

- Distributor code & details, if any,
- Bank Account Number, Bank Name, IFSC or MICR Code
- Amount in words AND in Figures, as you would in a cheque (your maximum limit)
- Your NAME and SIGNATURE as in your bank account

- Distributor code & details, if any,
- Name, Folio No. / Application No.
- Scheme/s details
- Date, Other details
- Signature/s

Distributor ARN and Name ARN-87761	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EJIN (Refer note below) E075033	For Office use only
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The following Mandate needs to be submitted only once for registration with or without SIP form. Once the mandate is registered, investor need not submit mandate again and can do lump sum investments, start new SIP registrations, using Physical Forms, Call, SMS or Online.

DSP BLACKROCK
MUTUAL FUND

OTM Debit Mandate Form NACH/ECS/DIRECT DEBIT
[Applicable for Lumpsum Additional Purchases as well as SIP Registrations]

Date

Tick(✓)	UMRN	Office use only	Office use only	Office use only	Office use only	Office use only	Office use only
CREATE	Sponsor Bank Code	Office use only			Utility Code	Office use only	
MODIFY	I/We hereby authorize:		DSP BLACKROCK MUTUAL FUND Schemes			to debit (tick✓) SB / CA / CC / SB-NRE / SB-NRO / Other	
CANCEL							
Bank A/c No.:							
With	Bank Name & Branch			IFSC	OR MICR		
Bank:							
an amount of Rupees	In Words			₹	In Figures		
FREQUENCY	<input checked="" type="checkbox"/> Mthly <input checked="" type="checkbox"/> Qly <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	Folio No:				Mobile		
Reference 2	Appln No:			Email id			

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

PERIOD From <table border="1" style="display: inline-table; text-align: center; width: 100px; height: 20px;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table> to <table border="1" style="display: inline-table; text-align: center; width: 100px; height: 20px;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table> or <input type="checkbox"/> Until Cancelled	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	1. _____ Signature of Account Holder	2. _____ Signature of Account Holder	3. _____ Signature of Account Holder
D	D	M	M	Y	Y	Y	Y												
D	D	M	M	Y	Y	Y	Y												
	1. _____ Name of Account Holder	2. _____ Name of Account Holder	3. _____ Name of Account Holder																

Declaration: This is to confirm that the declaration has been carefully read, understood and made by me/us. I/We have understood that I/we are authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity or the bank where I have authorised the debit and express my willingness and authorize to make payments through participation in NACH/ECS/Direct Debit/Standing Instructions. I/We hereby confirm adherence to the terms of OTM Facility and as amended from time to time and of NACH/ECS (Debits)/Direct Debits/Standing Instructions. Authorisation to Bank: This is to inform that I/We have registered for ECS / NACH (Debit Clearing) / Direct Debit / Standing Instructions facility and that my/our payment towards my/our investment in DSP BlackRock Mutual Fund shall be made from my/our above mentioned bank account with your Bank. I/We authorize the representatives of DSP BlackRock Mutual Fund carrying this mandate form to get it verified and executed.

DSP BLACKROCK
MUTUAL FUND

SIP Registration/Renewal Form (for OTM registered investors only)

Attention: No need to attach OTM Debit Mandate again, if already registered earlier.

Please tick ☒ as applicable:

☐ OTM Debit Mandate is already registered in the folio. [No need to submit again].

☐ OTM Debit Mandate is attached and to be registered in the folio.

The total of all installments in a day should be less than or equal to the amount as mentioned in One Time Mandate already registered or submitted, if not registered.

Distributor ARN and Name	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
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☐ I/We confirm that the EUIN 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.

Sole / FirstApplicant's Signature Mandatory

Investor Name:		Existing Investor Folio No./Application No.	
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PAN/PEKRAN & KYC

Sole / First Applicant / Guardian

Second Applicant / Guardian

Third Applicant / Guardian

Sr. No.	Scheme/Plan/Option/Sub-option (Mention Cheque details, if attached)	SIP Installment Amount (₹)	SIP Date (✓ one only)	Frequency	Start Month/Year End Month/Year*	Top-Up (Minimum ₹ 500 or in Percentage %)	
						Amount (₹) or Percentage%	Frequency
1.	DSPBR - 1 st Cheque No. _____ Date _____		<input type="checkbox"/> 1 st * <input type="checkbox"/> 7 th <input type="checkbox"/> 10 th <input type="checkbox"/> 14 th <input type="checkbox"/> 15 th <input type="checkbox"/> 21 st <input type="checkbox"/> 25 th <input type="checkbox"/> 28 th	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly	<div> <div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div>to</div> <div> <div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div>	₹ _____ OR _____	<input type="checkbox"/> Yearly* <input type="checkbox"/> Half-yearly*
						Top-Up CAP*: _____	
2.	DSPBR - 1 st Cheque No. _____ Date _____		<input type="checkbox"/> 1 st * <input type="checkbox"/> 7 th <input type="checkbox"/> 10 th <input type="checkbox"/> 14 th <input type="checkbox"/> 15 th <input type="checkbox"/> 21 st <input type="checkbox"/> 25 th <input type="checkbox"/> 28 th	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly	<div> <div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div>to</div> <div> <div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div>	₹ _____ OR _____	<input type="checkbox"/> Yearly* <input type="checkbox"/> Half-yearly*
						Top-Up CAP*: _____	
3.	DSPBR - 1 st Cheque No. _____ Date _____		<input type="checkbox"/> 1 st * <input type="checkbox"/> 7 th <input type="checkbox"/> 10 th <input type="checkbox"/> 14 th <input type="checkbox"/> 15 th <input type="checkbox"/> 21 st <input type="checkbox"/> 25 th <input type="checkbox"/> 28 th	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly	<div> <div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div>to</div> <div> <div>M</div><div>M</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div>	₹ _____ OR _____	<input type="checkbox"/> Yearly* <input type="checkbox"/> Half-yearly*
						Top-Up CAP*: _____	

(*Maximum per Installment Amount after Top-Up shall not exceed Rs. Five Lakh) (*Default option) (*Default End Month/Year - 12/2099)

Debit Bank Details:	Bank Name:	A/C. No.:
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Declaration: Having read, understood and agreed to the contents of OTM Facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of DSP BlackRock Mutual Fund mentioned within, I hereby declare that the particulars given above are correct and express my willingness to make payments towards SIP installments referred above through participation in NACH/ECS/ Direct Debit/Standing Instructions. The ARN holder, where applicable, has disclosed to me/us all the commissions (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.

Signatures [as per Mutual Fund Records/Application]

X First Unit Holder's Signature

Second
Unit
Holder's
Signature

Third
Unit
Holder's
Signature

Acknowledgement Investor Name: _____ <input type="checkbox"/> DEBIT MANADATE FORM <input type="checkbox"/> SIP FORM		DSP BlackRock Mutual Fund Folio No. _____ Application No. _____	ISC Stamp
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Website : www.dspblackrock.com | **E-mail :** service@dspblackrock.com | **Contact Centre :** 1-800-200-4499

Instructions

- Investors who have already submitted an OTM form or already registered for OTM facility should not submit OTM form again as OTM registration is a one-time process only for each bank account. However, such investors if wish to add a new bank account towards OTM facility may fill the form.
- Other investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned.
- Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the ones as already existing in the folio, the details provided on the mandate will be updated in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
- Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to third party verification.
- Investors are deemed to have read and understood the terms and conditions of OTM Facility, SIP registration through OTM facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of DSP BlackRock Mutual Fund.

Instructions

- Where a onetime mandate is already registered in a folio for a bank account, the Unit Holder(s) will have to fill only the SIP Registration Form and there is no need of a separate cheque to be given along with the SIP Registration Form.
- Where the mandate form and the SIP registration form are submitted together, debits for the SIP may happen only on successful registration of the mandate by the Unit holder(s) bank. The Fund / AMC would present the SIP transactions or lumpsum purchase transactions without waiting for the confirmation of the successful registration from the Unit holder(s)' bank.
- The Fund will not take any liability for any mandate registration or SIP instalment not by investor's bank for whatsoever reason.
- If start date for SIP period is not specified, SIP will be registered to start anytime from a period after five days from the date of receipt of application based on the SIP date available / mentioned, subject to mandate being registered. If end date is not specified, SIP will be registered till December 2099 or end date of mandate, whichever is earlier.
- If any time during the SIP period, the onetime mandate is to be modified to reduce the validity period which is more than SIP end period registered through OTM, investor should first cancel the SIP and thereafter modify the OTM end period.
- Under the SIP Top-Up facility, the unitholders are offered facilities of i. Fixed Amount top up i.e. to increase the amount of the SIP Instalment by a fixed amount of the previous instalment at each specified pre-defined intervals, or ii. Percentage Top-up i.e. to increase the amount of the SIP Instalment by a specific percentage of the previous instalment at each specified pre-defined intervals. If investor fills in both Fixed Amount as well as Percentage Top-up, the AMC will consider Percentage Top-up only.
- The minimum amount of increase under SIP Fixed Amount Top-Up facility should be Rs. 500/- and in multiples of Re. 1 thereof. However, there is no such requirement of minimum amount of increase under SIP Percentage Top-Up facility
- SIP Top-Up frequency in case of investors availing Monthly SIP facility will be half yearly and yearly. SIP Top-Up frequency in case of investors availing Quarterly SIP facility will be yearly. In case the SIP Top-Up frequency is not indicated under Monthly SIP, it will be considered as yearly interval.
- For investors availing SIP Top-Up facility the maximum amount of SIP Instalment including SIP Top-Up will be limited to Rs. 5,00,000/- (Rupees Five Lakhs) or the limit of bank mandate authorisation, whichever is lesser, subject to the scheme specific transaction limits where applicable.
- In case of SIP Percentage Top-up, the percentage (%) specified by the investor should not be in decimals. If the investors specifies a percentage with decimals, the percentage will be rounded to the Next Highest multiple of one (01).
- In case of SIP Percentage Top-up, when the top up amount gets computed to derive SIP instalment, such instalment amount will be rounded off to the Next Highest multiple of Rs.10. For example, if the top-up instalment is computed as, Rs. 2071/- based on percentage, the instalment amount will be rounded to Rs. 2080/-
- For detailed terms and conditions on SIP, SIP Top-up, OTM facility, please visit our website www.dsblackrock.com and also refer to scheme related documents.