

# Flexible SIP (Flex SIP)

(Investor must read Key Scheme Features and Instructions before completing this form.)

AXIS MUTUAL FUND

The RESPONSIBLE Mutual Fund

Distributor ARN	Sub-Distributor ARN	Internal Sub-Broker / Sol ID	Employee Code	EUIN	RIA CODE <sup>^</sup>	Serial No., Date & Time Stamp
ARN-4464	ARN		EO32737			

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

<sup>^</sup>I/We, have invested in the scheme(s) of Axis Mutual Fund under Direct Plan. I/We hereby give my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan(s) of all the below mentioned scheme(s) of Axis Mutual Fund, to the above mentioned SEBI Registered Investment Adviser.

"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."

First / Sole Applicant / Guardian

Second Applicant

Third Applicant

Power of Attorney Holder

## TRANSACTION CHARGES FOR APPLICATIONS ROUTED THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction No. 20)

I confirm that I am a first time investor across Mutual Funds. **OR**  I confirm that I am an existing investor in Mutual Funds.

In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

## 1 APPLICANT'S PERSONAL DETAILS (MANDATORY)

Folio No. (For Existing Unit holders)

Sole / 1st Unitholder

First Name

Middle Name

Last Name

Guardian Name

PAN

1st Applicant

2nd Applicant

3rd Applicant

## 2 FLEX SIP DETAILS

OTM ref. no.

Min. installment Amount

Max. installment Amount

Preferred Debit Date (Any date except 29<sup>th</sup>, 30<sup>th</sup> and 31<sup>st</sup>)

Flex SIP period

From

M M Y Y Y Y

to\*

1 2 2 0 9 9

OR

Till you instruct to discontinue

SIP Frequency (Please tick any one)

Monthly

Yearly

Scheme Name

Plan

Option

Growth

Note : Please mention minimum & maximum Flex SIP amount on the space provided above.

## 3 DECLARATION AND SIGNATURE (To be signed by ALL UNIT HOLDERS if mode of holding is 'joint')

Date

D D M M Y Y Y Y

I/ We declare that the particulars furnished here are correct. I/ We authorise Axis Mutual Fund acting through its service providers to debit my / our bank account towards payment of Flex SIP instalments through an Electronic Debit arrangement / NACH (National Automated Clearing House). 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 Axis Mutual Fund about any changes in my bank account.

This is to inform you that I/We have registered for making payment towards my investments in AXISMF by debit to my /our account directly or through ECS (Debit Clearing) / NACH (National Automated Clearing House). I/We hereby authorize to honour such payments and have signed and endorsed the Mandate Form. Further, I authorize my representative (the bearer of this request) to get the above Mandate verified. Mandate verification charges, if any, may be charged to my/our account.

I also hereby agree to read the respective SID and SAI of the mutual fund before investing in any scheme of Axis Mutual Fund using this facility.

X	Sole / 1st Unit Holder / POA	X	2nd Unit Holder	X	3rd Unit Holder
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UMRN

Bank use

Date

D D M M Y Y Y Y

Tick (✓)

Sponsor Bank Code

Bank use

Utility Code

Bank use

CREATE

I/We hereby authorize

Axis Mutual Fund

to debit (tick ✓)

SB

CA

CC

SB-NRE

SB-NRO

Other

MODIFY

Bank a/c number

CANCEL

with Bank

Name of customers bank

IFSC

or MICR

an amount of Rupees

₹

FREQUENCY  Mthly  Qtly  H-Yrly  Yrly  As & when presented

DEBIT TYPE  Fixed Amount  Maximum Amount

Reference 1 Folio No.

Phone No.

Reference 2 All Schemes of Axis Mutual Fund

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

D D M M Y Y Y Y

To

D D M M Y Y Y Y

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 (as mentioned overleaf) has been carefully read, understood & made by me / us. I am authorizing the User Entity / Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / Corporate or the bank where I have authorized the debit.

## ACKNOWLEDGMENT SLIP (To be filled by the investor)

Folio No.

Investor Name

Minimum Amount

Maximum Amount

Scheme Name

(Scheme Name)

Plan

Option

Stamp & Signature

## FLEXIBLE SYSTEMATIC INVESTMENT PLAN (Flex-SIP)

- 1) The Flex SIP is available only in "Growth" option of the target scheme.
- 2) One Flex SIP Enrollment Form can be filled for investment in one Scheme/Plan only.
- 3) The minimum amount (1st installment amount) and maximum amount must mention in Flex SIP application form and Bank mandate form, where ever space provided.
- 4) In case of valid forms received, indicating choice of option other than the Growth Option in the Target Scheme, it will be deemed as the Growth Option in the Target Scheme and processed accordingly.
- 5) Flex SIP facility offers for monthly and Yearly Frequency.
- 6) Calculation of Flex SIP Installment.
  - Fixed amount as per installment; **OR**
  - The amount determined by the formula: (fixed amount to be transferred per installment X number of Installments including the current installment) - market value of the investments through Flex SIP.

**Whichever is higher.**

- 7) The installment value of Flex SIP determined on the basis of NAV on 10th day (T-10) before the installment date. If T-10th falls on a Non-Business day or falls during a book closure period, then valuation will be done on T-11th day.
- 8) The minimum number of installments and amount under Flex SIP

Frequency under Flex SIP Facility	Minimum Installments	Minimum Flex SIP mount
Monthly	12 Installments for all schemes <sup>f</sup>	₹ 1,000/- and in multiple of ₹1/- for all schemes (Except Axis Long Term Equity Fund)
	6 Installments for Axis Long Term Equity Fund	₹ 500/- and in multiples of ₹ 500/- for Axis Long Term Equity Fund
Yearly	3 Installments for all schemes <sup>f</sup>	₹ 12,000/- and in multiple of ₹ 1/- for all schemes and ₹ 6,000/- and in multiple of ₹ 500/- for Axis Long Term Equity Fund

<sup>f</sup>Excluding Axis Liquid Fund.

- 9) In case the Start Date is mentioned but End Date is not mentioned, the application will be liable for rejection.
- 10) A minimum gap of 25 days needs to be maintained between the first and second Flex SIP installments.
- 11) Investors can discontinue a Flex SIP at any time by sending a written request to any Official Point of Acceptance or to the registrar Karvy. Notice of such discontinuance should be received at least 20 days prior to the due date of the next installment / debit.
- 12) An Investor will not hold Axis Mutual Fund, its registrars and / or service providers responsible if a transaction is delayed or not effected, or the investor bank account is debited in advance or after the specific Flex SIP date because of the various clearing cycles of RBI's Electronic Clearing Facility (ECS). Axis Mutual Fund, its registrars and other service providers shall not be held responsible or liable for damages / compensation / loss incurred by the investor as a result of using the Flex SIP and / or ECS facility.
- 13) Mandatory fields for filling NACH mandate. In case any of these fields are not filled mandate will be rejected.

• Account Type
• Bank a/c number
• Bank Name
• IFSC code or MICR code (As per the Cheque / Pass book)
• Amount in Words (This should be Maximum upper limit amount as per the amount mentioned in figures)
• Amount in Figures (This should be Maximum upper limit amount)
• Period Start Date and End date or until cancelled
• Account Holder Signature
• Account Holder Name as per Bank Record

- 14) If Investor opts for "Till you Instruct" option then Flex SIP Period will be considered for perpetuity i.e. till December, 2099.



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