time Debit Mandate (OTM)</u>:

- 1. Date of Mandate
- 2. Bank A/c Type
- 3. Bank A/c No. (please enclose CANCELLED cheque leaf)
- 4. Bank Name
- 5. IFSC and/or MICR Code
- 6. Maximum Amount (Rupees and Words)
- 7. Mandate From date
- 8. Mandate To date
- 9. Signature/s of account holders in bank records
- 10. Name/s of account holders as in bank records

Instructions for Top-Up SIP

- Investors can either opt for fixed amount SIP Top-up or percentage SIP Top-Up option. In case investors selects both the options, percentage SIP Top-Up would be made applicable. In case the investor selects multiple % SIP Top-up options under percentage-based SIP Top-Up option, the lower percentage would be considered.
- 2. The minimum SIP Top-up amount under fixed amount SIP Top-up is Rs. 500 and in multiples of Rs. 500. The minimum Top-up percentage would be 5% of the SIP amount and in multiples of 5% thereof.
- If the Top-up % is not in multiples of 5, it will be rounded down to nearest multiple of 5. The Top-up amount would be rounded off to the nearest Rs. 10.
- 4. Percentage SIP Top-up would be computed on the immediately preceding SIP instalment value as on the SIP Top-Up trigger date.
- The Top-up details cannot be modified once enrolled. In order to make any changes, the investor must cancel the existing SIP and enrol for a fresh SIP with Top-up option.
- 6. In case of Monthly SIP, Half-yearly as well as Yearly frequency are available for Top-up. If the investor does not specify the frequency, the default frequency for Top-up will be considered as Half-yearly.
- 7. In case of Quarterly SIP, only the Yearly frequency is available for Top-up.
- Top up facility will not be applicable for SIP frequencies other than Monthly & Quarterly. SIP Top-up facility will be allowed in all schemes in which SIP facility is being offered.
- 9. All other terms & conditions applicable for regular SIP will also be applicable to Top-up SIP.
- The AMC/Trustee reserves the right to terminate or modify the conditions of the Facility at its discretion.

Instructions for Top-up SIP Cap

Under this option, post selecting SIP Top-up option, the investor can define the maximum SIP Top-up Cap, beyond which the SIP instalment will not increase in future. The investor shall have the flexibility to choose either Top-up SIP Cap amount or Top-up SIP Cap Month-Year. In case of multiple selection, Top-up SIP Cap amount will be considered as default selection.

Terms and conditions of Top-up SIP Cap facility are as follows:

- Top-up SIP Cap Amount: Investor has an option to fix the Top-up SIP amount i.e. maximum SIP instalment including Top-up amount. The pre-defined amount should be equal to or lesser than the maximum amount mentioned by the investor in One Time Mandate Form (OTM). The instalment amount after Top-up shall not exceed the amount mentioned in OTM at any given time.
- 2. In case of difference between the Top-up SIP Cap amount & OTM Debit Mandate, then amount which is lower of the two shall be considered as the Top-up SIP Cap amount.
- 3. If SIP amount (including SIP Top-up amount) reaches the Top-up Cap before the end of SIP tenure, the SIP Top up will cease and SIP instalment amount will remain constant for remaining SIP Tenure.
- Top-up SIP Cap Month-Year: It is the month from which SIP Top-up amount will cease and last SIP instalment including Top-up amount will remain constant till the end of SIP tenure.

- If none of the above options is selected by the investor, the SIP Top-up will continue as per the SIP end date subject to the maximum amount mentioned in OTM form.
- 6. The AMC/Trustee reserves the right to terminate or modify the conditions of the Facility at its discretion.

Illustration for Top us SIP

Fixed amount Top-up SIP:

SIP Tenure	01-Mar- 2017 to 1-Mar-2022
SIP Amount (Rs)	5000
SIP Frequency	Monthly
Top-up Amount	1000
Top-up Frequency	Yearly

SIP From Date	SIP To Date	SIP Amount (Rs)	SIP Top-up Amount (Rs)	SIP Amount post Top-up (Rs)
01-Mar-17	01-Feb-18	5000	N.A.	5000
01-Mar-18	01-Feb-19	5000	1000	6000
01-Mar-19	01-Feb-20	6000	1000	7000
01-Mar-20	01-Feb-21	7000	1000	8000
01-Mar-21	01-Feb-22	8000	1000	9000

In the above scenario, if the investor specifies an SIP Top-up cap amount of Rs. 7000. The calculation would be as shown below:

SIP From Date:	SIP To Date	SIP Amount (Rs)	SIP Top-up Amount (Rs)*	SIP Amount post Top-up (Rs)
01-Mar-17	01-Feb-18	5000	N.A.	5000
01-Mar-18	01-Feb-19	5000	1000	6000
01-Mar-19	01-Feb-20	6000	1000	7000
01-Mar-20	01-Feb-21	7000	N.A	7000
01-Mar-21	01-Feb-22	7000	N.A	7000

In the above scenario, if the investor specifies SIP Top-up Cap month and Year as Dec 2019. The calculation would be as show below:

SIP From Date	SIP To Date	SIP Amount (Rs)	SIP Top Amount (Rs)*	SIP Amount post Top-up (Rs)
01-Mar-17	01-Feb-18	5000	N.A.	5000
01-Mar-18	01-Feb-19	5000	1000	6000
01-Mar-19	01-Feb-20	6000	1000	7000
01-Mar-20	01-Feb-21	7000	N.A.	7000
01-Mar-21	01-Feb-22	7000	N.A.	7000

Percentage Top-up SIP:

SIP Tenure	01-Mar- 2017 to 1-Mar-2022
SIP Amount (Rs)	5000
SIP Frequency	Monthly
Top-up Percentage	10%
Top-up Frequency	Yearly

SIP From Date	SIP To Date	SIP Amount (Rs)	SIP Top-up Amount (Rs)*	SIP Amount post Top-up (Rs)
01-Mar-17	01-Feb-18	5000	N.A.	5000
01-Mar-18	01-Feb-19	5000	500	5500
01-Mar-19	01-Feb-20	5500	550	6050
01-Mar-20	01-Feb-21	6050	610	6660
01-Mar-21	01-Feb-22	6660	670	7330

* SIP Top-up amount is rounded off to nearest Rs. 10

In the above scenario, if the investor specifies an SIP Top-up cap amount of Rs. 6500. The calculation would be as shown below:

SIP From Date:	SIP To Date	SIP Amount (Rs)	SIP Top-up Amount (Rs)*	SIP Amount post Top-up (Rs)
01-Mar-17	01-Feb-18	5000	N.A.	5000
01-Mar-18	01-Feb-19	5000	500	5500
01-Mar-19	01-Feb-20	5500	550	6050
01-Mar-20	01-Feb-21	6050	610	6500
01-Mar-21	01-Feb-22	6500	N.A	6500

* SIP Top-up amount is rounded off to nearest Rs. 10

In the above scenario, if the investor specifies SIP Top-up Cap month and Year as Dec 2019. The calculation would be as show below:

SIP From Date	SIP To Date	SIP Amount (Rs)	SIP Top Amount (Rs)*	SIP Amount post Top-up (Rs)
01-Mar-17	01-Feb-18	5000	N.A.	5000
01-Mar-18	01-Feb-19	5000	500	5500
01-Mar-19	01-Feb-20	5500	550	6050
01-Mar-20	01-Feb-21	6050	N.A	6050
01-Mar-21	01-Feb-22	6050	N.A	6050

* SIP Top-up amount is rounded off to nearest Rs. 10

SBIMUTUAL FUND	This product is suitable Long term Capital appre	and equity related ins t model	struments	Reprincipal at principal at an open followin	ANT FUND n-ended equity scheme ig quant-based investing	
M	ITRA SIP ENRO	LMENT CUM C	DNE TIME DE	BIT MA	NDATE FORM Common Application	Form)
ARN & Name of Distributor	Branch Code (only for SBG)	Sub-Broker ARN C	Code Sub-Brol	ker Code	EUIN* (Employee Unique Identification N	Reference No.
Declaration for "execution-only" transaction (only where the investment of the above distributor of the above distributor (SIGNATURE(S)) Upfront commission shall be paid directly by the investor of the inv	or notwithstanding the advice of in-app dian / Authorised Signate	propriateness, if any, provided by the 2nd Applicar 2nd Applicar sed on the investors' assessment o	e employee/relationship mana ht / Authorised Sign f various factors including the	ger/sales person of t	he distributor and the distributor has not cha 3 rd Applicant / Autl	arged any advisory fees on this transaction.
Folio No./Application No.		INVESTO	DR DETAILS			
Name of 1 st Applicant	<u> </u>					
SIP Cheque No/s						
Scheme Name SBI(List of eligi	ble schemes are given in t	erms and conditions, ref	er point no. 3)	Plan	l:	Option: Growth (Default)
SIP Amount (Rs.)		,	, , , , , , , , , , , , , , , , , , ,		SIP Frequency : Monthly (De	efault)
SIP Start Date	M M Y	Y Y Y				
SIP Tenure 8 Year	s 🔲 10 Years	12 Years	15 Years	20 Ye	ears 🗌 25 Years	30 Years
Switch-In/SWP Scheme Name (Post completion of SIP Tenure) SBI (List of eligit	ole schemes are given in te	erms and conditions, refe	er point no. 3 or men	Plan tion the same		Option: Growth (Default)
SWP Date: Same as SIP Date		S	WP Frequency : Mo	onthly (Default)	
SWP Amount (tick any one of the op A. As per below matrix basis SIP						
SIP Tenure 8 Years	10 Years	12 Years	15 Years	20 ye		30 Years
SWP 1 x SIP Instalment Amount Amount	1.5 x SIP Instalment Amount	2 x SIP Instalment Amount	3 x SIP Instalment Amount	5 x SIP In Amo		ent 12 x SIP Instalment Amount
OR B. Any other Amount (Rs.)		(Th	is amount should be	loss than or o	gual to SWP amount mention	and as par the matrix above)
Use Existing One Time Debit N	landate (if already regi				quar to SWP amount mention	led as per the matrix above)
Bank Name			A/c No UP SIP			
Top-Up Percentage (in multiples of 5% only) 5	% 🗌 10'		Other			
OR Top-Up Amount Rs.		(OR			
(in multiples of Rs. 500 only) Amou Top-Up Frequency	Half - Yearly		Annual			
Top-Up SIP CAPAmount ₹ (maximum SIP installment including Top-Up amount)	TOP-U	JP SIP CAP (Investo	or has to choose on	ly one option)	
UR	M M Y Y Y	Ý				
DECLARATION : I/We hereby declare that the particulars given in this mandate form are correct and express my/our willingness to make payments towards investment in the schemes of SBI Mutua Fund. I/We hereby confirm and declare that the monies invested by me in the schemes of SBI Mutual Fund do not attract the provisions of Foreign Contribution Regulations Act ("FCRA"). I/We are aware that SBI Mutual Fund and its service providers and bank are authorized to process transactions by debiting my/our bank account through Direct Debit / NACH facility. If the transaction is delayed or not effected for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform SBI Mutual Fund/RTA about any changes in my/our bar account. I/We confirm that the aggregate of the lump sum investment (fresh purchase & additional purchase) and SIP installments in rolling 12 months period or financial year i.e. April to March doe not exceed Rs. 50,000/- (Rupees Fifty Thousand) (applicable for "Micro investments" only). The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any othe mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We have read, understood and agreed t the terms and conditions and contents of the SID, SAI, KIM and Addendum issued from time to time of the respective Scheme(s) of SBI Mutual Fund. I/We hereby authorize the bank to honour suc payments for which I/We have signed and endorsed the Mandate Form.						
SBIMUTUAL FUND		TIME DEBIT MA	ANDATE FOF) Date D D м	M Y Y Y Y
Sponsor Bank Code CREATE / MODIFY I/We, hereby aut	horize SBI Mutua	l Fund		ty Code	SB / CA / CC / SB-	NRE / SB-NRO / Other
CANCEL Bank A/c No.						
with Bank Bar	nk Name	IFSC				
an amount of Rupees				₹		7
FREQUENCY: Weekly A	tonthly 🛛 Quarterly	As & when pre		T TYPE: [] ie No.:	Fixed Amount	Maximum Amount
Appln No. :			Emai			
•••	nandate processing charge	es by the bank whom I ar			as per latest schedule of char	ges of the bank.
From Signature of 1st Bank Account Holder Signature of 2nd Bank Account Holder Signature of 3rd Bank Account Holder To Signature of 1st Bank Account Holder Signature of 2nd Bank Account Holder Signature of 3rd Bank Account Holder						
This is to confirm that the declaration has been I/We have understood that I/We are authorized to	carefully read, understood & ma		zing the User entity/Corp		account, based on the instruction a	

TERMS AND CONDITIONS FOR MITRA SIP AND OTM

What is MITRA SIP?

MITRA SIP is a facility that allows investor to make initial investment through SIP and after completion of specific tenure, Switch the units to another scheme or continue to remain in the same scheme as per the option selected by the investor and Systematic Withdrawal (SWP) from the target scheme post switch.

TERMS AND CONDITIONS FOR MITRA SIP

- 1. MITRA SIP facility is available under select schemes of SBI Mutual Fund (mentioned below) for a fixed SIP tenure of either 8 years, 10 years, 12 years, 15 years, 20 years, 25 years or 30 years.
- 2. This facility is allowed under 'Monthly' frequency for Growth option of the eligible SIP / SWP schemes.
- 3. Schemes eligible for SIP, Switch-in and SWP: The target scheme can either be the source scheme (i.e. SIP scheme) or any one of the pre-defined schemes mentioned below.

Name of Schemes (for SIP)	Name of Schemes (for Switch
	and SWP)
SBI Magnum Equity ESG Fund	SBI Conservative Hybrid Fund
SBI Large & Midcap Fund	SBI Multi Asset Allocation Fund
SBI Magnum Global Fund	SBI BlueChip Fund
SBI Equity Hybrid Fund	SBI Arbitrage Opportunities Fund
SBI Consumption Opportunities Fund	
SBI Technology Opportunities Fund	SBI Banking & PSU Fund
SBI Healthcare Opportunities Fund	SBI Equity Savings Fund
SBI Contra Fund	SBI Balanced Advantage Fund
SBI Nifty Index Fund	SBI Equity Hybrid Fund
SBI Focused Equity Fund	
SBI Conservative Hybrid Fund	
SBI Magnum MidCap Fund	
SBI Magnum COMMA Fund	
SBI Flexicap Fund	
SBI Multi Asset Allocation Fund	
SBI BlueChip Fund	
SBI Infrastructure Fund	
SBI PSU Fund	
SBI Small Cap Fund	
SBI Banking & Financial Services	
Fund	
SBI Equity Minimum Variance Fund	
SBI International Access-	
US Equity FoF	
SBI Nifty Next 50 Index Fund	
SBI Balanced Advantage Fund	
SBI Multicap Fund	
SBI Nifty Midcap 150 Index Fund	
SBI Nifty Smallcap 250 Index Fund	
SBI Dividend Yield Fund	
SBI S&P BSE Sensex Index Fund	
SBI Nifty50 Equal Weight Index Fund	
SBI Energy Opportunities Fund	
SBI Automotive Opportunities Fund	
SBI Innovative Opportunities Fund	
SBI Nifty 500 Index Fund	
SBI Nifty India Consumption Index	
Fund	
SBI Quant Fund	
	·

- Minimum installment amount under this facility for SIP / SWP would be the same as prescribed under Monthly frequencies in the respective schemes. All other terms and conditions pertaining to SIP and SWP shall be applicable for MITBA SIP / SWP.
- 5. On completion of the SIP period, the entire accumulated clear unit balance shall be switched on T+15 calendar days to a pre-defined target scheme (T is the last SIP transaction date of the facility) or continue to remain in the same scheme as per option selected by the investor. In case the source and target scheme is different, then switch out from the source scheme would be subject to applicable exit load and taxes if any.
- 6. SWP shall commence from the target scheme from the next month onwards on the same SIP instalment date. The SWP transaction shall be subject to applicable exit load and taxes if any.
- 7. Investor can opt for SWP instalment amount as per the matrix below or specific amount to be mentioned, provided that the amount mentioned by the investor is less than or equal to amount mentioned as per the matrix and shall be subject to minimum SWP amount of the respective schemes.

SIP Tenure	Monthly SWP Instalment
8 years	1 x monthly SIP instalment
10 years	1.5 x monthly SIP instalment
12 years	2 x monthly SIP instalment
15 years	3 x monthly SIP instalment
20 years	5 x monthly SIP instalment
25 years	8 x monthly SIP instalment
30 Years	12 x monthly SIP instalment

For example, for a 10 years SIP with instalment amount of Rs 10,000, SWP amount must be less than or equal to Rs 15,000 (i.e 1.5 times of monthly SIP instalment). If SWP amount mentioned on application form is greater than the applicable slab, then it shall lead to rejection of the application. In case investor does not fill in any SWP amount, the default amount shall be as per the applicable slab given above.

- 8. In case no SIP tenure is selected, the default tenure shall be 12 years. In case no SIP date is selected, the default date shall be 10.
- In case, no scheme is mentioned in the target scheme section in Switch-In/ SWP, the SWP shall be triggered from existing source SIP scheme itself.
- 10. SWP Date will be same as the SIP date. The Start date of SWP will be the month following the last SIP instalment date and the SWP End Date will be perpetual i.e. the SWP under this facility shall be processed till units are available in the respective target scheme. In case, the SWP trigger date is a non-business day, the next business day shall be considered as trigger date.

- 11. This facility shall get discontinued in the following events:
 - i) On cancellation of SIP before the end of tenure, the switch trigger and SWP will cease.
 - In case, redemption / switch-out processed in Source Scheme during the SIP tenure, the Switch trigger and SWP will cease, however SIP shall continue under the source scheme as normal SIP.
 - iii) In case redemption / switch-out is processed in Source Scheme after the SIP tenure till the execution of switch trigger, the switch trigger and the SWP will cease.
- 12. SIP Top-Up and SIP Pause is allowed under this facility. However, SWP would get registered based on the initial SIP instalment amount / slab mentioned in the application form.
- 13. Under a single folio, an investor can have multiple registrations under this facility. However, if investor wishes to invest in multiple schemes, investor shall have to submit separate MITRA SIP registration forms.
- 14. This facility will not be available under DEMAT mode and for Minor investors. INSTRUCTIONS TO FILL ONE TIME DEBIT MANDATE (OTM)
- Investors who have already submitted One Time Debit Mandate (OTM) form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account in the Folio. However, if such investors wish to add a new bank account towards OTM facility may submit the new OTM form.
- Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned (as per bank records).
- 3. Along with OTM, investors should enclose an original CANCELLED cheque (or a copy) with name and account number pre-printed of the bank account to be registered failing which registration may not be accepted.
- 4. First applicant / unitholder must be one of the account holder in the bank account. Investor's cheque / bank account details are subject to third party validation.
- Investors are deemed to have read and understood the terms and conditions of Systematic Investment Plan mentioned in SID, SAI & KIM of the respective Scheme(s) of SBI Mutual Fund.
- 6. UMRN, Sponsor Bank Code and Utility Code are meant for Office use only and need not be filled by investors.
- 7. Please mention OTM date and OTM "From date" in DDMMYYYY format.
- 8. For the convenience of the investors the frequency of the mandate mentioned as "As and When Presented".
- 9. From date & To date is mandatory. However, the maximum duration for enrollment is 30 years.
- 10. Please provide all the information / details in the OTM. <u>MANDATORY INFORMATION TO BE PROVIDED IN</u> ONE TIME DEBIT MANDATE (OTM):

Date of Mandate

- Bank A/c Type
- Bank A/c No. (please enclose CANCELLED cheque leaf)
- Bank Name
- IFSC and/or MICR Code
- Maximum Amount (Rupees and Words)
- Mandate From date
- Mandate To date
- Signature/s of account holders in bank records
- Name/s of account holders as in bank records

INSTRUCTIONS FOR TOP-UP SIP CAP

- Investor can choose either Top-Up SIP Cap amount (i.e. maximum SIP installment including Top-Up amount) or Top-Up SIP Cap Month-Year. In case of multiple selection, Top-Up SIP Cap amount will be considered as default selection.
- If none of the above option is selected by the investor, then the Top-Up SIP will continue as per the SIP end date and Top-Up SIP amount specified by the investor and the maximum amount mentioned in OTM Form shall be considered as Top-Up SIP Cap Amount.
- 3. Top-Up SIP CAP (Amount): Investor has an option to freeze the Top-Up SIP CAP amount (i.e. maximum SIP installment including Top-Up amount) once SIP installment amount reaches a fixed predefined amount. Maximum Top-Up SIP cap amount should not exceed the maximum amount mentioned in OTM Debit Mandate Form. In case of difference between the Top-Up SIP CAP Amount & the OTM Debit Mandate maximum amount, then amount which is lower of the two shall be considered as the default amount of Top-Up SIP Cap Amount.
- If SIP Top-Up amount reaches the SIP Top-Up Cap amount before the end of SIP tenure, the Top-Up SIP will cease and last SIP instalment amount will remain constant for remaining installments.
- Top-Up SIP Cap (Month-year) : This is the date from which Top-Up SIP Cap amount will cease and last SIP instalment amount will remain constant for remaining installments.