



ONE TIME MANDATE FORM

1st Floor, Apeejay House, 3 Dinshaw Vachha Road, Backbay
Reclamation, Churchgate, Mumbai - 400020 | www.QuantumAMC.com



UMRN: Date:

Utility Code: (Office use only) Create: Modify: Cancel:

Sponsor Bank Code: (Office use only) I/We authorize: QUANTUM MUTUAL FUND

To debit (Tick) SB/ CA/ CC/ SB-NRE / SB-NRO/ Other Bank A/C number:

With Bank: IFSC/ MICR:

an amount of Rupees (in words) ₹

Debit Type: Fixed Amount Maximum Amount Frequency: Mthly Qtly H-yrly Yrly As & when presented

Reference 1: Reference 2:

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. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account, based on the instruction as agreed and signed by me. 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.

From Maximum period of validity of this mandate is 40 years only

To

Phone No.

Signature of 1st Account Holder Signature of 2nd Account Holder Signature of 3rd Account Holder
1 Name as in bank records 2 Name as in bank records 3 Name as in bank records

Instructions to fill Mandate

- All fields in the form are mandatory to be filled
- 1. Date in DD/MM/YYYY format.
- 2. Tick on box to select type of action to be initiated.
- 3. Tick on box to select type of account to be affected.
- 4. Customer's bank account number, left padded with zeroes. (Maximum length - 20 Alpha Numeric Characters)
- 5. Name of bank and branch.
- 6. IFSC / MICR code of customer bank. (Maximum length - 11 Alpha Numeric Characters)
- 7. Amount payable for service or maximum amount per transaction that needs to be processed, in words.
- 8. Amount in figures, similar to the amount mentioned in words as per point 7 above.
- 9. Tick on box to select frequency of transaction.
- 10. Validity of mandate with dates in DD/MM/YYYY format.
- 11. Names of customer/s and signatures as well as seal of company (where required). (Maximum length of Name - 40 Alpha Numeric Characters)
- 12. Undertaking by customer.
- 13. 10 digit mobile number of customer. Mail ID of customer.
- 14. You can Tick on 'Until Cancelled' incase you do not wish to mention the 'To Date'.





SYSTEMATIC INVESTMENT PLAN AUTO DEBIT MANDATE FORM

1st Floor, Apeejay House, 3 Dinshaw Vachha Road, Backbay
Reclamation, Churchgate, Mumbai - 400020 | www.QuantumAMC.com

Please fill this form in ENGLISH in BLACK/DARK COLOURED INK in CAPITAL LETTERS.

(New Investors to submit duly filled and signed Common Application Form)

Distributor ARN	Sub Distributor ARN	Internal sub Code	RIA Code	EJIN	Date, Time & Stamp
ARN-146822					

"I/We, have invested in the scheme(s) of Quantum Mutual Fund under Direct Plan. I/We hereby give 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 schemes of Quantum Mutual Fund, to the above mentioned SEBI Registered Investment Adviser."

<input type="checkbox"/> EJIN Declaration	I/We hereby confirm that the EJIN 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.
--	---

1. INVESTOR AND INVESTMENT DETAILS Please ✓ wherever applicable.

Sole/First Investor Name (as appearing in ID proof)
 PAN No. Folio No. (For Existing Investor)

2. INVESTMENT DETAILS/ Payment Details (Please ✓) Choice of Scheme/Option/Facility

Separate cheque / demand draft must be issued for each investment, drawn in favour of respective scheme name. Please write appropriate scheme name as well as the Plan / Option /Sub Option.

Sr. No.	Scheme Name	Plan	Option	Amount Invested (₹)	Frequency Details (Select any one frequency)
1.		<input type="checkbox"/> Direct <input type="checkbox"/> Regular	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW (Payout) <input type="checkbox"/> IDCW (Reinvestment) #IDCW frequency _____		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly _____ (Any week - Monday to Friday) <input type="checkbox"/> Fortnightly _____ (Any day of alternative Week) <input type="checkbox"/> Monthly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Quarterly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2.		<input type="checkbox"/> Direct <input type="checkbox"/> Regular	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW (Payout) <input type="checkbox"/> IDCW (Reinvestment) #IDCW frequency _____		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly _____ (Any Day - Monday to Friday) <input type="checkbox"/> Fortnightly _____ (Any day of alternative Week) <input type="checkbox"/> Monthly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Quarterly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3.		<input type="checkbox"/> Direct <input type="checkbox"/> Regular	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW (Payout) <input type="checkbox"/> IDCW (Reinvestment) #IDCW frequency _____		<input type="checkbox"/> Daily <input type="checkbox"/> Weekly _____ (Any Day - Monday to Friday) <input type="checkbox"/> Fortnightly _____ (Any day of alternative Week) <input type="checkbox"/> Monthly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> Quarterly <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

*Applicable for Quantum Liquid Fund & Quantum Dynamic Bond Fund.

3. Payment Details

Sr. No.	Scheme Name	Cheque Amount (₹)	Cheque / DDNo.	Bank Name	Account Number
1.					
2.					
3.					

4. SIP PERIOD

From To OR No. of installments _____

5. DECLARATION

I/We hereby, declare that the particulars given above are correct and express my willingness to make payments referred above through participation in National Automated Clearing House (NACH)/Auto Debit. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information I/We would not hold Quantum Mutual Fund/Quantum Asset Management Company Pvt. Ltd responsible. I/We will also inform Quantum Mutual Fund about any changes in my bank account. I/We have read and agreed to the terms and conditions mentioned overleaf. This is to inform that I/We have registered for Auto Debit Facility and that my payment towards my investment in Quantum Mutual Fund shall be made from my/our bank account registered with Quantum Mutual Fund. I/We authorize Quantum Mutual Fund/Quantum Asset Management Company Pvt Ltd/representative of Quantum Asset Management Company Pvt Ltd carrying this Form to debit my bank account as per instructions given above.

First Account Holders Signature	edded	Third Account Holders Signature
---------------------------------	-------	---------------------------------



Systematic Investment Plan (SIP)

This mandate registration form will be submitted through National Automated Clearing House (NACH).

1. This SIP facility is offered to investors having bank accounts in select banks mentioned in the link <http://www.npci.org.in/>. The banks 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.
2. Investor/Unitholder(s) should submit original Cancelled Cheque (or a copy) along with mandate form 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.
3. The Unitholder(s) cheque/bank account details are subject to third party verification.
4. SIP is offered on daily, weekly, fortnight, monthly and quarterly frequency.
5. Investor/ Unit holders can opt to invest on any day in daily frequency any week in weekly and fortnight frequency (for fortnight alternative week transaction will be processed example If investor selected as Monday the SIP will be processed alternative Monday) and any day in monthly and quarterly frequency.
6. In case the end date is not specified, the SIP will be registered for **40 years**.
7. Minimum installments and frequency wise minimum amount can be referred below table.

Systematic Investment Plan (SIP)			
Frequency of SIP	Eligible dates for effect	Minimum amount per Instalment	Minimum term/duration applicable
Daily	All Business days	₹100 and in multiple of ₹1 thereafter (for ELSS minimum ₹500 and multiple of ₹500)	30 Business days
Weekly	Any day of the week	₹500 and in multiple of ₹1 thereafter (for ELSS multiple of ₹500)	10 instalments
Fortnightly	Any day of alternative Week	₹500 and in multiple of ₹1 thereafter (for ELSS multiple of ₹500)	10 instalments
Monthly	Any date (except 29, 30, 31st)	₹500 and in multiple of ₹1 thereafter (for ELSS multiple of ₹500)	12 instalments
Quarterly	Any date (Any date (except 29, 30, 31st)	₹500 and in multiple of ₹1 thereafter (for ELSS multiple of ₹500)	12 instalments

8. In case the frequency is not specified / ambiguity, in the application/enrolment form, it will be deemed as an application for monthly frequency and will be processed accordingly. In case the SIP date is not specified or in case of ambiguity for monthly or quarterly frequency, the SIP transaction will be processed as of 10th of every month/first month of every quarter default day for weekly/ fortnight will be Tuesday.
9. The units will be allotted to the investor at applicable NAV of the respective business day on which the investment is sought to be made as per the applicable cut-off timing subject to the funds available for utilization.
10. The request for enrollment of SIP in the prescribed form should be received at any official point of acceptance / Investor service center at least 21 Calendar Days in advance before the execution / commencement date.
11. The request for discontinuation of SIP in the prescribed form should be received at any official point of acceptance / Investor Service Center at least 10 Calendar days in advance before the execution / commencement date.
12. SIP enrolment automatically terminated in below scenario:
 - a. Two for quarterly frequency and three for other than quarterly frequency consecutive payment instructions on submitted by Unit holder is not honored by banker.
 - b. Upon receipt of intimation of death of the Unit holder/ 1st Unit holder.
 - c. As a result of a stop payment instruction issued by the investor/unitholder.
 - d. Bank account closed by investor.
13. Quantum Mutual Fund will not be liable for any transaction failures due to rejection by the investor's bank/branch.
14. The investor agrees to abide by the terms and conditions of NACH facility of NPCI.
15. Investor will not hold Quantum Mutual Fund and its service providers responsible if the transaction is delayed or not effected by the Investor's Bank or if debited in advance or after the specific date due to various reasons or for any bank charges debited by his banker in his account towards NACH Registration/Cancellation/Rejections.
16. Investors are required to ensure adequate funds in their bank account on opted date. Quantum Mutual Fund will endeavor to debit the investor bank account on opted date, however if there is any delay all such transactions are debited subsequently. Quantum Mutual Fund/Sponsor Bank/NPCI are not liable for the bank charges, if any debited from investor's bank account by the destination bank, on account of payment through NACH.
17. If any chosen day/date falls on a non-business day, the next business day/date will be considered as the transaction date.
18. In case of investments in the name of a minor, no new transactions / standing instructions / SIP / STP / SWP or cancellation of such requests will be allowed by the guardian from the date of minor attaining majority till instruction from the major is received by the AMC/Mutual Fund along with the prescribed documents for change of account status from minor to major.