



# MF Utilities India Pvt. Ltd.

103-105, Orion Business Park, Ghodbunder Road, Kapurbawdi

Thane (West) - 400 610

CIN : U74120MH2013PTC242939

## CAN Transaction Form (CTF) - SIP Registration

APPLICATION NO:

AD

TIME-STAMP NUMBER:

Please read all the instructions carefully before filling the form

Please fill this form as well as the PayEezz Form (if PayEezz not registered already) and attach the same to the Application

Please fill in ENGLISH and in BLOCK LETTERS with black ink

Fields marked with (\*) are mandatory and if not filled, the form is liable for rejection

GORN

Distributor / MFU user to write the system generated reference number here

### A. \* Please tick (✓) anyone. In the absence of indication of the option the form is liable to be rejected

NEW REGISTRATION

CANCELLATION

### B. \* UNITHOLDER INFORMATION (If you have a CAN, please fill in the details):-

If you have submitted a CAN Regn Form (CRF), please mention the primary holder PAN/PEKRN or the CRF No below:

Common Account Number (CAN)

OR

PAN  
PEKRN

please specify

CRF No.

please specify

Name of the First/Sole Holder

### C. Key Partner / Agent information (Investors applying under DIRECT plan/s must mention "DIRECT" in ARN Column):-

ARN Code	ARN Name	Sub-Agent ARN Code	Internal code for Sub-Agent/RM/Branch	EUIN <sup>^</sup>
ARN-		ARN-		

<sup>^</sup> EUIN Declaration (only where EUIN box is left blank) (Refer Instruction C2)

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.

sign here	sign here	sign here
Sole/First Applicant / Guardian / POA Holder	Second Applicant	Third Applicant

### Transaction charges for Applications through Distributors only (Refer Instruction D and please tick (✓) any one)

<input type="checkbox"/> I confirm that I am a <b>First Time</b> investor across Mutual Funds. (Charges as prescribed by SEBI, if any, deductible as Transaction Charge and payable to the Distributor)	<input type="checkbox"/> I confirm that I am an <b>Existing</b> investor in Mutual Funds. (Charges as prescribed by SEBI, if any, deductible as Transaction Charge and payable to the Distributor)
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If the total commitment of investment through SIP (i.e. amount per SIP installment X no. of installments) amounts to Rs.10,000 or more and your Distributor has opted to receive transaction Charges, the same are deductible as applicable from the installment amount and payable to the Distributor. In such cases Transaction Charge will be recoverable in 3-4 installments. Units will be issued against the balance of the installment amounts invested. Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

### D. \* Payment Details for current dated 1st instalment:- (Please refer the instructions "ES" for PAYEE NAME) (please note that the 1st and the subsequent instalments should be of the same amount)

Payment Mode (please tick (✓)) ☐ Cheque ☐ Demand Draft ☐ Pay Order ☐ Bankers Cheque ☐ NEFT ☐ RTGS ☐ Transfer Letter ☐ PayEezz<sup>5</sup> ☐ IMPS ☐

Please tick (✓) and enclose any one of the relevant ☐ Instruction to the Bank from Unitholder to debit the Account for NEFT/RTGS/Transfer Instruction

documents as indicated as per the Mode of Payment ☐ Declaration/Acknowledgement from Bank/Copy of Passbook/Bank Statement for DD/PO/BC

Payment Type (please tick (✓)) ☐ Non-Third Party Payment ☐ Third Party Payment (please attach 'Third Party Declaration Form')

Mandatory Enclosure, if 1st instalment is not by cheque (please tick (✓) as applicable) ☐ Blank Cancelled Cheque ☐ Copy of Cheque

Payment Reference Number (Instrument # for Cheque/DD/PO/BC; UTR # for RTGS/NEFT; Ref # for Trf Instruction; PRN for PayEezz)

\$ - In case of payments using PayEezz, the subsequent installments also will be debited using the same PRN

Payment Date (Instrument Date for Cheque, Demand Draft, Payorder, Banker's Cheque; Payment execution date for RTGS, NEFT, Transfer Instruction, PayEezz, IMPS)

Payment Amount in figures (Amount of Cheque/DD/PO/BC/NEFT/RTGS/Transfer Instruction/PayEezz/IMPS)

Bank Charges in figures (only in case of DD / PO / BC)

Total Amount

(i) + (ii)

Payment

from Bank

Account No.

In words

In figures

A/c Type please (✓)

Savings

Current

Cash Credit

O/D

NRE

NRO

FCNR

NRSR

others, please specify

Drawn on Bank

specify Bank name

Branch

specify branch name

### E. \* Scheme Details:- Note : Minimum gap of 30 days is required for the subsequent instalment to start if the PayEezz is registered now. Similarly, minimum 15 days gap is required if an already registered PayEezz is used.

Tranche 1	AMC / Mutual Fund	specify AMC / Mutual Fund name		Folio Number <sup>8</sup>	if available	# - If not mentioned, will be processed under last transacted folio	
	Scheme / Plan <sup>6</sup>	specify scheme / plan				% - Please write the appropriate scheme and plan name. If incorrect, transaction is liable for rejection	
	Option (please tick (✓))	Growth	Dividend Payout	Dividend Reinvestment	Others	please specify	
	Frequency (please tick (✓) anyone) (refer instruction G)	Daily	Weekly	specify (as offered by the scheme)		Fortnightly	specify (as offered by the scheme)
	Enrolment Period	Start Month & Year <sup>9</sup>	End Month & Year <sup>9</sup>	Instalment Date <sup>5</sup>	D	D	\$ - If not offered by the scheme, will be considered for the subsequent date offered by the scheme
Tranche 2	AMC / Mutual Fund	specify AMC / Mutual Fund name		Folio Number <sup>8</sup>	if available	# - If not mentioned, will be processed under last transacted folio	
	Scheme / Plan <sup>6</sup>	specify scheme / plan				% - Please write the appropriate scheme and plan name. If incorrect, transaction is liable for rejection	
	Option (please tick (✓))	Growth	Dividend Payout	Dividend Reinvestment	Others	please specify	
	Frequency (please tick (✓) anyone) (refer instruction G)	Daily	Weekly	specify (as offered by the scheme)		Fortnightly	specify (as offered by the scheme)
	Enrolment Period	Start Month & Year <sup>9</sup>	End Month & Year <sup>9</sup>	Instalment Date <sup>5</sup>	D	D	\$ - If not offered by the scheme, will be considered for the subsequent date offered by the scheme

ACKNOWLEDGEMENT SLIP (to be filled in by the investor). For any queries please contact the nearest MFU "Point of Service" or call us at 1800-266-1415 (Toll Free) or +91 22 3952 6363.

MF UTILITIES INDIA PVT. LTD., Address: 103-105, 1st Floor, Orion Business Park, Ghodbunder Road, Kapurbawdi, Thane (West) - 400 610, India

Received from Mr. / Ms. M/s. \_\_\_\_\_ an application for SIP as per details mentioned below:-

AMC / Fund	Scheme	Plan	Option	Amount (Rs.)

POINT OF SERVICE STAMP & SIGNATURE

AD

Common Mandate Registration (Payee)		
S	<b>Mandate for multiple SIP Registrations</b>	One common mandate can be registered for multiple SIPs registered under one CTF irrespective of dates, frequencies and amount.
I	<b>Mandate for Lump sum investments</b>	One common mandate can be registered under the CAN and used as a debit instruction as and when the investor chooses to invest in lump sum
N	<b>Mandate for multiple payment modes</b>	One common mandate registered can be used for triggering debit instructions for transactions initiated physically or through distributor or online