



# COMMON APPLICATION FORM

For first time investors for Lumpsum Investments / SIP Investments / Zero Balance folio registration.

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM. ALL SECTIONS TO BE COMPLETED IN ENGLISH IN BLACK/BLUE COLOURED INK AND IN BLOCK LETTERS)

Distributor ARN -16709	Sub-Distributor ARN	Internal Sub-Broker/ Sol ID
EUIN - E039709	Employee Code	RIA CODE ^

Application No.

## Serial No., Date & Time Stamp

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. ^ 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 of all schemes 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 in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."

You/ Sole Applicant /Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
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### TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS 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 across Mutual Funds.

In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.

<b>EXISTING INVESTOR'S FOLIO NUMBER</b> (If you have an existing folio with KYC validated, please mention here and skip to section 4)	<b>MODE OF HOLDING</b> (in case of Demat Purchase Mode of Holding should be same as in Demat Account)	<b>Unit Holding Option</b>
Folio number <input type="text"/>	<input type="checkbox"/> Single <input type="checkbox"/> Joint (Default) <input type="checkbox"/> Anyone or Survivor	<input type="checkbox"/> Demat Mode <input type="checkbox"/> Physical Mode (in case of Demat, please fill sec 6)

### 1. YOUR PERSONAL DETAILS (MANDATORY) (In case of investment "On behalf of minor", Please refer instruction No. 11)

<b>First Applicant</b>	Mr. Ms. M/s.	FIRST APPLICANT						Gender	<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> O
PAN (Mandatory)	<input type="text"/>	Aadhaar No. (Optional)	<input type="text"/>						
DOB	D D M M Y Y Y Y	CKYC No. (Optional)	<input type="text"/>	14 digit CKYC Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	<input type="text"/>								
City	<input type="text"/>	State	<input type="text"/>	Pincode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Mobile	<input type="text"/>	Email ID*	<input type="text"/>						
Occupation Details	<input type="checkbox"/> Pvt. Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Govt. Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Student <input type="checkbox"/> Others <input type="text"/> Specify								
Gross Annual Income (₹)	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore Net worth (Mandatory for Non - Individuals) ₹ <input type="text"/> as on D D M M Y Y Y Y								

\*Email id belongs to Self  / Family Member  (Refer Instruction No. 25)

I / we hereby prefer to 'OPT-IN' to receive physical copies of scheme Annual Report or Abridged summary.

### BANK ACCOUNT DETAILS FOR PAYOUT (Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details. Refer Instruction No. 6)

Name of the bank	<input type="text"/>							
Branch Address	<input type="text"/>							
City	<input type="text"/>	State	<input type="text"/>	Pincode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Account No.	<input type="text"/>							
Account type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Others <input type="text"/> Specify							
IFSC code (11 digit)	<input type="text"/>	MICR Code (9 digit)	<input type="text"/>					

**Second Applicant** Mr. Ms. M/s. SECOND APPLICANT Gender  M  F  O

PAN (Mandatory)           Aadhaar No. (Optional)

DOB         CKYC No. (Optional)

Address

City  State  Pincode

Occupation Details  Pvt. Sector Service  Public Sector Service  Govt. Service  Business  Professional  Agriculturist  
 Retired  Housewife  Forex Dealer  Student  Others  Specify

Gross Annual Income (₹)  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  25 Lacs - 1 Crore  > 1 Crore

**Third Applicant** Mr. Ms. M/s. THIRD APPLICANT Gender  M  F  O

PAN (Mandatory)           Aadhaar No. (Optional)

DOB         CKYC No. (Optional)

Address

City  State  Pincode

Occupation Details  Pvt. Sector Service  Public Sector Service  Govt. Service  Business  Professional  Agriculturist  
 Retired  Housewife  Forex Dealer  Student  Others  Specify

Gross Annual Income (₹)  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  25 Lacs - 1 Crore  > 1 Crore

**GUARDIAN DETAILS** (In case First / Sole Applicant is minor) / CONTACT PERSON - DESIGNATION / PoA HOLDER (In case of Non-individual Investors)

Mr. Ms. M/s. GUARDIAN Gender  M  F  O

PAN (Mandatory)           Aadhaar No. (Optional)

DOB         CKYC No. (Optional)

Address

City  State  Pincode

Occupation Details  Pvt. Sector Service  Public Sector  Govt. Service  Business  Professional  Agriculture  
 Retired  Housewife  Forex Dealer  Student  Others  Specify

Gross Annual Income (₹)  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  25 Lacs - 1 Crore  > 1 Crore

Relationship Of Guardian (Refer Instruction No. 11)  Mother  Father  Court Appointed Guardian

Email ID

Proof of the Relationship with Minor  Birth Certificate  School Certificate  Passport  Others  Specify

**TAX STATUS** (Applicable for First / Sole Applicant)  Resident Individual  FIs  NRI-NRO  HUF  Club / Society  PIO  Body Corporate  
 Minor  Government Body  Trust  NRI - NRE  Bank & FI  Sole Proprietor  Partnership Firm  QFI  Provident Fund  
 Others  Specify

For Individuals	For Non-Individual Investors (Companies, Trust, Partnership etc.)
<input type="checkbox"/> I am a Politically Exposed Person	Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (If No, please attach mandatory UBO Declaration) <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> I am related to a Politically Exposed Person	Foreign Exchange / Money Charger Services <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> I am not related to Politically Exposed Person	Gaming / Gambling / Lottery / Casino Services <input type="checkbox"/> Yes <input type="checkbox"/> No
	Money Lending / Pawning <input type="checkbox"/> Yes <input type="checkbox"/> No

## 2. FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor. Refer Instruction No. 23)

FOR RESIDENT  
INDIANS

The below information is required for all applicants/guardian.

	Place / City of Birth	Country of Birth	Country of Citizenship / Nationality
First Applicant / Guardian			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____
Second Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____
Third Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____

FOR NON-RESIDENT  
INDIANS

**Are you a tax resident (i.e., are you assessed for tax) in any other country outside India?**

If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries.

Yes  No

	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other please specify)	Address Type
First Applicant / Guardian				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business
Second Applicant				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business
Third Applicant				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business

### Overseas Address

		City		
State		Country		Zipcode

For Non Individual investors Annexure I and Annexure II are available on the website of AMC i.e. [www.axismf.com](http://www.axismf.com) or at the Investor Service Centres (ISCs) of Axis Mutual Fund



## 3. NOMINATION DETAILS (Mandatory) (Refer Instruction No. 18)

Sr. No.	Nominee Name	PAN	Allocation (%)	Relationship with Investor	Nominee date of birth	Guardian Name (in case of Minor)	Guardian Signature
1					D D M M Y Y		
2					D D M M Y Y		
3					D D M M Y Y		

I/We DO NOT wish to nominate and sign here

You/ Sole Applicant	Second Applicant	Third Applicant
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## 4. INVESTMENT DETAILS (For multiple schemes ref instruction no. 22) (Investors applying under Direct Plan must select "DIRECT" against scheme name, Refer Instruction No. 2.)

Sr. No.	Scheme	Plan	Option	Amount
1		<input type="checkbox"/> Direct <input type="checkbox"/> Regular		
2		<input type="checkbox"/> Direct <input type="checkbox"/> Regular		
3		<input type="checkbox"/> Direct <input type="checkbox"/> Regular		
<b>Total</b>		In words		In figures



## 8. QUICK CHECKLIST

- KYC acknowledgement letter (Compulsory for MICRO Investments)
- Self attested PAN card copy
- Plan / Option / Sub Option name mentioned in addition to scheme name
- Multiple Bank Accounts Registration form (if you want to register multiple bank accounts so that future payments can be made from any of the accounts)
- Email id and mobile number provided for online transaction facility
- SIP Registration Form for SIP investments
- Relationship proof between guardian and minor (if application is in the name of a minor)
- FATCA Declaration
- Additional documents attached for Third Party payments. Refer instruction No. 7.



**EasyInvest**  
<http://online.axismf.com>  
 Invest online without any prior registration



**Toll Free**  
 1800 221322/  
 1800 3000 3300  
**Additional Contact No.**  
 8108622211



**Easy SMS**  
 SMS HELP to 92120 10033  
 Transact and get folio details on the go



**Axis MF IFA CONNECT**  
 An app that goes beyond transactions  
 Download the app  or visit the web portal (<https://ifaconnect.axismf.com>)



**Risk Managed Products**

## 9. DEBIT MANDATE (Only for Axis Bank Account holders. Now you don't have to issue a cheque if you hold an Axis Bank Account). To be processed in CMS software under client code "AXISMF"

I/ We  **Application No.**

authorise you to debit my/our account no.


Account type  Savings  NRO  NRE  Current  FCNR  Others  to pay for the purchase of

Axis Banking & PSU Debt Fund  Axis Dynamic Bond Fund  Axis Credit Risk Fund  Axis Strategic Bond Fund  Axis Gilt Fund

Axis Treasury Advantage Fund  Axis Short Term Fund  Axis Liquid Fund  Axis Corporate Debt Fund  Axis Ultra Short Term Fund

Axis Overnight Fund **OR**  Axis MF Multiple Schemes

Amount (in words)  (in Figures)

 Signature of First Account Holder	Signature of Second Account Holder	Signature of Third Holder
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Date

## WE ACKNOWLEDGE YOUR APPLICATION Received subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form.

From

Cheque No.	Date	Amount	Scheme	Stamp & Signature	Application No.

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# SIP REGISTRATION FORM

for first time investors, submit Common Application form along with this form.

Application No. 

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Distributor  
ARN - 16709

Sub-Distributor  
ARN

Internal Sub-Broker/  
Sol ID

EUIN -E039709

Employee  
Code

RIA CODE ^

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. ^ 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 of all schemes 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 in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."

You/ Sole Applicant /Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
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**TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS 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 across Mutual Funds. In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.

**1. YOUR INFORMATION (MANDATORY)**

**EXISTING INVESTOR'S FOLIO NUMBER**

(If you have an existing folio with KYC validated, please mention here)

Folio number 

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Your Name (as in PAN Card / KYC records) Mr. Ms. M/s. 

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Name of the Guardian Mr. Ms. M/s. 

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 (In case First / Sole Applicant is minor) / Contact Person - Designation / PoA HOLDER (In case of Non-individual Investors)

Your PAN 

--	--	--	--	--	--	--	--	--	--

 2nd Holder PAN 

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3rd Holder PAN 

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**DO NOT FILL THE MANDATE BELOW, IF OTM DETAILS ARE PROVIDED IN SECTION 2 ON THE NEXT PAGE.**

To register Axis One Time Mandate, please fill and submit the One Time Mandate form separately.

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<input checked="" type="checkbox"/> CREATE	I/We hereby authorize <b>Axis Mutual Fund</b>	to debit (tick ✓) <input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other																																									
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FREQUENCY	<input checked="" type="checkbox"/> Mthly <input checked="" type="checkbox"/> Qtly <input checked="" type="checkbox"/> H-Yrly <input checked="" type="checkbox"/> Yrly <input checked="" type="checkbox"/> As & when presented	DEBIT TYPE	<input checked="" type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount																																								
Reference 1	PAN No. <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											Phone No.	<table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																														
Reference 2	All Schemes of Axis Mutual Fund	Email ID	<table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																								

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.

<p><b>PERIOD</b></p> <p>From <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></p> <p>To <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table></p> <p>Or <input type="checkbox"/> Until Cancelled</p>																					<p><input checked="" type="checkbox"/></p> <p>Signature Primary Account holder</p> <p>1. _____</p> <p>Name as in bank records</p>	<p>Signature of Account holder</p> <p>2. _____</p> <p>Name as in bank records</p>	<p>Signature of Account holder</p> <p>3. _____</p> <p>Name as in bank records</p>

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.

**MANDATORY FIELDS:** • Instrument Date • Account type • Bank A/c number (core banking a/c no only) • Bank name • IFSC code or MICR code (as per the cheque / pass book) • Amount (in words & in figures) • Period start date and end date or until cancelled • Account holder signature • Account holder name as per bank records. Reference 1 - PAN.

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

Investor Name		
SIP Scheme 1	Top-up	<input type="checkbox"/> Yes <input type="checkbox"/> No
SIP Scheme 2	Top-up	<input type="checkbox"/> Yes <input type="checkbox"/> No
SIP Scheme 3	Top-up	<input type="checkbox"/> Yes <input type="checkbox"/> No
Stamp & Signature		

**2. SIP DETAILS**

SIP Registration Mode  A-OTM  K-OTM  Mandate along with SIP form

OTM Reference No.  (if Multiple One Time Mandate are registered)

Scheme / Plan / Option	Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	SIP Date (DD) Default SIP Date 7th	Enrollment Period (MMYY) From <input type="text"/> To <input type="text"/> or <input type="checkbox"/> 1 2 9 9	SIP Amount ₹ <input type="text"/> in figures <input type="text"/> in words	TOP-UP Facility (Optional) Only available for Monthly SIP	
					Frequency <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly	Amount ₹ <input type="text"/> in figures <input type="text"/> in words
					<input type="checkbox"/> Dynamic TOP-UP	
					<input type="checkbox"/> Dynamic TOP-UP	
					<input type="checkbox"/> Dynamic TOP-UP	

**SIP initial payment details (Optional)**

Drawn on bank / branch name	<input type="text"/>	Amount	<input type="text"/>
Mode	<input type="checkbox"/> Cheque/DD <input type="checkbox"/> Cheque/DD	Dated	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y

In case of multiple SIP, mention "Axis MF Multiple Schemes" on the payment instrument.

**3. Declaration and Signature (to be signed by all unit holders if mode of holding is 'joint')**

I / We declare that the particulars furnished here are correct. I / We authorize Axis Mutual Fund acting through its service providers to debit my / our bank account towards payment of SIP installments and/ or any lumpsum payments through an Electronic Debit arrangement / NACH (National Automated Clearing House) as per my request from time to time. 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. 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.

<input checked="" type="checkbox"/> You/ Sole Applicant /Guardian	<input type="checkbox"/> Second Applicant	<input type="checkbox"/> Third Applicant
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**INSTRUCTIONS FOR SIP & TOP-UP**

- Multiple SIP registration facility is not available for Axis Children's Gift Fund, Axis Liquid Fund, Gold ETF and during NFO.
- Investors are required to submit Form along with a photo copy/cancelled cheque of Debit Bank Account at least 15 days before the first SIP Installment date.
- Investor shall have the option of choosing any date of the month as the SIP date except the dates 29th, 30th and 31st. If SIP date is not mentioned, default date would be considered as 7th of every month. If the SIP date falls on a non-business day or a bank holiday, the SIP debit will be processed on the following business day.
- Please refer below table for minimum amount per installments:

Scheme	Minimum Amount (₹)	Minimum Installments
All Schemes except Axis Liquid Fund	1000	6
Axis Long Term Equity Fund*	500	6

Note: For all schemes, minimum amount is as per above table and thereafter in multiple of ₹ 1.

For Long Term Equity Fund Minimum amount is as per above table and thereafter in multiple of ₹ 500\*.

- If no amount is mentioned minimum scheme amount would be considered i.e. for Axis Long Term Equity Fund minimum amount would be ₹ 500/- and for other schemes minimum amount would be ₹ 1,000/-.
- For details about the Scheme and its facility please refer the SID, SAI & KIM of the respective schemes / Addendum issued from time to time carefully before investing.
- The SIP will be discontinued automatically if payment is not received for three successive installments.
- Investors can discontinue a 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.
- Mandate will be processed through NACH platform offered by NPCI.
- As per SEBI circular dated August 22, 2011, Transaction Charge per subscription of ₹ 10,000/- and above shall be charged from the investors and shall be payable to the distributors/ brokers (who have not opted out of charging the transaction charge) in respect of applications routed through distributor/broker relating to Purchases / subscription / new inflows only (lumpsum and SIP), subject to the following:
  - For Existing / New investors: ₹100 / ₹150 as applicable per subscription of ₹10,000/- and above.
  - Transaction charge for SIP shall be applicable only if the total commitment through SIP amounts to ₹10,000/- and above. In such cases the transaction charge would be recovered in maximum 4 successful installments.
  - There shall be no transaction charge on subscription below ₹10,000/-.
  - There shall be no transaction charges on direct investments.
  - There shall be no transaction charges for transaction other than purchases/subscriptions relating to new inflows such as Switches, etc.
  - Transactions carried out through the Stock Exchange platforms for mutual funds shall not be subject to transaction charges.

The requirement of minimum application amount shall not be applicable if the investment amount falls below the minimum requirement due to deduction of transaction charges from the subscription amount.

However, the option to charge "transaction charges" is at the discretion of the distributors.

Investors may note that distributors can opt to receive transaction charges based on type of the Scheme. Accordingly, the transaction charges would be deducted from the subscription amounts, as applicable.

- Investor will not hold Axis Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles of NACH Debit/ Local/Bank holiday. 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 SIP or ECS / Auto debt facility. The investor assumes the entire risk of using this facility and takes full responsibility.
- Investor can change bank details for SIP by submitting a "CHANGE OF BANK MANDATE - FOR SIP" form available on the website or at any Investor Service Centre along with cancelled cheque of the new bank with the investor's name printed on it.
- TOP-UP Facility: Under this facility the Investor can increase the SIP installment at pre-defined intervals by a fixed amount or any time as per the request. This facility is available for individual investors only. For availing the said facilities, investors are required to note the following:
  - Investor willing to register TOP-UP should provide the TOP-UP details along with the SIP enrolment details.
  - The minimum amount for Axis TOP-UP facility is ₹ 500/- and in multiples of ₹ 1/- for all schemes; except Axis Long Term Equity Fund the minimum amount is ₹ 500 and in multiples of ₹ 500 thereafter.
  - If no amount is mentioned as TOP-UP amount under frequency yearly and half-yearly, minimum TOP-UP amount would be considered, i.e., ₹ 500/- for all schemes.
  - TOP-UP frequencies available are Half-Yearly/ Yearly/ Dynamic requested intervals.
  - In case TOP-UP frequency is not indicated, it will be considered as Yearly by Default.
  - The date for Axis Mutual Fund TOP-UP Facility will correspond to the registered SIP.
  - TOP-UP will continue till the End of the SIP tenure by default.
  - In case an investor wishes to change the Top-Up amount, he/she has to provide a cancellation for the existing SIP and register fresh SIP.
  - Only TOP-UP cannot be discontinued anywhere during the SIP tenure.
  - In case of Dynamic Top up option, any changes in the amount can be made only after completion of 6 months from the date of the first installment and minimum gap between two top up requests should be 3 months and amount specified in last request shall be continued till the End of the SIP tenure.
  - Please see the illustration below to know how to calculate SIP Top-Up amount:
    - SIP Starts on 07/May/2016 · SIP ends on 07/12/2099 · SIP amount is ₹ 1000
    - Top-Up amount is ₹ 500 · Top-Up Frequency is Half-yearly

Top-Up date	SIP Amount (₹)	Top-Up Amount (₹)	New SIP Amount (₹)
7-Nov-2016	1000	500	1500
7-May-2017	1500	500	2000
7-Nov-2017	2000	500	2500
7-May-2018	2500	500	3000



# ONE TIME MANDATE (OTM) FORM

One Time Mandate (OTM) is a common application form for registration of mandate centrally and not being folio specific. OTM registration will be PAN Based and will be available for investment in all folios available with Axis Mutual Fund for Multiple SIPs and additional purchases. One Time Mandate is only available to HUFs, Proprietor Firms and individual investors with "Single" or "Either or Survivor" mode of holding.

**Investor Details** (If One Time Mandate registration is not required, skip this section and only fill the NACH Mandate below.)

Name of Applicant											
PAN				Mobile No.							
Email ID											
Bank Name						Account No.					

I / We declare that the particulars furnished here are correct. I / We authorize Axis Mutual Fund acting through its service providers to debit my / our bank account towards payment of SIP installments and/or any lumpsum payments through an Electronic Debit arrangement / NACH (National Automated Clearing House) as per my request from time to time. 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. 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/ We 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. I/ We request you to make provisions for me/ us and/ or an advisor authorized by me to be able to utilize this mandate for any transaction (not limited to SIP and/ or Lumpsum payments) in all the folios associated with my PAN mentioned above any mode of transaction available to me time to time from Axis Mutual Fund. I/ We give my consent to Axis Asset Management Company Limited and its agents to contact me over phone, SMS, email or any other mode to address my investment related queries and/or receive communication pertaining to transactions/ non-commercial transactions/ promotional/ potential investments and other communication/ material irrespective of my blocking preferences with the Customer Preference Registration Facility.




Signature of PAN Holder  
(as per folio record)

Dated	D	D	M	M	Y	Y	Y	Y	Place										
-------	---	---	---	---	---	---	---	---	-------	--	--	--	--	--	--	--	--	--	--



UMRN		Bank use		Date	D	D	M	M	Y	Y	Y	Y
Tick (✓)	Sponsor Bank Code	Bank use	Utility Code	Bank use								
CREATE <input checked="" type="checkbox"/>	I/We hereby authorize	Axis Mutual Fund	to debit (tick✓)	<input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other								
MODIFY <input checked="" type="checkbox"/>	Bank a/c number											
CANCEL <input checked="" type="checkbox"/>	with Bank	Name of customers bank	IFSC		or MICR							
	an amount of Rupees		In Words		₹	In Figures						
FREQUENCY	<input checked="" type="checkbox"/> Mthly <input checked="" type="checkbox"/> Qtly <input checked="" type="checkbox"/> H-Yrly <input checked="" type="checkbox"/> Yrly <input checked="" type="checkbox"/> As & when presented	DEBIT TYPE	<input checked="" type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount									
Reference 1	PAN 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.

<p><b>PERIOD</b></p> <p>From</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> </table> <p>To</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> </table> <p>Or <input type="checkbox"/> Until Cancelled</p>	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y		<p>Signature Primary Account holder</p> <p>1. _____</p> <p style="text-align: center;">Name as in bank records</p>	<p>Signature of Account holder</p> <p>2. _____</p> <p style="text-align: center;">Name as in bank records</p>	<p>Signature of Account holder</p> <p>3. _____</p> <p style="text-align: center;">Name as in bank records</p>
	D	D	M	M	Y	Y	Y	Y																												
	D	D	M	M	Y	Y	Y	Y																												
D	D	M	M	Y	Y	Y	Y																													
D	D	M	M	Y	Y	Y	Y																													

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.

**MANDATORY FIELDS:** • Instrument Date • Account type • Bank A/c number (core banking a/c no only) • Bank name • IFSC code or MICR code (as per the cheque / pass book) • Amount (in words & in figures) • Period start date and end date or until cancelled • Account holder signature • Account holder name as per bank records

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

Investor Name	
PAN No.	Stamp & Signature

## INSTRUCTIONS FOR ONE TIME MANDATE

- One Time Mandate is currently available to HUFs, Proprietor Firms and individual investors with "Single" or "Either or Survivor" the mode of holding.
- Registration of One Time Mandate will take 21 days from the date of submission of form.
- Mandate will be processed through NACH platform offered by NPCI.
- "National Automated Clearing House (NACH)" is Direct Electronic Debit mode implemented by National Payments Corporation of India (NPCI), list of banks is available on NPCI website [www.npci.org.in](http://www.npci.org.in). The said list is subject to modifications. The investor agrees to abide by the terms and conditions of NACH Debit/ECS of Reserve Bank of India/Banks.
- In case the Mandatory fields on the Mandate are not filled, the mandate will be rejected.
- Maximum Amount: The MAXIMUM AMOUNT is the per transaction maximum limit. As investor can register for multiple SIPs with one time NACH mandate. The transaction amount should not exceed the maximum amount mentioned in the NACH mandate. It is suggested to choose a higher amount to commence additional investments in future or to absorb Top-Up increments.
- Axis One Time Mandate cannot be utilized for Liquid schemes, ETF schemes, closed ended schemes, and during NFO period.
- Special instructions for EasyCall / EasySMS facility:
  - Post registration, you can invest less than 2,00,000/- at a time using EasyCall & EasySMS.
  - The Distributor ARN for an EasyCall/ EasySMS transaction will be the same as registered against the folio in which the transaction is being done. In case a folio has multiple brokers registered, then the EasyCall transaction is made under the Distributor ARN of the last transaction in the folio.
  - The Investor agrees that all calls received shall be eligible for same day NAV subject to necessary formalities to be complied by the AMC in case of transaction through EasyCall & EasySMS Facility on or before the uniform cut off time.
  - SIP is not available through Easy SMS.
  - The cut off time for EasyCall transactions is 2:30pm on all business days and if the call for transaction is received after 2:30 pm it would be considered for the next day transaction.
  - The cut off time for EasySMS transactions is 3:00 pm on all business days and if the SMS for transaction is received after 3:00 pm it would be considered for the next day transaction
  - Requests like change in bank mandate, change of nomination, change in mode of holding, change of address or such other requests as the AMC may decide from time to time will not be permitted using the EasyCall & EasySMS facility.
- The Investor/s shall not hold the AMC liable for the following:
  - For any transaction using the Facility carried out in good faith by the AMC on instructions of the Investor/s.
  - For unauthorized usage/ unauthorized transactions conducted by using the Facility.
  - For any loss or damage incurred or suffered by the Investor/s due to any error, defect, failure or interruption in the provision of the Facility arising from or caused by any reason whatsoever.
  - For any negligence/mistake or misconduct by the Investor/s.
  - For any breach or non-compliance by the Investor/s of the rules/terms and conditions stated in the Scheme Information Document.
  - For not verifying the identity of the person giving the telephone instructions in the Investor/s name.
  - For not carrying out any such instructions where the AMC has reason to believe (which decision of the AMC the Investor/s shall not question or dispute) that the instructions given are not genuine or are otherwise improper, unclear, vague or cause for doubt.
  - For carrying out a transaction after such reasonable verification as the AMC may deem fit regarding the identity of the Investor/s.
  - In case of error in NAV communication.
  - For accepting instructions given by any one of the Investor/s or his/her authorized person.
- Axis Asset Management Company Limited (AMC) has the right to ask such information (Key Information) from the available data of the Investor/s before allowing him/ her access to avail the One Time Mandate facility (the Facility). If for any reason, the AMC is not satisfied with the replies of the Investor/s, the AMC has at its sole discretion the right of refusing access without assigning any reason/s to the Investor/s.
- It is clarified that the Facility is only with a view to accommodate / facilitate the Investor/s and offered at the sole discretion of the AMC. The AMC is not bound and/or obliged in any way to give access to the Facility to Investor/s.
- The Investor/s shall check his/ her account records carefully and promptly. If the Investor/s believes that there has been a mistake in any transaction using the Facility, or that an unauthorized transaction has been effected, the Investor/s shall notify the AMC immediately. If the Investor/s defaults in intimating the discrepancies in the statement within a period of fifteen days of receipt of the statements, he waives all his rights to raise the same in favor of the AMC, unless the discrepancy/ error is apparent on the face of it. By opting for the facility the Investor/s hereby irrevocably authorizes and instructs the AMC to act as his/ her agent and to do all such acts as AMC may find necessary to provide the Facility.
- The Investor/s shall at all times be bound by any modifications and/ or variations made to these Terms and Conditions by the AMC at their sole discretion and without notice to them.
- The Investor/s agrees and confirms that the AMC has the right to ask the Investor/s for an oral or written confirmation of any transaction request using the Facility and/ or any additional information regarding the Account of the Investor/s.
- The Investor/s agrees and confirms that the AMC may at its sole discretion suspend the Facility in whole or in part at any time without prior notice.
- The Investor/s shall not assign any right or interest or delegate any obligation arising herein.
- The Investor/s shall take responsibility for all the transactions conducted by using the Facility and will abide by the record of transactions generated by the AMC. Further, the Investor/s confirms that such records generated by the AMC shall be conclusive proof and binding for all purposes and may be used as evidence in any proceedings and unconditionally waives all objections in this behalf.
- The Investor/s agrees that use of the Facility will be deemed acceptance of the Terms and Conditions and the Investor/s will unequivocally be bound by these Terms and Conditions.