

BROKER/DISTRIBUTOR	Sub Broker Name & Code	Employee Unique ID. No. (EUIIN)	Time Stamp No. (For office use only)
ARN - 82882 <small>Kindly affix your Sub Broker ARN stamp</small>		AMFI Identity Number	

I/We confirm that the EUIIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned. "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"

Transaction Charges (please tick as applicable. Refer to KIM)

I AM A FIRST TIME INVESTOR IN MUTUAL FUNDS
(₹ 150/- will be deducted as transaction charge on Subscription of ₹10,000/- and more)

I AM AN EXISTING INVESTOR IN MUTUAL FUNDS
(₹ 100/- will be deducted as transaction charge per Subscription of ₹10,000/- and more)

Transaction charges will be applicable to the investors for purchase transaction through Distributor/ Agent. Please refer to the detailed terms and conditions w.r.t. transaction charges given in KIM. KYC is mandatory for ALL investments irrespective of the amount.

1. For Existing Unitholders

First Unitholder	Existing Folio No.
Sole / First Applicant / Guardian	Second Applicant
Third Applicant	
PAN No.*	PAN No.*
PAN No.*	PAN No.*
<input type="checkbox"/> KYC Compliant (Mandatory - Copy of KYC Acknowledgement Letter)	<input type="checkbox"/> KYC Compliant (Mandatory - Copy of KYC Acknowledgement Letter)
<input type="checkbox"/> KYC Compliant (Mandatory - Copy of KYC Acknowledgement Letter)	<input type="checkbox"/> KYC Compliant (Mandatory - Copy of KYC Acknowledgement Letter)
Photo Identification**	Photo Identification**
Photo Identification**	Photo Identification**

* Mandatory - Enclose self/broker attested PAN Card Copy. ** Photo Identification Copy for Micro SIP only - please refer to instruction.

2. For New Investor - Applicant's Details (Mandatory)

Sole / First Applicant

3. Systematic Investment Plan (SIP) Details OR Micro SIP Details (please ✓ whichever is applicable)

Scheme Name

Plan Standard Direct Growth* Dividend Payout Dividend Reinvestment Bonus

SIP Frequency (Please ✓) Monthly* OR Quarterly SIP Date (Please ✓) 1st OR 7th OR 14th OR 21st OR All four dates

Installment Amount (₹) ₹

First SIP Cheque No. Dated DD / MM / YYYY

Drawn on (Bank / Branch Name)

SIP Auto Debit Period (The first Auto Debit should be at least 30 days after the first SIP transaction date) Start Date From MM / YYYY End Date⁽¹⁾ To MM / YYYY (Last Installment)

⁽¹⁾ If no End Date is specified SIP will continue for 50 years.

* Default Option will be applied in case of no information, ambiguity or discrepancy.

4. Payment Bank Details
Source of Payment (from which the above investment is made)

First / Sole Holder's Bank Account Mandatory (any one): Cheque leaf with name pre-printed Bank Statement Pass Book Bank Certificate

OR

Third Party's Bank Account

Relationship with the Holder: Parents/Grand-Parents/related persons Employer on behalf of employee Custodian on behalf of an FII or a client

Mandatory documents required: KYC Acknowledgment Letter Third Party Declaration Form

Document attached (Any one) Cancelled cheque leaf with Name pre-printed Bank Statement Pass Book Bank Certificate

5. Particulars of Bank Account (From which money will be debited)

Account holder name as in Bank Account

Bank name

Account No. Branch Address

City MICR Code M A N D A T O R Y (This is a 9 Digit Number next to your Cheque Number)

For NRI / FII Investors, please indicate account type of your remittance (please ✓) NRE NRO FCNR Others Please specify

Enclosed (please ✓) Account Debit Foreign Inward Remittance Certificate Others

I/We hereby, declare that the particulars given above are correct and express my/our willingness to make payments referred above through direct debit / participation in ECS. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold PineBridge Mutual Fund, their Investment Manager - PineBridge Investments Asset Management Company (India) Private Limited or any of their appointed service providers or representatives responsible. I/We will also inform PineBridge Investments Asset Management Company (India) Private Limited about any changes in my/our bank account. 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. I/We have read and understood the Terms and Conditions w.r.t. transaction charges as applicable for purchase transaction. I/We declare that I/We do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding ₹ 50,000/- in a year. I/We have read and agreed to the terms and conditions mentioned overleaf. EUIIN: 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(S) (ALL ACCOUNT HOLDERS MUST SIGN HERE)

First Account Holder's Signature (As in Bank Records) Second Account Holder's Signature (As in Bank Records) Third Account Holder's Signature (As in Bank Records)

FOR OFFICE USE ONLY (Not to be filled in by investor)

Recorded on DD / MM / YYYY by

Credit A/c. No.

6. Authorisation of Bank Account holder(s) (to be signed by the Account holder)

This is to inform that I/We have registered for RBI's Electronic Clearing Service (Debit Clearing) and that my/our payment towards investment in PineBridge Mutual Fund shall be made from my/our below-mentioned bank account number with your bank. I/We hereby authorise PineBridge Investments Asset Management Company (India) Private Limited - Investment Manager to PineBridge Mutual Fund, acting through their authorised service providers and representatives carrying this ECS Mandate Form to get it verified and executed. I/We hereby further authorise PineBridge Investments Asset Management Company (India) Private Limited (Investment Manager to PineBridge Mutual Fund), acting through their authorised service providers to debit my/our following bank account by ECS (Debit Clearing) for collection of SIP payments:

NAME(S) & SIGNATURE(S) OF BANK ACCOUNT HOLDER(S) AS IN BANK RECORDS

Account Number		
Name of First Account Holder (As in Bank Records)	Name of Second Account Holder (As in Bank Records)	Name of Third Account Holder (As in Bank Records)
First Account Holder's Signature (As in Bank Records)	Second Account Holder's Signature (As in Bank Records)	Third Account Holder's Signature (As in Bank Records)