MULTIPLE SIP REGISTRATION FORM

Registration Cum Mandate Form

Please read Product Labeling available on the front inside cover page of KIM and instructions before filling this form

Diviniti SIF
offered by ITI Mutual Fund

Application No. S

DISTRIBUTOR INFORMATION					FOR OFFICE USE ONLY	
Distributor Name & Code	Sub-Distributor Code	Internal Code for Sub-Broker/Employee	EUIN*	RIA Code	Registrar/Bank Serial No.	Date and Time of Receipt
ARN-	ARN-					

Please sign alongside in case the EUIN is left blank/not provided. EUIN Declaration: 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.
RIA Declaration: I/We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/NAV etc. in respect of my/our investments under Direct Plan of all Investment Strategy managed by you, to the above mentioned SEBI-Registered Investment Adviser/RIA.

First/Sole Unit Holder/ Guardian	Second Unit Holder/Guardian	Third Unit Holder/Guardian

1. SIP TYPE

◯ SIP with first installment through cheque ◯ SIP with first installment through OTM** ◯ SIP without first installment
** This facility is available only for investors whose OTM is already registered in the folio mentioned in the application form.

2. UNITHOLDER INFORMATION

Folio No. | | | | | | | | | | | | | | | | **Application No.** | | | | | | | | | | | | | | | |

Name of Sole/1st Holder _____ PAN No./PEKRN | | | | | | | | | | |

Name of 2nd Holder _____ PAN No./PEKRN | | | | | | | | | | |

Name of 3rd Holder _____ PAN No./PEKRN | | | | | | | | | | |

3. INITIAL INVESTMENT DETAILS

The Cheque / DD should be drawn in favour of **"Diviniti SIF"** dated and duly signed.

(Note: Payment initiated through Cheque/ DD, shall be considered as SIP first instalment and cheque amount should be equal to total SIP amount of all the investment strategy mentioned below.)

Cheque/DD No. | | | | | | Cheque/DD Date D D M M Y Y Y Y DD Charge ₹ | | | | | | | | Net Amount ₹ | | | | | | | |

Bank Name: _____ Branch: _____ City: _____

4. SIP DETAILS

Investment Strategy / Plan / Option	Frequency	SIP Date (DD)	Enrollment Period (MMYY)	SIP Amount
I. _____	◯ Daily ◯ Weekly ◯ Monthly	D D For weekly	From M M Y Y To M M Y Y	₹ _____ Amt. in Words _____
II. _____	◯ Daily ◯ Weekly ◯ Monthly	D D For weekly	From M M Y Y To M M Y Y	₹ _____ Amt. in Words _____
III. _____	◯ Daily ◯ Weekly ◯ Monthly	D D For weekly	From M M Y Y To M M Y Y	₹ _____ Amt. in Words _____
IV. _____	◯ Daily ◯ Weekly ◯ Monthly	D D For weekly	From M M Y Y To M M Y Y	₹ _____ Amt. in Words _____
V. _____	◯ Daily ◯ Weekly ◯ Monthly	D D For weekly	From M M Y Y To M M Y Y	₹ _____ Amt. in Words _____

OTM Ref. No. | | | | | | | | | | | | | | | | | | | | ◯ Use Existing One Time Debit Mandate *(if already registered in the Folio)*

* Daily SIP dates - All Business Days; Weekly SIP Day - Any day between Monday to Friday; Monthly SIP dates - Any day from 1st to 31st of the month ** Default SIP date will be 7th

Note: Enrollment periode should be less than or equal to 40 years.

5. UNIT HOLDING OPTION ◯ Demat Mode* ◯ Physical Mode (Default)

*Demat Account details are mandatory if the investor wishes to hold the units in Demat Mode.

NSDL DP Name _____ DP ID I N | | | | | | | | Beneficiary Account No. | | | | | | | | |

CDSL DP Name _____ Beneficiary Account No. | | | | | | | | | | | | | | | | |

*Investor opting to hold units in Demat Form, may provide a copy of the DP statement enable us to match Demat details as stated in the Application Form.

6. DECLARATION & SIGNATURE(S)

I/We would like to invest in above mentioned investment strategy subject to terms of the Statement of Additional Information (SAI), Investment Strategy Information Document (ISID), Key Information Memorandum (KIM) and subsequent amendments thereto. I/We have read, understood (before filling application form) and is/are bound by the details of the SAI, ISID & KIM including details relating to various services. By filling up this form I understand that the amount towards my lumpsum / systematic investment plan (SIP) transaction will be debited from bank account details provided in my One Time Bank Mandate Form. 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 investment strategy is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act / Regulations / Rules / Notifications /Directions or any other Applicable Laws enacted by the Government of India or any Statutory Authority. I accept and agree to be bound by the said Terms and Conditions including those excluding/ limiting the ITI Asset Management Ltd (ITI AMC) liability. I understand that the ITI AMC may, at its absolute discretion, discontinue any of the services completely or partially without any prior notice to me. I agree ITI AMC can debit from my folio for the service charges as applicable from time to time. 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 investment strategy of various Diviniti SIF from amongst which the investment strategy is being recommended to me/us. I hereby declare that the above information is given by the undersigned and particulars given by me/us are correct and complete. Further, I agree that the transaction charge (if applicable) shall be deducted from the subscription amount and the said charges shall be paid to the distributors.

◯ I confirm that I am resident of India. ◯ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External /Ordinary Account/FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/ our NRE/FCNR Account.

I/We, have invested in the investment strategy of your Diviniti SIF under Direct Plan. I/We hereby give you my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all investment strategy Managed by you, to the above mentioned Diviniti SIF Distributor / SEBI-Registered Investment Adviser. I hereby authorize the representatives of ITI AMC and its Associates to contact me through any mode of communication.

Date D D M M Y Y Y Y	Sole/First Unit Holder/Guardian	Second Unit Holder	Third Unit Holder
	-	-	-

TERMS AND CONDITIONS

1. Please refer ISID for minimum SIP investment amount under each Investment Strategy.
2. Please refer the Key Information Memorandum (KIM) and Investment Strategy Information Document (ISID) of the respective Investment Strategy for applicable NAV, risk factors, load (exit/entry) and other information on the respective Investment Strategy before investing.
3. Complete Application form and SIP Enrollment Form along with the first cheque should be submitted to the AMC/KFin Tech ISC's.
4. The Cheque / DD should be drawn in favour of "Diviniti SIF SUBSCRIPTION POOL A/C". Payment initiated through Cheque/ DD, shall be considered as SIP first installment and the cheque amount should be equal to total SIP amounts of all the Investment Strategy mentioned in the Form.
5. If Investor is not submitting the cheque for the first SIP Installment, then the investor should provide a photocopy of the cheque or cancelled cheque of the bank/branch for which NACH is to be registered.
6. If any chosen day falls on a non business day, the next business day will be considered as the transaction date. If the selected date does not occur in a particular month (e.g., 30th or 31st in February), the transaction will be executed on the first business day of the following month.
7. Incorrect/Incomplete applications are liable to be rejected.
8. ITI Asset Management Ltd. reserves the right to reject any application without assigning any reason thereof and the Trustee reserves the right to change/modify the terms and conditions of SIP.
9. NACH instructions will take a minimum of one month for registration with the bank and hence the first 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 ISID.
10. The mandate registration form will be submitted through National Automated Clearing House (NACH) and Banks participating in Direct Debit Facility. This facility is offered to investors having Bank accounts in select banks mentioned in the link under Product and Services tab The Banks http://www.npci.org.in/ in the list may be modified/updated/changed/removed at any time in future entirely at the discretion of National Payments Corporation of India without assigning any reasons or prior notice. Standing instructions for investors in such Banks will be discontinued. We will inform you on such discontinuation.
11. Incase investors bank account is available under NACH Facility; registration will be done through NACH platform.
12. Existing Unit holders in Investment Strategy of Diviniti SIF are required to submit only the SIP NACH Mandate. Existing unit holders should note that the unit holder's details & the mode of holding will be as per the existing account. New investors, who wish to enroll for SIP through NACH, should fill the Common Application Form & SIP NACH Mandate.
13. Initial cheque should be drawn on any bank, which is situated at & is a member of the Banker's Clearing House located at the place where the SIP application is submitted or payable at par & should participate in local MICR clearing. Please contact the nearest designated Investor Service Centre for the updated list. For outstation applications, the initial DD has to be payable at the nearest AMC locations. No outstation cheques will be accepted.
14. Payments will be accepted by NACH mode. For this purpose, investors/unit holders are required to give NACH Mandate Form to debit their bank accounts at periodic intervals & credit the subscription proceeds to Diviniti SIF Bank Account.
15. Returned/Dishonored cheque/NACH Rejects will not be presented again for collection. If the 1st installment cheque is dishonored, the SIP processing/ registration will be rejected.
16. The SIP Enrollment will be discontinued in cases where three consecutive SIP installments are not honored or the bank account is closed and no request for change in bank account has been submitted.
17. If investor has not provided the SIP frequency/period/date, the default SIP frequency would be Monthly & the SIP installments would be the minimum number of installments of the respective Investment Strategy as specified in the ISID. The default date will be considered as 7th of the month for Monthly option.
18. If an Existing investor wants to enroll in another Investment Strategy & continue for the existing folio, then the investor has to submit a duly filled & signed SIP NACH Mandate along with the first cheque (if investment is in the new Investment Strategy).
19. You can choose to discontinue this facility by giving 30 Calendar days written notice to any of AMC/Registrar Investor Service centers.
20. Request for change in bank mandate to be submitted atleast 30 Calendar days before the due date of next SIP installment.
21. The bank account provided for NACH (Debit) should be in the list of banks participating in NACH.
22. MICR code or IFSC code should be mandatory filled on NACH mandate, MICR code starting and/or ending with 000 are not valid for NACH.
23. The investor agrees to abide by the terms and conditions of NACH facility of NPCI as applicable at the time of investment and as may be modified from time to time.
24. 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 ISID. 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.
25. Investors will not hold ITI Asset Management Ltd., 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 due to the local holidays or any other reason.
26. ITI Asset Management Ltd. reserves the right to reject any application without assigning any reason thereof.
27. Incorrect, incomplete or ambiguous forms will not be accepted and will be returned to the investor within 10 business days via normal post.
28. To avail of SIP in separate Investment Strategy via NACH facility, an investor will have to fill a separate form for each Investment Strategy. A single form cannot be used for different Investment Strategy simultaneously.
29. As per Prevention of Money Laundering Act 2002, it is mandatory for all investors to be KYC compliant. For more details please refer point on "Instructions to Investor" for Filling up the Application Form.
30. **Employee Unique Identification Number (EUIN):**

    SEBI has made it compulsory for every employee/relationship manager/sales person of the distributor of Diviniti SIF products to quote the EUIN obtained by him/her from AMFI in the Application Form. EUIN, particularly in advisory transactions, would assist in addressing any instance of mis-selling even if the employee/relationship manager/sales person later leaves the employment of the distributor. Individual ARN holders including senior citizens distributing.

    Diviniti SIF products are also required to obtain and quote EUIN in the Application Form. Hence, if your investments are routed through a distributor please ensure that the EUIN is correctly filled up in the Application Form. However, if your distributor has not given you any advice pertaining to the investment, the EUIN box may be left blank. In this case, you are required to provide a duly signed declaration to this effect. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column separately provided in addition to the current practice of affixing the internal code issued by the main ARN holder and the EUIN of the Sales Person (if any) in the EUIN space.
31. As per NPCI circular NPCI/ NACH/OC No.012/2023-24 dated December 29, 2023, mandate is to be issued for a maximum duration of 40 years from the date of issuance of mandate.

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ONE TIME BANK MANDATE

(NACH/OTM/Direct Debt Mandate Form)

UMRN (FOR OFFICE USE ONLY) Date (DD MM YYYY)

Utility Code ☑ Create ☒ Modify ☒ Cancel

Sponsor Bank Code (For Office Use Only) I/We here by authorize **DIVINITI SIF**

To debit (tick ✓) SB / CA / CC / SB-NRE / SB-NRO / Other Bank a/c number

With Bank (Name of the Customer Bank) IFSC Or MICR

An amount of Rupees (Amount in Words) ₹

DEBIT TYPE ☒ Fixed Amount ☑ Maximum Amoount FREQUENCY: ☒ Daily ☒ Weekly ☒ BI-Monthly ☒ Monthly ☒ Quarterly ☒ Half-Yearly ☒ Annually ☑ As & when presented

Reference 1 (PAN / FOLIO Number) Reference 2 (INVESTMENT STRATEGY / DIVINITI SIF)

Note: Maximum period of validity of this mandate is 40 years only.
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.

1. I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per the latest schedule of charges of the bank. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. 3. 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. 4. I/We understand and accept that in case transactions initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law.(including Negotiable Instrument Act).

PERIOD
From: (DD MM YYYY)
To: (DD MM YYYY)

Signature Primary Account holder | Signature of Account holder | Signature of Account holder

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

This is to confirm that the declaration has been carefully read understood and made by me/ us. I am authorizing the User entity/ Corporate to debit my account, based on the instructions as agreed and signed by me.
I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancelation / amendment request to the User entity / corporate or the bank where I have authorized the debit.

THIS SECTION IS INTENTIONALLY KEPT BLANK

*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 Diviniti SIF, their representatives, service providers, participating banks & other user institutions responsible. I/We have read the Terms & Conditions and agree to discharge the responsibility expected of me/us as a participant/s under the Investment Strategy. 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 hereby authorize the representatives of ITI Asset Management Limited and its Associates to contact me through any mode of communication.

Authorisation to Bank: I/We wish to inform you that I/we have registered with Diviniti SIF for NACH / Direct Debit through their authorised Service Provider(s) and representative for my/our payment to the above mentioned beneficiary by debit to my/our above mentioned bank account. For this purpose I/We hereby approve to raise a debit to my/our above mentioned account with your branch. I/We hereby authorize you to honor all such requests received through to debit my/our account with the amount requested, for due remittance of the proceeds to the beneficiary.

FOR OFFICE USE ONLY (Not to be filled in by Investor)	
Affix Barcode	**Date and Time Stamp No.**

INSTRUCTIONS TO FILL THE NACH DEBIT MANDATE FORM

1. 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.
2. 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.
3. Investors are deemed to have read and understood the terms and conditions of NACH Facility, SIP registration through NACH facility, the Investmnet Strategy Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addendum issued from time to time of the respective Investmnet strategy(s) of Diviniti SIF.
4. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format
5. Please mention the amount in figures and words.
6. Please fill all the required details in the Debit Mandate Form for NACH. The sole/first holder must be one of the holders in the bank account.
7. The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
8. The 9 digit MICR and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.

Toll Free Number:	Non Toll Free Number:	Email:	Website:
1800-266-9603	022-66214999	contact.sif@itiorg.com	sif.itiamc.com

Investments in Specialized Investment Fund involves relatively higher risk, including potential loss of capital, liquidity risk, and market volatility. Please read all investment strategy-related documents carefully before making the investment decision.