## Franklin Templeton Mutual Fund

## Systematic Investment Plan through ECS/Direct Debit (See instructions overleaf)



The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder. Advisor Name & Code\* ARN-9686 Sub Advisor Name & Code\*

		Scheme:	Frequency:   Monthly		SIP Amount (Rs.)
Franklin Templeton Investor Service Centre Signature & Stamp			Account No.		Investor's Name Customer Folio
	ed in by investor )	Acknowledgement Slip for SIP through ECS/Direct Debit (To be filled in by investor )	Acknowledgement Slip f	-	
	3rd Holder ————			er	Bank Account Number
	1st Holder ————————————————————————————————————	my/our investment in Franklin Templeton Mutual Fund shall be made from my/our below mentioned bank account number with your bank. I/We authorize Franklin Templeton Asset Management (India) Pvt. Ltd. (Investment Manager of Franklin Templeton Mutual Fund) acting through their service providers and representative carrying this ECS mandate form to get it verified and executed. Mandate verification charges if any, may be charged to my/our account	my/our investment in Franklin Templeton Mutual Fund shall be made from my/our belo bank. I/We authorize Franklin Templeton Asset Management (India) Pvt. Ltd. (Invest Fund) acting through their service providers and representative carrying this ECS m Mandate verification charges if any, may be charged to my/our account	Franklin Templeton Mu Franklin Templeton As 1 their service provider: charges if any, may be ch	my/our investment in bank. I/We authorize Fund) acting through Mandate verification o
of Bank Account holders	Signatures of Bank A	Authorisation of the Bank Account Holders This is to inform that I/We have registered for RBI's Electronic Clearing Service (Debit Clearing) and that mv/our payment towards	Iders or RBI's Electronic Clearing Service (Debit	Authorisation of the Bank Account Holders This is to inform that I/We have registered for RBI	Authorisation of the This is to inform that
Bank Account No.	m Bank (Bank Stamp and Date)	Signature of Authorised Official from Bank (Bank Stamp and Date)	as per our records	DANK ACCOUNT AND ITS MILCK CODE ARE COFFECT AS PET OUT FECOTOS	bank account and its
			r and the details of	Certified that the signature of account holder and the details of	Certified that the sign
3e investment instalments together with this allotted.	entation or if the existing aggregate may be made for the units already	Date Signature of the Investor(s) 1 2	Signature of the Investor(s)  1  Signature of the Investor(s)  1	Signe Micro SIP application ents exceeds Rs.50,000/-	DateS  Disclaimer: In case the Micro SIP applicati proposed SIP instalments exceeds Rs.50,00  Banker's Arrestation (For hank use only)
* Applicable to Non Resident Investors	mare tot the times affeatly another.	OF AND VIEW OF THE CHESTING TO SERVE TO FAIR TO FAIR TO SERVE TO S	колором) — на учај на пистиото од гедованот пи	A OTT HERMHENTED PARACES T	codond cm mm consists
which the Scheme is being recommended to me/us eeding Rs.50,000/- in a year. Further, I/we understand and tration or if the existing aggregate investment installments	es of various Mutual Funds from amongst P will result in aggregate investments exce et or not supported by adequate documen rade for the unit's already allotted.	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 [JWe confirm that I/we do not have any other existing Systematic Investment Plan (SIP) with Franklin Templeton Mutual Fund which together with this proposed SIP will result in aggregate investments exceeding 8s.50,000/- in a year. Further, I/we understand and accept that in case Franklin Templeton Mutual Fund processes the first Micro SIP installment and the application is subsequently found to be incomplete in any respect or not specificate documentation or if the existing aggregate investment installments accept that in case of SIP installments are documentation or if the existing aggregate investment installments together with this proceed SIP installment are documentation or if the existing aggregate investment installments accept that in case of the commissions of the commission of the commission of the existing aggregate investment installments accept that in case of the commission of the commission of the commission of the existing aggregate investment installments accept that it is a commission of the c	issions (in the form of trail commission or any other systematic Investment Plan (SIP) with Franklin Torcesses the first Micro SIP installment and the app Res GOOZOL-in a very the Micro SIP resistration will	losed to me/us all the commi onot have any other existing on Templeton Mutual Fund produced to Templeton Fund produced to Templeton Fund produ	The ARN holder has discl I/We confirm that I/we do accept that in case Franklin
time to time and that I/We hereby confirm that the funds	nt. nt. ss Securities Act of 1933, as amended from	representatives, appointed so the funds in product of the fundamental fundamental product of the fundamental product of the fundamental fundamental fundamental product of the fundamental fundamental fundamental product of the fundamental fu	in responsible. It we tuttile infectione that any chain at I/we have not received nor been induced by any 1 at I/we have not received nor been induced by any 1 an National / Origin but not United States persons hannels or from my/our NnE/NR	set vice providers of the batt gally belong to me/us and tha we are Non-residents of India through approved banking ch	representatives, appointed that the funds invested leg  *I/We confirm that I am/v  are remitted from abroad i
ereby apply to the Trustees of Franklin Templeton Mutual SCNDirect Debit as on the date of this investment. In not hold Franklin Templeton Investments, its authorised we terms and conditions mentioned overled I (We confirm	m and the Addenda issued till date, I/we he lations of the Fund and the SIP through E implete or incorrect information, I/We will mediately I/We have read and agreed to the	Having read and understood the contents of the Statement of Additional Information, Scheme Information Document of the Fund, the Key Information Memorandum and the Addenda issued till date, I/we hereby apply to the Trustees of Franklin Templeton Mutual Fund for registration of Systematic Investment Plan (SIP) through ECS/Direct Debit as indicated above, and agree to abide by the terms, conditions, rules and regulations of the Fund and the SIP through ECS/Direct Debit as on the date of this investment. If We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or wrongly effected or not effected at all for reasons of incomplete or incorrect information, I/We will not hold Franklin Templeton Investments, its authorised transfer amounted service provides or the Plank responsible I/We for the transaction of the Plank responsible I/We for the provided that the Plank responsible I/We for the Plank responsible I/We for the provided that the Plank responsible I/We for the Plank responsi	nent of Additional Information, Scheme Informatio SIP) through ECS / Direct Debit as indicated above e correct and complete. If the transaction is detalyable k responsible   I/We further underske that any char	od the contents of the Staten ystematic Investment Plan (S he particulars given above are service providers or the Ban	Having read and understoon for registration of Sy I/We hereby declare that the representatives announced representatives.
_		t is to be effected. y)	Please provide the MICR Code of the bank branch from where the ECS/Direct Debit is to be effected.  ☐ Please change my/our bank account ECS / Direct debit (change in bank account only)  Account Holder Name as in Bank Account	Please provide the MICR Code of the bank  ☐ Please change my/our bank account ECS / Account Holder Name as in Bank Account	Please provide the M  Please change my/c  Account Holder Nan
	3/NRO(please ✔)	Account Type $\square$ Savings $\square$ Current $\square$ CC/OD $\square$ NRE/NRO(please $\checkmark$ )	Account		9 Digit MICR Code
	3rd Holder				Account Number
	2nd Holder				City
	10010001				Branch Name
	1st Holder				Bank Name
Account holders	Signatures of Bank Account holders				Bank Details
	Document Identification No	uthority	Field Issuing Authority	ent	Identification document
		Document proofs for Micro SIP (Please provide any one of the name of identification document as mentioned in the instructions)	provide any one of the name of identificati	for Micro SIP (Please p	Document proofs f
que □ Copy of cheque	□ Blank cancelled cheque	payments.	listed below by ECS (Electronic Clearing Services) / Direct Debit for collection of SIP payments.	Electronic Clearing Ser	listed below by ECS (
Mandatory Enclosures: (If 1st installment is not by cheque)		(Should be from the Bank Account from which ECS/Direct Debit is to be effected)   (for minimum period and installments, please refer point no. 12 overleaf). I/We authorize Franklin Templeton Mutual Fund or their authorized service providers to Debit my/our account	hich ECS/Direct Debit is to be effected) Franklin Templeton Mutual Fund or their au	Bank Account from wl r:leaf). I/We authorize F	(Should be from the refer point no. 12 ove
	у	To	n m y y y y	From Im	ECS Period F
;	-	reque INO.	m m y y y y	d d	(If Cheque is given)
□ 7th	☐ Quarterly (please tick as applicable)	Cheane No		_	First SID Chemie Date
SIP Date 1st 20th	Frequency			installment)	SIP Amount Rs. (per installment)
		Option			Scheme
		Direct Debit)	SIP Details (Please note that a minimum of 30 days is required to set up the ECS/Direct Debit)	note that a minimum	SIP Details (Please
(For office use only)		Account No.	Existing Unitholders' Folio Number L  New Investors (Please also complete and submit a Common Application Form)	Folio Number Lead sub	Existing Unitholders' Folio Number New Investors (Please also complete
		, , , , , , , , , , , , , , , , , , , ,		ccount holder	Name of Sole/First Account holder
		Micro SIP ☐ (For Micro SIP, Please provide required proof /documentation)	Micro SIP □ (For Micro SIP, Pleas	Normal SIP	Application for Normal SI

		□ Quarterly	
	Scheme:	Frequency:  Monthly	Amount (Rs.)
Service Centre Signature & Sta		Account No.	omer Folio
Franklin Templeton Investo			stor's Name