



SIP REGISTRATION CUM MANDATE FORM

Application No.

[For investment through ECS/NACH]

Investor must read Key Scheme Features and Instructions before completing this form. All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS.

BROKER CODE (ARN CODE) ARN-6574	SUB-BROKER ARN CODE	SUB-BROKER CODE (As allotted by ARN holder)	Employee Unique Ident. No. (EUIIN) E-019976
Declaration for "execution-only" transaction (only where EUIIN box is left blank) - I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.			
SIGNATURE OF SOLE / FIRST APPLICANT		SIGNATURE OF SECOND APPLICANT	SIGNATURE OF THIRD APPLICANT

TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY:
 In case the subscription (lumpsum) amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, Rs 150/- (for first time mutual fund investor) or Rs 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid the distributor. Units will be issued against the balance amount invested. Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

Please tick (✓) New Registration Cancellation Existing UMRN

The Trustee, ICICI Prudential Mutual Fund, I/We have read and understood the contents of the Scheme Information Document of the following Scheme and the terms and conditions of the SIP Enrolment.

Sole/First Applicant's Name
 Mr. Ms. M/s FIRST MIDDLE LAST Folio No.

Scheme Name: ICICI PRUDENTIAL PLAN: Regular Direct
 OPTION: SUB-OPTION: Dividend Frequency: AEP Frequency:
 Please refer instructions and Key Scheme Features for options, sub-options and other facilities available under each scheme of the Fund.

FIRST INSTALLMENT THROUGH CHEQUE/DD First Cheque/DD No. Dated
 Drawn on Bank Amount Rs.
 Bank Branch City

Each SIP Amount: Rs. Rupees in words:
 SIP Frequency: Monthly Quarterly
 (Default SIP frequency is Monthly)
 In case of Quarterly SIP, only Yearly frequency is available under SIP TOP UP.

SIP TOP UP (Optional) (Tick to avail this facility) TOP UP Amount: Rs. TOP UP Frequency: Half Yearly Yearly
 *TOP UP amount has to be in multiples of Rs.500 only. [Please refer to Terms & Conditions No. B(6)]

SIP TOP UP CAP: Amount*: Rs. OR Month-Year#: M M Y Y Y Y Y Y
 * TOP-UP CAP Amount: Please refer to T&C No. B[6-h(i)] # TOP-UP CAP Month-Year: Please refer to T&C No. B[6-h (i) & (ii)]

DEMAT ACCOUNT DETAILS [Optional - Please refer Instruction No. B(8)] NSDL OR CDSL
 Do you want units in demat form: Yes OR No (Please ✓) The application form should mandatorily accompany the latest Client investor master/ Demat account statement.

Depository Participant (DP) ID (NSDL only) Beneficiary Account Number (NSDL only) Depository Participant (DP) ID (CDSL only)

YOUR CONFIRMATION/DECLARATION: I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs.50,000 in a year as described in the Instruction No.IV(d) of the common application form. The ARN holder 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 is being recommended to me/us.

Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)
 Sole/First Holder 2nd Holder 3rd Holder

EASY PAY DEBIT MANDATE INSTRUCTION

UMRN FOR OFFICE USE ONLY Date
 Sponsor Bank Code FOR OFFICE USE ONLY Utility Code FOR OFFICE USE ONLY

Tick (✓) CREATE MODIFY CANCEL
 I/We hereby authorize ICICI PRUDENTIAL ASSET MANAGEMENT COMPANY LIMITED to debit (tick ✓) SB/CA/CC/SB-NRE/SB-NRO/Other

Bank a/c number

with Bank Name of customers bank IFSC or MICR

an amount of Rupees Maximum Amount (Rupees in words) ₹

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

Folio No. Mobile No.
 Reference APPLICATION NUMBER Email ID

PERIOD From To 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

Declaration: I/We hereby declare that the particulars given on this mandate are correct and complete and express my willingness and authorize to make payments referred above through participation in NACH/ECS. I/We hereby confirm adherence to the terms of EASY PAY facility offered by ICICI Prudential Asset Management Company Limited (the AMC) and as amended from time to time and of NACH/ECS (Debits). **Authorisation to Bank:** This is to inform that I/We have registered for ECS / NACH (Debit Clearing) facility and that my/our payment towards my/our investment in ICICI Prudential Mutual Fund shall be made from my/our above mentioned bank account with your Bank. I/We authorize the representatives of the AMC (carrying this mandate form to get it verified and executed. I/We authorize the bank to debit my account for any charges towards mandate verification, registration, transactions, returns, etc, as applicable. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. This is to confirm that the declaration/terms & conditions have been carefully read, understood and made by me/us.

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)
 SIP TOP UP Amt. Rs. TOP UP CAP: Amt. Rs. OR Month-Year: M M Y Y Y Y Y Y
 Scheme Name: Option:
 Folio No. / Application No. Acknowledgement Stamp