

# SIP TRANSACTION FORM WITHOUT FREE TERM COVER



**Wealth Management**  
Plant where your money grows

Please sign alongside in case the EUN is left blank/not provided.

Signature\*:

EUN No.

\*I hereby confirm that the EUN box has been intentionally left blank by me as this transaction is executed without any interaction or advice with/from Equitas SFB Employee.

## TRANSACTION TYPE : INVEST - SIP WITHOUT FREE TERM COVER

Scheme Name	Folio No. (If any)	Tenor & Frequency	SIP Debit* Date	Option	Amount
		<input type="radio"/> Perpetual/Monthly <input type="radio"/> 10 Years/Monthly <input checked="" type="radio"/> 5 Years/Monthly <input type="radio"/> 3 Years/Monthly	<input checked="" type="radio"/> 1 <input type="radio"/> 10 <input type="radio"/> 15	<input checked="" type="radio"/> Growth <input type="radio"/> Dividend <input type="radio"/> Dividend Reinvestment	₹ _____ (In figures)
		<input type="radio"/> Perpetual/Monthly <input type="radio"/> 10 Years/Monthly <input checked="" type="radio"/> 5 Years/Monthly <input type="radio"/> 3 Years/Monthly	<input checked="" type="radio"/> 1 <input type="radio"/> 10 <input type="radio"/> 15	<input checked="" type="radio"/> Growth <input type="radio"/> Dividend <input type="radio"/> Dividend Reinvestment	₹ _____ (In figures)
<input type="checkbox"/> DEFAULT IF NOT OPTED	<b>Grand Total</b>				₹ _____ (In Words)
					₹ _____ (In figures)

\*Please go through the respective AMC SIP dates before selecting the dates. In case the date differs from the above dates, please use net banking to invest in the particular scheme.

## TRANSACTION TYPE : REDEEM MUTUAL FUND / STOP SIP

Scheme Name	Folio No.	Action	Amounts / Units (For Redemption only)
		<input type="radio"/> Redemption <input type="radio"/> Stop SIP	₹ _____ / _____ Units / <input type="radio"/> All Units
		<input type="radio"/> Redemption <input type="radio"/> Stop SIP	₹ _____ / _____ Units / <input type="radio"/> All Units

## CUSTOMER AUTHORIZATION:

**RISK PROFILE\***  Very Conservative  Conservative  Moderate  Aggressive  Very Aggressive

I/We have decided to make an investment in the product having higher risk profile than the risk profile assigned to me under the risk profile assessment exercise undertaken by me with ESFB. I/We confirm that I/We have read and understood the SID/KIM in relation to the product and duly assessed the risks associated with the Product. I acknowledge that all the decisions made by me as regards the Products are made at my sole discretion and ESFB is not liable for any loss or damage that may arise out of or in connection with any investment(s) in the Product.

The NAV applicable for your instruction would depend on the type of fund and the time at which transaction is entered in the system. After taking into consideration the internal processing time, our cut-off time for processing the transaction in Non-Liquid Fund is 1400 hrs

I/We hereby authorise Equitas Small Finance Bank Ltd to execute the above instructions and any Wealth Management Fees/ transaction charges / taxes as applicable. For investments made in Systematic Investment Plans (SIPs), the Wealth Management Fees (if any) will be debited monthly from the linked account. This authorization will remain in force until terminated by my/our written notice sent to the Bank. I/We agree to the Investment Terms as amended from time to time and confirm the acceptance of the same before undertaking any investment transaction through the Bank. I/we understand the same and the features, risk associated with the schemes, fees, charges applicable to the scheme including exit loads (if any). I/ We am/are aware that the latest commission structure in the form of a Commission Disclosure is available on the Bank's website and I/we confirm having read the same. I/We accept that the Bank is not obliged to act on these instructions or hold, trade or sell or otherwise deal with any investments, if it determines in its absolute discretion that doing so would be contrary to its policies and procedures, any applicable law, regulation, industry code, license or registration or the like. In this case, the Bank has the right to require me/us to transfer these holdings out of the Bank immediately, without providing reason.

I/We agree Mutual Funds investments are subject to market risk. Equitas Small Finance Bank limited (ESFB) shall not be liable or responsible for any loss or shortfall resulting from the operations of the Mutual Funds. ESFB is acting in the capacity of the Distributor for mutual funds which has been opted for me/us. The contract of mutual fund is between the asset management company and the investor and not between ESFB and the investor. Participation by me/us is on a purely voluntary basis and there is no direct or in direct linkage between the provision of the banking services offered by ESFB and participation in the scheme. In the event I/We give direct instruction to the AMC or their agents, ESFB may not be held responsible in this regard for any reason whatsoever. I/ We have read and understood the Scheme Information Document/Key Information Memorandum of the Scheme(s) available at AMFI Links given here : <https://www.amfiindia.com/research-information/other-data/scheme-details>; <https://www.amfiindia.com/research-information/other-data/sai> to the scheme that I am/we are investing in. I/We apply for the units of the Fund(s) and agree to abide by the terms, conditions, rules and regulations of the scheme and other statutory requirements of SEBI / AMFI / Prevention of Money Laundering Act, 2002 and such other regulation as may be applicable from time to time. I/We confirm to have understood the investment objectives, investment pattern, and risk factors applicable to Plans/Options under the Scheme(s). I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulations or any other applicable laws enacted by the Government of India or any Statutory Authority. I herewith agree for Equitas Small Finance Bank Ltd / Asset Management Company to Credit/Debit my/our Saving / Current Account with the amount of this purchase/redemption.

I/We authorise the bank to use my/our Current Account & Savings Account details/ WMS Registration details including Nomination for the purpose of execution of this transaction. I am / We are also aware that I/We are at liberty to change or modify the nominee details under this service at any point in time.

Signature\*

Date\* :

Applicant Name\*

PAN No\*

\* Mandatory fields

For office Use Only : LEAD EMP CODE \_\_\_\_\_