SYSTEMATIC INVESTMENT PLAN (SIP) APPLICATION FORM

(Please read the instructions before investing)

Use this Form for SIP investment. If you wish to make payment through Auto Debit ECS / Standing Instruction you also need to fill separate Instruction Form for the same.

PRUDENTIAL ICICI MUTUAL FUND

Making your money work as hard as you do

Broker Code	Sub-broker Code	Date & Time of Receipt	Serial Number
ARN-3852			

Application No.

1 FOR EXISTING UNITHOLDERS

If you are making a purchase in an existing folio, please mention the folio number in the space provided and proceeds to Step 3. *Please note that the applicable details and mode of holding will be as per the existing folio.*

Folio No. ____ / ____

2 ABOUT YOU

Date: _____

Name of First Applicant

Mr. Ms. M/s.

Date of Birth (Mandatory) D D M M Y Y Y Y

Name of Guardian (in case of minor) / **Contact Person** (In case of Institutional Investors)

Mr. Ms.

Status [Please tick (✓)]

- ☐ Resident Individual
- ☐ Trust
- ☐ HUF
- ☐ Bank/FI
- ☐ Company
- ☐ AOP/BoI
- ☐ Partnership
- ☐ Club/Society
- ☐ Sole - Proprietorship
- ☐ NRI/FII/PIO
- ☐ Minor
- ☐ Others *(Please specify)* _____

Designation of the Contact Person (In case of Institutional Investors)

Mailing Address (Please provide full address)

City PIN

State Country

Communication

Tel. (Res.) (Off.) Mob

E-Mail

Overseas Address (in case of NRIs/FIIs)

City PIN

State Country

Name of Second Applicant ☐ Resident Individual ☐ Non-Resident Individual (Please tick (✓) the relevant box)

Mr. Ms.

Name of Third Applicant ☐ Resident Individual ☐ Non-Resident Individual (Please tick (✓) the relevant box)

Mr. Ms.

Mode of holding [Please tick (✓)]

- ☐ Single
- ☐ Anyone or Survivor
- ☐ Joint

Occupation [Please tick (✓)]

- ☐ Professional
- ☐ Housewife
- ☐ Business
- ☐ Service
- ☐ Retired
- ☐ Student
- ☐ Others *(Please specify)* _____

MANDATORY DETAILS

Permanent Account Number (PAN) [Please refer to instruction no.II(b)(4)]

1st Applicant		Guardian	
2nd Applicant			
3rd Applicant			

If you have already provided & validated PAN with an existing folio, please mention the Folio No.: Folio No. ____ / ____

3 BANK ACCOUNT DETAILS OF FIRST APPLICANT (Refer instruction No.III)

If "Mandatory Details" are not provided, your application is liable to be rejected.

Name of the Bank		Branch Address	
Bank City	A/c. No.	A/c. Type	☐ Current ☐ Savings ☐ NRO ☐ NRE

4 E-MAIL COMMUNICATION – I/We wish to receive the following via e-mail instead of physical document:

☐ Account Statement ☐ Quarterly Review & Annual Report ☐ Communication on Change of Address, Bank, etc.

Prudential ICICI AMC Ltd. - ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

Application No.

Received from:

Address

Signature, Stamp & Date

Application for Units of Prudential ICICI _____ Option : _____

Note: All future communications in connection with this application should be addressed to the nearest Prudential ICICI Customer Service Centre, quoting full name of the first applicant, the application serial number, the name of the scheme, the amount invested, date and the place of the Customer Service Centre where application was lodged.

1-Dec-2005

5 REDEMPTION / DIVIDEND REMITTANCE (Please refer to instruction no.VIII)

DIRECT CREDIT OF DIVIDEND/REDEMPTION	ELECTRONIC CLEARING SERVICE (ECS) FOR DIVIDEND ONLY
Available in **ABN Amro Bank, Bank of Punjab, Centurion Bank, Citibank N.A., Deutsche Bank, HDFC Bank, Hongkong Bank, ICICI Bank, IDBI Bank, Kotak Bank, Standard Chartered Bank,** and **UTI Bank**. Unitholders having bank account with any of these bank will receive their Redemption/ Dividend Payments (if any) directly into their bank account automatically. In case Unitholders wish to receive a cheque please indicate the preference below. I want to receive the redemption and dividend proceeds (if any) by way of a cheque. ☐ (Please ✓ in this box)	I authorise Prudential ICICI Mutual Fund to credit my dividend payments through ECS ☐ (Please ✓) **Please quote 9 Digit Code No. of your Bank and Branch Corresponding to Bank Account Details given in Section - 3 above.** (This number appears on every leaf of your chequebook after your cheque number) **IMPORTANT: Please attach a blank "cancelled" Cheque or a clear photocopy of a cheque issued by your bank veryfying of the Code No.**

6 INVESTMENT DETAILS (Refer Instruction No.IV)

NAME OF THE SCHEME (1)	OPTIONS & SUB-OPTIONS (See the Key Features for Scheme specific options & sub-options) [Please tick (✓) the appropriate boxes, only if it is applicable to the scheme/plan in which you wish to invest]		
(Please leave one box blank between words)	☐ Cumulative/Growth	☐ AEP-Regular* ☐ AEP-Appreciation	☐ Monthly ☐ Half Yearly ☐ Quarterly
	☐ Dividend Payout ☐ Dividend Reinvestment	☐ Monthly ☐ Quarterly ☐ Half Yearly	

* Cumulative – AEP Regular Option : Encashment of Units is subject to declaration of dividend in the respective Scheme(s).

SIP Payment Details (You can choose one of the 3 payment options below. Please tick (✓) the appropriate box)

☐ **OPTION - I : CHEQUE – First Installment Details** (to be filled in in case of SIP through cheque)

Cheque No. | Cheque Date | Amount Rs.

Drawn on Bank | Branch

Subsequent Installment Details (to be filled in in case of SIP through cheque)

Single Installment Amount Rs. | Number of Cheques | Cheque Number From | Cheque Number To

Cheque Dated: ☐ 1st ☐ 7th ☐ 10th ☐ 15th ☐ 25th | Start From | End To

Drawn on Bank | Branch

☐ **OPTION - II : AUTO DEBIT THROUGH ECS** (You only need to tick this box & fill SIP Auto Debit Instruction Form on page 19)

☐ **OPTION - III : STANDING INSTRUCTION** (You only need to tick this box & fill Standing Instruction Form on page 21)

7 NOMINATION DETAILS (Optional)

I/We hereby nominate the undermentioned Nominee to receive the amounts to my/our credit in event of my/our death. I/We also understand that all payments and settlements made to such Nominee and signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustees.

Name of the Nominee | Date of Birth (If nominee is minor)

Mr. Ms. M/s. | D D M M Y Y Y Y

Address of Nominee (Please provide full address)

PIN Code

Name of the Guardian (If nominee is minor) | Relationship with minor

Address of Guardian | **Signature of Guardian**

PIN Code

8 YOUR CONFIRMATION

The Trustee
Prudential ICICI Mutual Fund,

DD MM YYYY

I/We have read and understood the offer document(s) of Prudential ICICI Mutual Fund. I/We apply for the units of the scheme(s) and I/we agree to abide by the terms, conditions, rules and regulations of the scheme. I/We confirm to have understood the terms & conditions. Its investment objectives, investment pattern, fundamental objectives and risk factors applicable to the respective Fund(s). I/We agree to abide by the terms, conditions, rules and regulations of the Plan(s). I/We have understood the details of the scheme and I/we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.

SIGNATURE(S)

First Applicant	
Second Applicant	
Third Applicant	

Prudential ICICI AMC Ltd. - ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

First Installment Cheque No. | Cheque Dated D D M M Y Y | Rs.

Drawn on Bank, Branch & City

Subsequent Installment Cheque Nos. Cheque Number From | Cheque Number To | Rs.

Drawn on Bank, Branch & City

Payment through ☐ Auto Debit ECS ☐ Bank Standing Instruction