




Distributor's ARN/RIA Code*	Sub-Broker's Name & Code	EUIN	FOLIO NO.	DATE
				DD/ MM/ YYYY

*By mentioning RIA Code, I/We authorise you to share with the Investment Advisor the details of my/our transactions in the scheme(s) of Kotak Mahindra Mutual Fund.

"I/ We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/ relationship manager/sales person of the above Distributor/Sub-broker or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/ sales person of the distributor/ sub-broker".

 Sole/First Holder	 Second Holder	 Third Holder
(To be signed by All Unitholders if mode of operation is 'Joint')		

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.

NAME OF SOLE/FIRST HOLDER: _____
 NAME OF SECOND HOLDER: _____
 NAME OF THIRD HOLDER: _____

PAN			
Aadhaar Number			

Note: Name shall be as per Pan/Aadhaar card only




Mobile No.	This mobile no. will not get updated in the folio
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Existing Sip Details

Scheme Option Growth Dividend Pay-out Re-investment
 Plan Dividend : Frequency
 Investment Frequency (Please ✓) Monthly Quarterly
 SIP Period From MM/ YYYY To MM/ YYYY
 SIP Amount (Please ✓) Rs. 20,000 10,000 5,000 1,000 Any other amount Rs.
 SIP Date (Please ✓) 1st 5th 7th 10th 14th 15th 20th 21st 25th 28th 30th

Modification Sip Details

Scheme Option Growth Dividend Pay-out Re-investment
 Plan Dividend : Frequency
 Investment Frequency (Please ✓) Monthly Quarterly
 SIP Period From MM/ YYYY To MM/ YYYY
 SIP Amount (Please ✓) Rs. 20,000 10,000 5,000 1,000 Any other amount Rs.
 SIP Date (Please ✓) 1st 5th 7th 10th 14th 15th 20th 21st 25th 28th 30th

 First or Sole Applicant/Unitholder	 Second Applicant/Unitholder	 Third Applicant/Unitholder
(To be signed by All Applicants/Holders if mode of holding is Joint)		

One Time Mandate Registration Form/ Debit Mandate Form NACH/ ECS/ Direct Debit

UMRN Date

Sponsor Bank Code For Office Use Utility Code For Office Use

CREATE MODIFY CANCEL

I/We hereby authorize Kotak Mutual Fund to debit (tick ✓) SB CA CC SB-NRE SB-NRO Other

Bank a/c number

with Bank IFSC or MICR

an amount of Rupees ₹

FREQUENCY Mthly Qyly H-Yrly Yrly As & when presented DEBIT TYPE Fixed Amount Maximum Amount

Reference 1 Folio Number Phone No.

Reference 2 Application Number Email ID

I Agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my accounts as per latest schedule of charges of the bank.

PERIOD

From

To 3 1 1 2 2 0 9 9

Or Until Cancelled

Signature Primary Account holder _____ Signature of Account holder _____ Signature of Account holder _____

1. Name as in Bank records 2. Name as in Bank records 3. Name as in Bank records

This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorising the user entity/corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorised the debit.

Term & Conditions

1. SIP Modification Request shall be construed as Cease of Existing SIP & Registration of a fresh SIP. Hence, the load structure prevailing at the time of registration of SIP Modify Request, will be applicable.
2. Modification Form has to be submitted at least 28 days prior to the next SIP installment date.
3. Modify SIP Request shall be liable for rejection if the modified details do not meet the amount / tenure conditions as per the Scheme Information Document of the respective scheme or the registered mandate.
4. If the investor submits request for Modify SIP details for a SIP registration where the SIP Booster facility is already registered, the SIP Booster facility shall be cancelled immediately upon receipt of Modify SIP details request.
5. In case your existing SIP has been registered through the OTM Mandate, then you need not fill the OTM section of this form again, unless you intend to increase the amount registered as per existing OTM. Else, you will have to mandatorily fill the OTM section of this form, to effect any change in your existing SIP.
6. In case your existing SIP has been registered through ICICI Bank, then this form cannot be used. For any such modification request, you need to submit a separate request letter to cease your existing SIP and a fresh SIP request to register a fresh SIP.
7. Modify SIP Request shall be liable for rejection if there is any discrepancy or if the form is not duly filled.