

MULTIPLE BANK ACCOUNTS REGISTRATION FORM

Please strike off the unused sections to avoid unauthorised use. Use separate forms for different folios.

Folio No. (For Existing Unit Holders) _____	OR Application No (for New Unit Holders) _____	Permanent Account Number (PAN) <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>								
Name of Sole / First Unit Holder _____										

A - ADDITION OF BANK ACCOUNTS

Please register my/our following bank accounts for all investments in my/our folio. I/we understand that I/we can choose to receive payment proceeds in any of these accounts, by making a specific request in my/our redemption request. I/We understand that the bank accounts listed below shall be taken up for registration in my/our folio in the order given below and the same shall be registered only if there is a scope to register additional bank accounts in the folio subject to a maximum of five in the case of individuals and ten in the case of non individuals.

For each Bank Account, Investors should produce original for verification or submit originals of the documents mentioned below.

Account No.										
Bank Name										
Account Type	Tick(✓) <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Other _____ Please Specify									
City										
MICR Code^										
IFSC Code^^										
Document attached (Any one) <input type="checkbox"/> Cancelled cheque with name pre-printed <input type="checkbox"/> Bank Statement <input type="checkbox"/> Pass Book <input type="checkbox"/> Bank Certificate										

Account No.										
Bank Name										
Account Type	Tick(✓) <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Other _____ Please Specify									
City										
MICR Code^										
IFSC Code^^										
Document attached (Any one) <input type="checkbox"/> Cancelled cheque with name pre-printed <input type="checkbox"/> Bank Statement <input type="checkbox"/> Pass Book <input type="checkbox"/> Bank Certificate										

Account No.										
Bank Name										
Account Type	Tick(✓) <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Other _____ Please Specify									
City										
MICR Code^										
IFSC Code^^										
Document attached (Any one) <input type="checkbox"/> Cancelled cheque with name pre-printed <input type="checkbox"/> Bank Statement <input type="checkbox"/> Pass Book <input type="checkbox"/> Bank Certificate										

Account No.										
Bank Name										
Account Type	Tick(✓) <input type="checkbox"/> Saving <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Other _____ Please Specify									
City										
MICR Code^										
IFSC Code^^										
Document attached (Any one) <input type="checkbox"/> Cancelled cheque with name pre-printed <input type="checkbox"/> Bank Statement <input type="checkbox"/> Pass Book <input type="checkbox"/> Bank Certificate										

B - DEFAULT BANK ACCOUNT

From among the bank accounts registered with you or mentioned above, please register the following bank account as a Default Bank Account into which future redemption and/or dividend proceeds, if any of the above mentioned folio will be paid:

Bank Account No.										
Bank Name										

Declarations and Signatures

I / We have read and understood the terms and conditions of bank accounts registration and agree to abide by the same. I / We understand that my / our request will be executed only if it is duly filled with all required details and is duly signed as per the mode of holding and necessary documents are attached as applicable, failing which the request will be rejected. I / We shall not hold AIG Global Asset Management Company India Private Limited or 'AIG AMC' and the Registrar and other service providers liable for any loss due to delay or request not being executed due to incomplete / incorrect information / documentation.

SIGNATURES (To be signed as per mode of holding. In case of non-Individual Unit holders, to be signed by AUTHORISED SIGNATORIES)		
Sole / First Applicant / Unit holder	Second Applicant / Unit holder	Third Applicant / Unit holder

C - BANK ACCOUNT DELETION FORM

Folio No. (For Existing Unit Holders) _____ Name of Sole / First Unit Holder _____	Permanent Account Number (PAN) <table border="1" style="width:100%; height: 40px; border-collapse: collapse;"> <tr> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> <td style="width:12.5%;"></td> </tr> </table>								

Please delete the following Bank accounts as registered accounts for my/our above folio:

Bank Account No.	
Bank Name	
Bank Account No.	
Bank Name	
Bank Account No.	
Bank Name	
Bank Account No.	
Bank Name	

Deletion of a default bank account is not permitted unless the investor mentions another registered bank account as a default account in Part B of this Form.

Declarations and Signatures
<p>I / We have read and understood the terms and conditions of bank accounts registration and agree to abide by the same. I / We understand that my / our request will be executed only if it is duly filled with all required details and is duly signed as per the mode of holding and necessary documents are attached as applicable, failing which the request will be rejected. I / We shall not hold AIG Global Asset Management Company India Private Limited or 'AIG AMC' and the Registrar and other service providers liable for any loss due to delay or request not being executed due to incomplete / incorrect information / documentation.</p>

SIGNATURES (To be signed as per mode of holding. In case of non-Individual Unit holders, to be signed by AUTHORISED SIGNATORIES)		
Sole / First Applicant / Unit holder	Second Applicant / Unit holder	Third Applicant / Unit holder

Instructions and Terms and Conditions

1. This facility allows a unit holder to register multiple bank account details for all investments held in the specified folio (existing or new). Individuals/HuF can register upto 5 different bank accounts for a folio by using this form. Non-individuals can register upto 10 different bank accounts for a folio. For registering more than 5 accounts, please use extra copies of this form.
2. Please enclose a cancelled cheque leaf for each of such banks accounts. This will help in verification of the account details and register them accurately. The application will be processed only for such accounts for which cancelled cheque leaf is provided. Accounts not matching with such cheque leaf thereof will not be registered.
3. If the bank account number on the cheque leaf is handwritten or investor name is not printed on the face of the cheque, bank account statement or pass book giving the name, address and the account number should be enclosed. If photocopies are submitted, investors must produce original for verification.
4. Bank account registration/deletion request will be accepted and processed only if all the details are correctly filled and the necessary documents are submitted. The request is liable to be rejected if any information is missing or incorrectly filled or if there is deficiency in the documents submitted.
5. The first/sole unit holder in the folio should be one of the holders of the bank account being registered.
6. The investors can change the default bank account by submitting this form. In case multiple bank accounts are opted for registration as default bank account, the mutual fund retains the right to register any one of them as the default bank account.
7. A written confirmation of registration of the additional bank account details will be dispatched to you within 10 calendar days of receipt of such request.
8. If any of the registered bank accounts are closed/ altered, please intimate the AMC in writing of such change with an instruction to delete/alter it from our records.
9. The Bank Account chosen as the primary/default bank account will be used for all Redemption payouts/ Dividend payouts. At anytime, investor can instruct the AMC to change the default bank account by choosing one of the additional accounts already registered with the AMC.
10. If request for redemption received together with a change of bank account or before verification and validation of the new bank account, the redemption request would be processed to the currently registered default (old) bank account.
11. If in a folio, purchase investments are vide SB or NRO bank account, the bank account types for redemption can be SB or NRO only. If the purchase investments are made vide NRE account(s), the bank accounts types for redemption can be SB/ NRO/ NRE.
12. The registered bank accounts will also be used to identify the pay-in proceeds. Hence, unit holder(s) are advised to register their various bank accounts in advance using this facility and ensure that payments for ongoing purchase transactions are from any of the registered bank accounts only, to avoid fraudulent transactions and potential rejections due to mismatch of pay-in bank details with the accounts registered in the folio.
13. This form can be submitted along with the Purchase/Subscription application or as a standalone request for addition/deletion/default bank mandate details.
14. Kindly submit the duly filled and signed form at the nearest AMC/CAMS Investor Service Centers.

REGISTERED OFFICE ADDRESS
604, 6th Floor, Peninsula Tower, Peninsula Corporate Park, G.K. Marg, Lower Parel, Mumbai 400 013. Tel. No. : (91 22) 4093 0000 Fax No. : (91 22) 4093 0077

Call <hr style="width: 80%; margin: 0 auto;"/> 1800-200-3444	Email <hr style="width: 80%; margin: 0 auto;"/> investorcare@aig.com	Website <hr style="width: 80%; margin: 0 auto;"/> www.aiginvestments.co.in
---	---	---