

Please refer to the general instructions for assistance and complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink.

Broker Name & ARN Code / RIA Code [^]	Sub-broker ARN Code	Sub Code	EUN	Branch Code	For Office Use Only Date and Time of Receipt
24952			E347831		

Initial Commission will be paid by the investor directly to the distributor, based on assessment of various factors including the service rendered by the Distributor.

Transaction Charges: SEBI (Mutual Fund) Regulations allow deduction of transaction charges of Rs. 100/- from your investment for payment to your distributor if your distributor has opted to receive transaction charges for investments sourced by him. The transaction charges deductible are Rs. 150/- if you are investing in Mutual Funds for the first time. If you are making a SIP Investment, the transaction charges would be deducted over 3-4 instalments.

No transaction charges would be levied if you are not investing through a Distributor or your investment amount is less than Rs.10,000/-. If this is the first time, you are investing in any mutual fund, please tick here

Investor's Declaration where EUN is not furnished: I/We confirm that the EUN box has been intentionally left blank by me/us as this is an "execution only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor and/or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of distributor and the distributor has not charged any advisory fees on this transaction.

Sole/1st applicant / Authorised Signatory <input checked="" type="checkbox"/>	2nd applicant / Authorised Signatory	3rd applicant / Authorised Signatory
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1 APPLICANT INFORMATION

Sole / First Unitholder's Name	Mr./ Ms./ M/s																							
											Folio No.													
	Sole / First Unitholder			Second Unitholder			Third Unitholder																	
KYC Identification No. (KIN)*																								
PAN/PEKRN**																								
Date of Birth*	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y	D	D	M	M	Y	Y	Y	Y
Mobile No.	+ 9 1 -																							
E-mail ID																								

KYC is mandatory. Please enclose copies of KYC acknowledgement letters for all applicants. **PEKRN required for Micro investments upto Rs. 50,000 in a year.
[^] 14 digit KYC Identification Number (KIN) and Date of Birth is mandatory for Individual(s) who has registered under Central KYC Records Registry (CKYCR).

2 SIP MODIFICATION DETAILS[‡] (Only Scheme change allowed for already registered SIP)

Existing SIP details																															
Scheme Name																															
Option (✓)	<input checked="" type="checkbox"/> Growth	<input type="checkbox"/> Reinvestment of IDCW	<input type="checkbox"/> Payout of IDCW																												
Dividend Frequency	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Half Yearly	<input type="checkbox"/> Yearly																								
SIP Debit Date	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd	<input type="checkbox"/> 3rd	<input type="checkbox"/> 4th	<input type="checkbox"/> 5th	<input type="checkbox"/> 6th	<input type="checkbox"/> 7th	<input type="checkbox"/> 8th	<input type="checkbox"/> 9th	<input type="checkbox"/> 10th (Default [^])	<input type="checkbox"/> 11th	<input type="checkbox"/> 12th	<input type="checkbox"/> 13th	<input type="checkbox"/> 14th	<input type="checkbox"/> 15th	<input type="checkbox"/> 16th	<input type="checkbox"/> 17th	<input type="checkbox"/> 18th	<input type="checkbox"/> 19th	<input type="checkbox"/> 20th	<input type="checkbox"/> 21st	<input type="checkbox"/> 22nd	<input type="checkbox"/> 23rd	<input type="checkbox"/> 24th	<input type="checkbox"/> 25th	<input type="checkbox"/> 26th	<input type="checkbox"/> 27th	<input type="checkbox"/> 28th	<input type="checkbox"/> 29th	<input type="checkbox"/> 30th	<input type="checkbox"/> 31st
SIP Amount	(figures)											(words)																			
New Scheme details																															
Scheme Name																															
Option (✓)	<input checked="" type="checkbox"/> Growth	<input type="checkbox"/> Reinvestment of IDCW	<input type="checkbox"/> Payout of IDCW																												
Dividend Frequency	<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Fortnightly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Half Yearly	<input type="checkbox"/> Yearly																								
[‡] Modification will be applicable subject to minimum installment and aggregate amount criteria is met.																															

3 DECLARATION & SIGNATURES (Mandatory. If left blank, the application is liable to be rejected)

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum of HSBC Mutual Fund. I/We hereby declare that I/We do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding Rs. 50,000 in a year. I/We have neither received nor been induced by any rebate or gifts directly or indirectly in making this Systematic Investment. The ARN holder has disclosed to me/us all the commissions (in trail commission or any other), payable to him for the different competing schemes of Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We hereby declare that the particulars given here are correct and express my/our willingness to make payments referred above through direct debit/participation in ECS. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold HSBC Mutual Fund, their Investment Manager - HSBC Asset Management Limited, or any of their appointed service providers or representatives responsible. I/We will also inform HSBC Asset Management Limited about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

SIGNATURE/S AS PER HSBC MUTUAL FUND (To be signed as per Mode of Holding)		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Sole/First Applicant/Guardian/PoA	Second Applicant/ PoA	Third Applicant/PoA

GENERAL INSTRUCTIONS

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black ink. All information sought in the form is mandatory except where it is specifically indicated as optional. All instructions & notes are subject to SEBI & AMFI guidelines as amended from time to time.

- 1. Applicant Information:** Please furnish the Folio Number, Name and PAN of Sole / First Applicant in Section 1 of the Form. Please provide the Mobile Number and E-Mail Address of the Sole / First Applicant in the form in case of Individuals and Key Contact in case of Non Individuals. This would help us seamlessly communicate with you on your investments.
2. Only Scheme change is allowed through this SIP modification form
3. The load structure applicable will be as per the initial registration date or the new scheme opening date as applicable.
4. All requests for registering the modification of SIP shall be subject to an advance notice of 30 (thirty) days.
5. All requests will be accepted subject to verification. Invalid, ambiguous or incomplete requests are liable to be rejected post acceptance and verification.
6. Declarations & Signatures: Unit holders need to sign here in accordance to the Mode of Holding provided to us.

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

CALL US AT

Please visit our website www.assetmanagement.hsbc.co.in for an updated list of Official Points of Acceptance of HSBC Mutual Fund. Please visit www.camsonline.com for an updated list of Official Points of Acceptance of our Registrar / Transfer Agent : Computer Age Management System.

TOLL FREE NUMBERS

Description	Investor related queries	Distributor related queries	Online related queries	Investor (Dialing from abroad)
Toll Free Number	1800-4190-200 / 1800-200-2434	1800-419-9800	1800-4190-200 / 1800-200-2434	+91 44 39923900
Email ID	investor.line@mutualfunds.hsbc.co.in	partner.line@mutualfunds.hsbc.co.in	onlinemf@mutualfunds.hsbc.co.in	investor.line@mutualfunds.hsbc.co.in