

AUTO DEBIT FORM - For SIP Investments (To be Filled in BLOCK LETTERS only)

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units)

Distributor / Broker ARN*	Employee Unique Identification No.(EUIIN)	Sub-Broker Code	M.O. Code
ARN - 6574	EUIIN- E019976		

Application No. :

For Office Use Only

*AMFI Registered Distributors empanelled with the AMC (Default : "DIRECT" if incorrectly mentioned/blank)
 "I/We hereby confirm that where the EUIIN space has been left blank by me/us, transaction is an "execution-only" transaction."
 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. Any correction of Broker Code requires investor's authentication.

1 ECS DEBIT BANK ACCOUNT DETAILS (MANDATORY) (Cheque should be drawn on bank, details provided below or please attach cancelled Cheque copy.)

I / We hereby authorise HSBC Asset Management (India) Pvt. Ltd., Investment Manager to HSBC Mutual Fund acting through their authorised service providers to debit my / our following bank account by ECS (Debit Clearing) / Direct Debit Facility or any other facility for collection of SIP payments.

Name of the Account Holder as in Bank Records	First Name	Middle Name	Last Name
Folio No.	Application No.		
Scheme Name			
Name of the Bank			
Branch Address	City		
Account Number	A/c. Type (✓)	<input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRO* <input type="checkbox"/> NRE*	* For NRI Investors
Monthly Debit Amount	MICR Code	◀ (9 digit number next to your Cheque No.)	
SIP Date (✓)	Monthly (Default^): <input type="checkbox"/> 3rd <input type="checkbox"/> 10th (Default^)^ <input type="checkbox"/> 17th <input type="checkbox"/> 26th <input type="checkbox"/> 30th ## <input type="checkbox"/> All Dates <input type="checkbox"/> Quarterly (10th)		
SIP Period	Start Date	End Date	<input type="checkbox"/> March 2025 ^^
	## Last Business Day of the month for February ^ Refer instruction 4b(f) ^^ Refer instruction 4b(g)		

There should be a minimum time gap of 25 Business Days for the first instalment of SIP through ECS (Debit Clearing) or Direct Debit. Minimum 12 instalments under Monthly SIP and 4 quarters for Quarterly SIP.

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

This is to inform I / we have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Direct Debit Facility and that my / our payment towards my / our investment in HSBC Mutual Fund shall be made from my / our below mentioned bank account number with your bank. I / We authorise HSBC Asset Management (India) Pvt. Ltd. (Investment Manager to HSBC Mutual Fund), acting through their service providers and representative carrying this ECS mandate / Direct Debit Facility Form to get it verified & executed. Mandate verification charges, if any, maybe charged to my / our account.

SIGNATURE(S) (As In Bank Records)

Account Number			
	Sole/First Account Holder	Second Account Holder	Third Account Holder

AUTO DEBIT FORM - For MICRO SIP Investments (refer instruction 4C on page 19)

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Monthly Debit Amount	MICR Code	◀ (9 digit number next to your Cheque No.)	
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