



# ONE TIME MANDATE FORM

505, Regent Chambers, 5th Floor, Nariman Point, Mumbai - 400021.

www.QuantumMF.com

|  |   |                   |  |              |                                    |
|--|---|-------------------|--|--------------|------------------------------------|
| Tick <input checked="" type="checkbox"/>   | UMRN  |                   |  | DDMMYYYY     |                                    |
| Create: <input type="checkbox"/>   | Sponsor Bank Code   | (Office use only) |  | Utility Code | (Office use only)                  |
| Modify: <input type="checkbox"/>   | I/We hereby authorize <b>QUANTUM MUTUAL FUND</b> to debit (Tick <input checked="" type="checkbox"/> ) |                   |  |              | SB/ CA/ CC/ SB-NRE / SB-NRO/ Other |
| Cancel: <input type="checkbox"/>   | From Bank A/C Number:   |                   |  |              |                                    |
| With (Name of Destination Bank with Branch)  |   | IFSC Code:        |  | MICR Code:   |                                    |
| an amount of Rupees  |   | (in words)        |  | ₹            |                                    |
| FREQUENCY: <input checked="" type="checkbox"/> Mthly <input checked="" type="checkbox"/> Qtrly <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 |              |                                    |
| Folio No.  |   |                   | Phone No.  |              |                                    |
| Schemes <b>ALL SCHEMES OF QUANTUM MUTUAL FUND</b>  |   |                   | Email ID   |              |                                    |

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

|   |   |                                   |                                   |
|---|---|-----------------------------------|-----------------------------------|
| PERIOD                                      | 1 Signature of 1st Account Holder   | 2 Signature of 2nd Account Holder | 3 Signature of 3rd Account Holder |
| From DDMMYYYY                               | Name as in bank records   | Name as in bank records           | Name as in bank records           |
| To DDMMYYYY                                 |   |                                   |                                   |
| Or <input type="checkbox"/> Until Cancelled | *This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account based on the instruction as agreed and signed by me.<br>*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. |                                   |                                   |



## SYSTEMATIC INVESTMENT PLAN AUTO DEBIT MANDATE FORM

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and only  
India's 1<sup>st</sup> Direct to Investor  
Mutual Fund

Please fill this form in ENGLISH in BLACK/DARK COLOURED INK in CAPITAL LETTERS.

☐ New Registration (New Investors to submit duly filled and signed Common Application Form) ☐ Change in Bank Account (for Existing Investor) ☐ Micro SIP ☐ Cancellation of SIP

| INTERMEDIARY INFORMATION |                 |         |          |
|--------------------------|-----------------|---------|----------|
| Name & ARN Code          | Sub-Broker Code | EUIN    | RIA Code |
| 132061                   |                 | E352389 |          |
| E- Code / RM code        |                 |         |          |

| INVESTOR DETAILS          |          |
|---------------------------|----------|
| Folio/Application No.     | PAN No.* |
| Sole/First Investor Name: |          |

| INVESTMENT DETAILS (Please <input checked="" type="checkbox"/> ) Choice of Scheme/Option/Facility |  |
|---|--|
| Scheme  |  |
| Option  |  |
| Facility  |  |

| Frequency Details (Please <input checked="" type="checkbox"/> ) |                                 |  |   |   |   |
|---|---------------------------------|--|---|---|---|
| <input type="checkbox"/> Daily                                  | <input type="checkbox"/> Weekly | <input type="checkbox"/> Fortnightly                                   | <input type="checkbox"/> Monthly                              | <input type="checkbox"/> Quarterly                            |   |
| All Business Days   | 7th, 15th, 21st, 28th of a week | <input type="radio"/> 5th, 21st OR<br><input type="radio"/> 7th & 25th | <input type="radio"/> 5th OR<br><input type="radio"/> 21st OR | <input type="radio"/> 7th OR<br><input type="radio"/> 25th OR | <input type="radio"/> 15th OR<br><input type="radio"/> 28th |

No of Installments: SIP Start Date DDMMYY SIP End Date DDMMYY Cheque No.

Amount Per Installment: Amount (in words)

I/We hereby authorize Quantum Mutual Fund and their authorized service providers to debit my/our following bank account by ECS (Debit clearing/Auto Debit) for collection of SIP payments  
 Note: Please allow 30 business days for Auto Debit to register and start. \* Only monthly and quarterly SIP frequencies are available for Quantum Liquid Fund.

Bank Name

Bank Account No.

I/We wish to inform you that I/We have registered with Quantum Mutual Fund through their Authorized Service Provider(s) and representative for my/our payment to Quantum Mutual Fund by debit to my/our above mentioned bank account. For this purpose I/We authorize their Service Provider(s) and the representative to raise debit on my/our above mentioned account with your branch. I/We hereby authorize you to honor all such requests received through their authorized Service Provider(s) and representative to debit my/our account with the amount requested, for due remittance of the proceeds to Quantum Mutual Fund. I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I/We hereby declare that the particulars given above are correct and complete. If the transactions are delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Quantum Mutual Fund or their authorized Service Provider(s) and representative responsible. If the date of debit to my/our account happens to be a non-business day as per Mutual Fund or a Bank holiday, execution of the SIP will happen on the next working day and allotment of units will happen as per the Terms and Conditions listed in Scheme Information Document (SID) and Statement of Additional Information (SAI) of the Mutual Fund. The above mentioned bank shall not be liable for, nor be in default by reason of any failure or delay in completion of this service, where such failure or delay is caused in whole or in part by any acts of God, civil war, civil commotion, riot, strike, mutiny, revolution, fire, flood, fog, war, lightning, earthquake, change of government policies, unavailability of banks computer system, force majeure event or any other cause of peril which is beyond the above mentioned banks reasonable control and which has the effect of preventing the performance of this service by the above-mentioned bank. I/We shall not dispute or challenge any debit, raised under this mandate, on any ground whatsoever. I/We shall not have any claim against the bank in respect of the amount so debited pursuant to the mandate submitted by me/us. I/We shall keep the bank and authorized Service Provider(s) and representative jointly and severally indemnified from time to time, against all claims, actions, suits, for any loss, damage, costs, charges and the expenses incurred by the bank and authorized Service Provider(s) and representative, by reason of their acting upon the instructions issued by the above named authorized signatories/ beneficiaries. This request for debit mandate is valid and may be revoked only through written letter withdrawing the mandate signed by the authorized signatories/beneficiaries and giving reasonable notice to such withdrawals. I/We hereby apply for the respective units of Quantum Mutual Fund Scheme(s) at NAV based the resale price agree to abide by terms, conditions, rules and regulations of Scheme(s). I/We hereby authorize bank to debit my account for mandate verification charges, if any.

First Account Holders Signature  
(As per bank records)

Second Account Holders Signature  
(As per bank records)

Third Account Holders Signature  
(As per bank records)

## Declaration

I/We hereby declare that the particulars given on this mandate are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the utility/service provider/participating Banks/Mutual Fund responsible. I/We have read the T&C and agree to discharge the responsibility expected of me/us as a participant/s under the scheme. I/We authorize use of above mentioned contact details for the purpose of this specific mandate instruction processing. I/We hereby confirm adherence to terms on this mandate. I/ we hereby authorize the fund to utilize this form for transactions through Email / SMS / Fax/ Phone or any other electronic means.

## Instructions to fill Mandate

All fields in the form are mandatory to be filled

1. Date in DD/MM/YYYY format.
2. Tick on box to select type of action to be initiated.
3. Tick on box to select type of account to be affected.
4. Customer's bank account number, left padded with zeroes. (Maximum length - 20 Alpha Numeric Characters)
5. Name of bank and branch.
6. IFSC / MICR code of customer bank. (Maximum length - 11 Alpha Numeric Characters)
7. Amount payable for service or maximum amount per transaction that needs to be processed, in words.
8. Amount in figures, similar to the amount mentioned in words as per point 7 above.
9. Tick on box to select frequency of transaction.
10. Validity of mandate with dates in DD/MM/YYYY format.
11. Names of customer/s and signatures as well as seal of company (where required).  
(Maximum length of Name - 40 Alpha Numeric Characters)
12. Undertaking by customer.
13. 10 digit mobile number of customer. Mail ID of customer.
14. You can Tick on 'Until Cancelled' incase you do not wish to mention the 'To Date'.

# SIP ECS/AUTO DEBIT MANDATE FORM

## TERMS & CONDITIONS

1. Complete Common Application form and SIP ECS Mandate Form along with the first cheque should be submitted to the AMC / Kavya Collection Centers.
  2. New investors should mandatorily give a cheque for the first Installment. The first cheque should be drawn on the same bank account which is to be registered for ECS (Debit Clearing). Alternatively, the cheque may be drawn on any bank, for which investor should provide a photocopy of the cheque or cancelled cheque of the bank/ branch for which ECS is to be registered.
  3. First SIP cheque and subsequent SIP installments via ECS should be of the same amount.
  4. Employee Unique Identification Number (EUIIN) - Investor investing through Intermediary shall mandatorily mention the EUIIN on the application form, irrespective whether he/she has been advised by Sales person/ Employee/ Relationship manager of the Intermediary or not. However, in case of any exception cases, where there is no interaction by Sales person / Employee / Relationship manager of the intermediary with respect to the investment / transaction, the EUIIN box may be left blank. If left blank, AMC will seek the following declaration separately from the investor, "I/We hereby confirm that the EUIIN 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." It is mandatory to obtain EUIIN for every Sales person / Employee / Relationship manager of the Intermediary for dealing (irrespective whether transactions are in the nature of execution or advisory) in mutual fund products.
  5. ECS instructions will take a minimum of 30 business days for registration with the bank and hence the first auto debit will be carried out only after one month, on the SIP date mentioned on the form. The AMC reserves the right to modify the SIP period depending on the one month period for registration to ensure minimum number of installments as mentioned in Scheme Information Document (SID)
  6. The cities mentioned above may be modified/ updated/ changed/ removed at any time in future at the discretion of the AMC without assigning any reasons or prior notice. If any city, bank/branch is removed, SIP instructions for investors in such cities, bank/branch via ECS route will be discontinued without prior notice.
  7. The SIP Enrollment will be discontinued in cases where Two consecutive SIP installments are not honored or the bank account is closed and no request for change in bank account has been submitted.
  8. Request for cancellation should be submitted 15 business days prior to the next SIP date.
  9. Request for change in bank mandate to be submitted atleast 30 business days before the due date of next SIP installment.
  10. The bank account provided for ECS (Debit) should participate in local MICR Clearing.
  11. MICR code starting and / or ending with 000 are not valid for ECS
  12. The investor agrees to abide by the terms and conditions of ECS facility of the Reserve Bank of India (RBI) as applicable at the time of investment and as may be modified from time to time.
  13. The investor undertakes to keep sufficient funds in the account till the date of execution of the debit. The investor hereby declares that the particulars given overleaf are correct and complete. If the date of debit to the investors account happens to be a non Business day as per the fund, execution of the debit will not happen on the day of the holiday and allotment of Units will happen as per the terms and conditions listed in the concerned Scheme Information Document (SID). The Fund, its Registrars, Auto Debit Banks and other service providers shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligation under this agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riots, strike, mutiny, revolution, fire, flood, fog, war, change of government policies, unavailability of banks computer system, force majeure events or any other cause of peril which is beyond their reasonable control and which has the effect of preventing the performance of contract by them.
  14. Investors will not hold Quantum AMC, its registrars, banks and other service providers responsible if the transaction is delayed or not effected or the investor's bank account is debited in advance or after the specific SIP date or if 2-3 consecutive SIP installments are debited by your bank in a day due to the local holidays or any other reason.
  15. Quantum AMC reserves the right to reject any application without assigning any reason thereof.
  16. Please refer SID for minimum SIP investment amount under each schemes.
  17. Please refer the Key Information Memorandum (KIM) and SID of the respective scheme for applicable NAV, risk factors, load (exit/entry) and other information on the respective scheme before investing.
  18. If an investor does not mention SIP Frequency and/or SIP date in the application form or multiple SIP frequency/dates are mentioned in the SIP Mandate or the details are unclear in the SIP form, the default SIP frequency shall be treated as monthly and the default SIP date will be considered as 5th. In case of fortnightly SIP frequency, default date will be considered as 5th and 21st of the month.  
If an investor does not mention SIP start date or the SIP start date is unclear in the SIP form, the SIP date will by default start from the next subsequent month after meeting the minimum registration requirement of 30 working days.  
If an investor does not mention SIP end date or the SIP end date is unclear in the SIP form, the tenure of SIP will be treated as perpetual (subject to bank's acceptance) till instruction to the contrary is received from the investor.  
In case the investor does not provide both the start date as well as end date, then the SIP installment would be the minimum number of installments of the respective scheme as mentioned in the respective Scheme Information Document (SID).  
"Perpetual SIP" will be the default option incase end date for enrolment period is not provided. In case an investor, who has opted for Perpetual SIP, subsequently intends to discontinue the same, a written communication thereof will be required to be furnished.
  19. Incorrect, incomplete or ambiguous forms will not be accepted and will be returned to the investor within 10 business days via normal post.
  20. To avail of SIP in separate schemes/options via Direct Debit/ECS facility, an investor will have to fill a separate form for each scheme/ options. A single form cannot be used for different schemes simultaneously.
  21. For modification/change in SIP amount, New SIP Auto debit mandate form with revised SIP amount alongwith letter to discontinue the existing SIP amount to be submitted 30 business days prior to the Installment date.
  22. If an investor gives a request for change in bank mandate of the same amount as that of the existing SIP amount in the same folio, the existing SIP will be discontinued and only the new SIP containing new bank details will be considered. But if an investor gives a request for change in bank mandate with different SIP amount both the new SIP as well as the existing SIP would continue.
  23. In case of investments in the name of a minor, no new transactions / standing instructions / SIP / STP / SWP or cancellation of such requests will be allowed by the guardian from the date of minor attaining majority till instruction from the major is received by the AMC/Mutual Fund along with the prescribed documents for change of account status from minor to major.
  24. The allotment of units in case of SIP in Quantum Liquid Fund will be based on realization and utilization of funds only.
  25. In case an investor gives full/partial redemption request in a folio where there is an on-going SIP, then redemption will be processed only for the units towards which the amount has been realized.
  26. In case of weekly and fortnightly frequencies there are restrictions on the dates to be selected due to operational constraints
- Additional instructions for Micro Systematic Investment Plan (MSIP)**
1. Micro SIP (Systematic Investment Plan) upto ` 50,000 per year per investor shall be exempted from the requirement of PAN.
  2. In case of Micro SIP also KYC is mandatory w.e.f. 1st January, 2012.
  3. In lieu of PAN card copy Investor (including joint holders) to provide the self attested valid Photo ID Proof. Please refer Point 6 below.
  4. All Micro SIPs where aggregate of installments in a financial year i.e. April to March does not exceed ` 50,000.
  5. This exemption will be applicable only investments by individuals (including NRIs but not PIOs), Minors and Sole proprietary firms. HUFs and other categories will not be eligible for Micro SIPs. The exemption is applicable to joint holders also.
  6. While making additional/subsequent Micro SIP investment, investor can quote the existing folio number where a Micro SIP has been registered and therefore need not resubmit the supporting documents again.
  7. Photo identification documents to be submitted in case of Micro SIP Voter Identity Card, Driving License, Government / Defense identification card, Passport, Photo Ration Card, Photo Debit Card (Credit card will not be accepted), Employee ID cards issued by companies registered with Registrar of Companies, Photo Identification issued by Bank Managers of Scheduled Commercial Banks / Gazetted Officer / Elected Representatives to the Legislative Assembly / Parliament, ID card issued to employees of Scheduled Commercial / State / District Co-operative Banks, Senior Citizen / Freedom Fighter ID card issued by Government, Cards issued by Universities / deemed Universities or institutes under statutes like ICAI, ICWA, ICSI, Permanent Retirement Account No (PRAN) card issued to New Pension System (NPS) subscribers by CRA (NSDL), Any other photo ID card issued by Central Government / State Governments /Municipal authorities / Government organizations like ESIC / EPFO.
  8. Proof of address copy. It is clarified that where photo identification documents contain the address of the investor, a separate proof of address is not required.