

Time Stamp

Broker Name & ARN code / RIA code ^	Sub-broker ARN code	Sub code	Branch Code	EUIN
361161				E689889

For Office Use Only

[^] I/We hereby confirm that by mentioning RIA code, I/We authorise you to share with the SEBI Registered Investment Adviser (RIA) the details of my/our transactions in the schemes(s) of HSBC Mutual Fund. I/We hereby confirm that the EUIN 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.

Sole /First Applicant / Authorised Signatory		Second Applicant / Authorised Signatory		Third Applicant / Authorised Signatory	
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1 APPLICANT'S INFORMATION [Fill in your Folio No. below. In case of existing folio, furnish only KYC and PAN details below (if not provided earlier) and proceed to Section 2]

Folio No.																				
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Please note that applicant details and mode of holding will be as per existing Folio Number.

SOLE/FIRST APPLICANT'S PERSONAL DETAILS

Are you a resident of USA/Canada? (✓) Yes ☐ No ☒ (** Default if not ticked)

[illegible]

Date Birth/Incorporation ^{§‡} (Mandatory*)

D	D	M	M	Y	Y	Y	Y
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☒ Proof Enclosed (✓) ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport
☐ Marksheet issued by HSC State Board ☐ Others (please specify)

Gender ☐ Male ☐ Female ☐ Third Gender **KYC Identification No. (KIN) ****

PAN (Mandatory*) <table border="1" style="display: inline-table; width: 150px; height: 25px; vertical-align: middle;"></table> Proof to be enclosed (✓) ☐ PAN card Copy	LEI Code <table border="1" style="display: inline-table; width: 300px; height: 25px; vertical-align: middle;"></table>
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Nationality‡	Country of Residence
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GUARDIAN NAME AS PER PAN (if Sole/First applicant is a Minor) Contact Person (in case of Non-individual Investors only)	
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[illegible]

Date of Birth of Guardian[†] (Mandatory*) D D M M Y Y Y Y **KYC Identification Number (KIN)^{‡‡}**

PAN** (Mandatory*)		Proof to be enclosed (✓) ☐ PAN card Copy
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☐ Father ☐ Mother ☐ Legal Guardian** (court appointed Guardian)

⁺ Document evidencing relationship with Guardian ⁺⁺ In case of Legal Guardian, please submit attested copy of the court appointment letter, affidavit etc. to support.

Status of Sole/1st Applicant (✓) : ☐ Resident Individual ☐ Resident Minor (through Guardian) ☐ Non-Resident (Repatriable) ☐ Non-Resident (Non-Repatriable) ☐ Non-Resident - Minor (Repatriable) ☐ Non-Resident - Minor (Non-Repatriable) ☐ Bank ☐ FPIs ☐ QFI/EFI ☐ AOP ☐ HUF ☐ FPI ☐ Sole-Proprietor ☐ Private Limited Company ☐ Public Limited Co. ☐ Body Corporate ☐ Partnership Firm ☐ Trust ☐ NPS Trust ☐ Fund of Fund ☐ Gratuity Fund ☐ Pension and Retirement Fund ☐ Government Body ☐ NGO ☐ BOI ☐ Society ☐ LLP ☐ PIO ☐ Non Profit Organisation ☐ Global Development Network ☐ Foreign Nationals [Specify Country] ☐ Others [Specify]

2 KYC DETAILS [Mandatory* (Details of Guardian in case the unitholder is a minor)]

Investors are requested to complete the KYC section for Joint holders & POA also, as applicable

a. **Occupation (✓) :** ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Professional ☐ Agriculturist ☐ Retired
☐ Housewife ☐ Student ☐ Doctor ☐ Forex Dealer ☐ Business [Nature of Business] _____ ☐ Casino Owner ☐ Arms manufacturer
☐ Gambling services offerer ☐ Money lender ☐ Pawn Broker ☐ Others [specify] _____

b. Gross Annual Income (Please ✓) : ☐ Below ₹ 1 Lac ☐ ₹ 1-5 Lacs ☐ ₹ 5-10 Lacs ☐ ₹ 10-25 Lacs ☐ ₹ 25 Lacs - ₹ 1 Crore ☐ > ₹ 1 Crore

OR Net-worth in Rupees (Mandatory for Non-Individuals)	₹ Net-worth should not be older than 1 year	as on (date)	D	D	M	M	Y	Y	Y	Y
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For Individuals [Tick (✓) if applicable] :		For Non-Individual Investors (Companies, Trust, Partnership etc.) :	
☐	Politically Exposed Person (PEP)	I. Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company (If No, please attach mandatory UBO Declaration)	☐ Yes ☐ No
☐	Related to a Politically Exposed Person (PEP)	II. Foreign Exchange/Money Changer Services	☐ Yes ☐ No
☐	Not Applicable	III. Gaming/Gambling/Lottery/Casino Services	☐ Yes ☐ No
		IV. Money Lending/Pawning	☐ Yes ☐ No

For Non Individual Investors - Identification of Beneficial Ownership	Mandatory UBO Declaration form duly filled and signed attached. (Not Required for a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company)	☐ Yes ☐ No
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* Mandatory ** W.e.f. January 1, 2008, PAN number is Mandatory for all investors (including Joint Holders, POA holder, Guardian in case of Minor and NRIs). For Micro SIP Investment please refer Instructions for filling up the Application Form. ‡‡ The KRA KYC status of the PAN for all the holders (including guardian in case of Minor) and POA holder should be Validated. ‡ Please note that information sought here will be obtained from KRA also. In case of any differences, the KRA input will apply. § Transactions subject to rejection if minor has turned major and relevant documents for change in status not submitted. Refer SID/SAI for instructions related to folios held in the name of Minor.

...continued overleaf ➡



► **HSBC** Mutual Fund

ACKNOWLEDGEMENT SLIP (To be filled by the Applicant)

This Acknowledgement Slip is for your reference only. Information provided on the form is considered final.

[illegible]

Folio No.																																											
	application for Units of Scheme																																										

Plan _____ Option/Sub-option _____ alongwith Cheque/DD No. _____

Dated _____ Drawn on (Bank) _____ Amount (₹)

☐ SIP Investment ☐ STP ☐ Fresh Nomination ☐ Change of Existing Nomination ☐ Cancellation of Nomination

☐ ECS (Debit/Direct Debit Facility) Total Amount (₹) Date DDMMYY

Please Note : All purchase are subject to realisation of instruments. All transaction processing is subject to final verification

ISC Stamp, Signature & Date

PUBLIC

3 CONTACT DETAILS AND CORRESPONDENCE ADDRESS

Address for Correspondence† [P.O. Box Address is NOT sufficient] (Should be same as in KRA records)

City _____ Pin Code

State _____ Country _____

Overseas Address/Registered Address in case of Non-Individual investors (Mandatory in case of NRI/FPI applicant in addition to mailing address) (Should be same as in KRA records)

City _____ Zip Code

State _____ Country (Mandatory) _____

CONTACT DETAILS OF SOLE/FIRST APPLICANT

Mobile No.		Tel. (Res.)		Tel. (Office)	
Mobile belongs to: ☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS					
*E-mail			Email ID to be filled in CAPITAL LETTERS		
E-mail belongs to: ☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS					
☐ Yes ☐ No * I/We, wish to receive scheme wise annual report or an abridged summary thereof/account statements/statutory & other documents by email. If unticked, by default the above will be sent on email. I/We confirm that primary email ID provided belongs to self or a family member.					

4 JOINT APPLICANTS, IF ANY AND THEIR DETAILS (Please tick (✓) wherever applicable)

MODE OF HOLDING (✓) ☐ Single ☐ Joint (Default if not mentioned) ☐ Anyone or Survivor	
NAME OF SECOND APPLICANT AS PER PAN (Not applicable if Sole/First Applicant is a Minor and Second Applicant cannot be a Minor)	
Are you a resident of USA/Canada? (✓) Yes ☐ No** ☐ (**Default if not ticked.)	
Mr Ms M/s	Name as per PAN CARD
Date of Birth \$† (Mandatory*) D D M M Y Y Y Y	PAN** (Mandatory*) Proof enclosed (✓) ☐ PAN card Copy
Gender ☐ Male ☐ Female ☐ Third Gender	KYC Identification Number (KIN) ‡‡
Nationality	Country of Residence
Status of Second Applicant (✓) : ☐ Resident Individual ☐ Non-Resident (Repatriable) ☐ Non-Resident (Non-Repatriable)	
a. Occupation (please ✓) : ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Business [Nature of Business] _____ ☐ Doctor ☐ Forex Dealer ☐ Money lender ☐ Casino Owner ☐ Arms manufacturer ☐ Gambling services offerer ☐ Money lender ☐ Pawn Broker ☐ Others [Please specify] _____	
b. Gross Annual Income (please ✓) : ☐ Below ₹ 1 Lac ☐ ₹ 1-5 Lacs ☐ ₹ 5-10 Lacs ☐ ₹ 10-25 Lacs ☐ ₹ 25 Lacs - ₹ 1 Crore ☐ > ₹ 1 Crore	
c. Others (please ✓) : ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP) ☐ Not Applicable	

CONTACT DETAILS OF SECOND APPLICANT

Mobile No.	E-mail	Email ID to be filled in CAPITAL LETTERS
Mobile belongs to: ☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS		
E-mail belongs to: ☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS		
NAME OF THIRD APPLICANT AS PER PAN (Not applicable if Sole/First Applicant is a Minor and Third Applicant cannot be a Minor)		
Are you a resident of USA/Canada? (✓) Yes ☐ No** ☐ (**Default if not ticked.)		
Mr Ms M/s	Name as per PAN CARD	
Date of Birth \$‡ (Mandatory*)	PAN** (Mandatory*)	Proof enclosed (✓) ☐ PAN card Copy ☐
Gender ☐ Male ☐ Female ☐ Third Gender	KYC Identification Number (KIN) ‡‡	
Nationality	Country of Residence	
Status of Third Applicant (✓): ☐ Resident Individual ☐ Non-Resident (Repatriable) ☐ Non-Resident (Non-Repatriable)		
a. Occupation (please ✓): ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Business [Nature of Business] ☐ Doctor ☐ Forex Dealer ☐ Money lender ☐ Casino Owner ☐ Arms manufacturer ☐ Gambling services offerer ☐ Money lender ☐ Pawn Broker ☐ Others [Please specify]		
b. Gross Annual Income (please ✓): ☐ Below ₹ 1 Lac ☐ ₹ 1-5 Lacs ☐ ₹ 5-10 Lacs ☐ ₹ 10-25 Lacs ☐ ₹ 25 Lacs - ₹ 1 Crore ☐ > ₹ 1 Crore		
c. Others (please ✓): ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP) ☐ Not Applicable		

CONTACT DETAILS OF THIRD APPLICANT

Mobile No.		E-mail	
Email ID to be filled in CAPITAL LETTERS			

Mobile belongs to: ☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS

E-mail belongs to: ☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS

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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

POA HOLDER NAME AS PER PAN (If the investment is being made by a Constituted Attorney please furnish details of PoA holder).																																															
Mr Ms M/s														Name as per PAN CARD																																	
Date of Birth (Mandatory*)														KYC Identification Number (KIN) ++																																	
PAN** (Mandatory*)														Proof enclosed (✓) ☐ PAN card Copy																																	
Nationality														Country of Residence																																	
a. Occupation (please ✓) : ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Business [Nature of Business] ☐ Doctor ☐ Forex Dealer ☐ Money lender ☐ Casino Owner ☐ Arms manufacturer ☐ Gambling services offerer ☐ Money lender ☐ Pawn Broker ☐ Others [Please specify]																																															
b. Gross Annual Income (please ✓) : ☐ Below ₹ 1 Lac ☐ ₹ 1-5 Lacs ☐ ₹ 5-10 Lacs ☐ ₹ 10-25 Lacs ☐ ₹ 25 Lacs - ₹ 1 Crore ☐ > ₹ 1 Crore														OR		Net-worth in Rupees (Mandatory for Non-Individuals) ₹ Net-worth should not be older than 1 year																															
c. Others (please ✓) : ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP) ☐ Not Applicable																																															
5 BANK ACCOUNT DETAILS (For Minor investments – Redemption proceeds will be paid only to the Bank A/c held in the name of Minor)																																															
Core Banking A/c No.														A/c. Type (✓) ☐ Current ☐ Savings ☐ NRO* ☐ NRE* * For NRI Investors																																	
Bank Name																																															
Branch																																															
City																																															
State														Country																																	
MICR code														RTGS/NEFT/IFSC code																																	
Please provide a cancelled cheque leaf with your name and IFSC code pre-printed if the bank details in Section 6 are different or Fund transfer is submitted.																																															
6 INVESTMENT & SOURCE OF FUNDS DETAILS (Please write Scheme Name/Plan/Option/Sub-option below)																																															
For more than 1 Scheme please issue cheque favouring “HSBC Multi Scheme Collection Account”																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3">Scheme/Plan/Option/Sub-option</th> <th>Amount (₹)</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>HSBC</td> <td>Scheme Name Plan Option/Sub-Option</td> <td></td> </tr> <tr> <td>2.</td> <td>HSBC</td> <td>Scheme Name Plan Option/Sub-Option</td> <td></td> </tr> <tr> <td>3.</td> <td>HSBC</td> <td>Scheme Name Plan Option/Sub-Option</td> <td></td> </tr> <tr> <td colspan="3">Total Amount (₹)</td> <td>Amount in words</td> </tr> </tbody> </table>																												Scheme/Plan/Option/Sub-option			Amount (₹)	1.	HSBC	Scheme Name Plan Option/Sub-Option		2.	HSBC	Scheme Name Plan Option/Sub-Option		3.	HSBC	Scheme Name Plan Option/Sub-Option		Total Amount (₹)			Amount in words
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Total Amount (₹)			Amount in words																																												
Payment Mode ☐ Cheque ☐ DD ☐ RTGS ☐ NEFT ☐ One Time Mandate (OTM) ☐ Electronic Transfer																																															
Cheque/DD/RTGS/NEFT Details Cheque/DD/RTGS/UMRN/NEFT No. Instrument Date DD Charges, if any (₹)																																															
Payment from Bank A/c. No.																																															
A/c. Type (✓) ☐ Current ☐ Savings ☐ NRO* ☐ NRE* ☐ FCNR* ☐ Others (* For NRI Investors)																																															
Drawn On Bank Branch & City																																															
The scheme name mentioned on the application form and the cheque has to be the same. In case of any discrepancy between the two, units will be allotted as per the scheme name mentioned on the application only.																																															
Documents attached to avoid Third Party Payment Rejection : ☐ Third Party Declarations ☐ Bank Certificate for Pre-funded Instruments For Minor investment, if Funds are from Parent/Legal Guardian, enclose Relationship Proof ☐ Birth Certificate ☐ Passport ☐ School Leaving Certificate ☐ Court Order MANDATORY DECLARATION : The details of the bank account provided above pertain to my/our own bank account in my/our name Yes No. If no, my relationship with the bank account holder (attach the Third Party declaration Form) (Please ✓) ☐ Employee ☐ Custodian ☐ AMC ☐ Corporate																																															
7 SYSTEMATIC TRANSFER PLAN (STP)\$ (Please write Scheme Name/Plan/Option/Sub-option below) Registration^^																																															
Transfer From : Scheme HSBC Scheme Name														Transfer To: Scheme HSBC Scheme Name																																	
Plan/Option														Plan/Option																																	
Sub-option														Sub-option																																	
STP Frequency: ☐ Daily^ ☐ Weekly^ ☐ Fortnightly ☐ Monthly (Default¶) ☐ Quarterly (10th)														STP Day: ☐ Monday ☐ Tuesday ☐ Wednesday (Default^) ☐ Thursday ☐ Friday																																	
Transfer Options: Fixed Amount Capital Appreciation (1st Business Day of the month)														Transfer Amount: Amount per instalment Rs. (Minimum Transfer Amount for Liquid & Overnight - Rs. 1,000. All other Schemes - Rs. 500)																																	
Installment commencing: From M M Y Y Y Y To M M Y Y Y Y OR Until Canceled (Default)♣																																															
STP Date 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th (Default) 11th 12th 13th 14th 15th 16th 17th 18th 19th 20th 21st 22nd 23rd 24th 25th 26th 27th 28th 29th 30th 31st																																															
\$ To be submitted 7 days prior to the STP date incase of Registration & 14 days incase of Cancellation. ^^6 installments for registration. The minimum amount required under the source scheme for registering STP is ₹ 6,000. Default Date will be applied in case of no information, ambiguity or discrepancy. ¶ If no debit date is mentioned default date would be considered as 10th of every month/quarter. ^ Daily and Weekly STP facility shall be available only under Fixed Amount Systematic Transfer Plan. If the day for Weekly STP is not selected, Wednesday will be the default day. ♣ If end date is not mentioned, Until Canceled will be the default option.																																															

...continued overleaf→

8	CONFIRMATION UNDER THE FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) AND COMMON REPORTING STANDARD (CRS) [Mandatory for all investors including Unit holder (Guardian in case of minor), Joint holder(s) and POA Holder]			
	FATCA / CRS SELF CERTIFICATION FOR INDIVIDUAL INVESTORS (INDIVIDUAL / NRI / ON BEHALF OF MINOR / PROPRIETORSHIP FIRM)			
		Sole / First Applicant Guardian	Second Applicant	Third Applicant / POA holder
Place and Country of Birth		Place _____ Country _____	Place _____ Country _____	Place _____ Country _____
Address Type [for KYC address]		☐ Residential ☐ Business ☐ Registered Office	☐ Residential ☐ Business ☐ Registered Office	☐ Residential ☐ Business ☐ Registered Office
Tax Resident (i.e. are you assessed for Tax) in any country other than India?		Yes No	Yes No	Yes No
If 'Yes' please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are Citizen / Resident / Green Card Holder / Tax Resident in the respective countries				
Country of Tax Residency [#]				
Tax Identification Number (TIN) or Functional Equivalent [^]		Mandatory	Mandatory	Mandatory
Identification Type (TIN or Other, please specify)				
If TIN is not available, please tick ✓ the reason [as defined below]		☐ A ☐ B ☐ C	☐ A ☐ B ☐ C	☐ A ☐ B ☐ C
Reason A – The country where the Account Holder is liable to pay tax does not issue TIN to its residents. Reason B – No TIN required [Select this reason only for the authorities of the respective country of tax residence do not required the TIN to be collected] Reason C – Others - Please specify the reason _____				
[#] To also include USA, where the individual is a citizen / green card holder of USA. [^] In case Tax Identification Number is not available, kindly provide its functional equivalent.				
FATCA / CRS SELF CERTIFICATION FOR NON-INDIVIDUAL INVESTORS AND THEIR ULTIMATE BENEFICIAL OWNER (UBO) (COMPANY / TRUST / SOCIETY / PARTNERSHIP FIRM ETC.)				
Please complete Annexure A & B				
9	DEMAT ACCOUNT DETAILS (Please provide Demat proof to verify demat details)			
	Please provide details of your Depository Participant if you wish to hold units in Demat Form.		NSDL	CDSL
Depository Participant Name _____		DP ID	I	N
Beneficiary Account No. _____				
10	NOMINATION DETAILS (Mandatory for new folios of Individual Unitholders only - whether holding Units Singly or Jointly with other holders)			
	A) ☐ I/We wish to Nominate: I/We, wish to make a nomination and do hereby nominate the person(s) who shall receive all the assets held in my/our account in the event of my/our death and by cancelling the nomination(s) made by me/us previously in respect of the units held by me/us in the listed Folio/s. <i>(Fill the separate nomination form).</i>			
B) ☐ I/We do not wish to Nominate (Nomination OPT-OUT): I/We, the applicant(s)/unitholder(s) hereby confirm that I/we do not wish to appoint any nominee(s) in respect of the mutual fund application(s)/units held in my/our mutual fund folio(s). I/We understand the implications/issues involved in non-appointment of any nominee(s) and am/are further aware that in case of my demise/death of all the unit holders in the folio, my/our legal heir(s) would need to submit all the requisite documents issued by the Court or such other competent authority, as may be required by the Mutual Fund/AMC for settlement of death claim/transmission of units in favour of the legal heir(s), based on the value of the assets held in the mutual fund folio/s.				
Note : Where Nominee details and Nomination Opt-Out both are mentioned, Nomination Opt-Out will be considered as "Default". Folio in such case will be updated without Nominee.				
11	DECLARATION AND SIGNATURES (In case of joint holding, signatures of all unit holders are mandatory)			
	FATCA / CRS DECLARATION			
I acknowledge and confirm that the information provided with respect to FATCA/CRS is true and correct to the best of my knowledge and belief. I certify that I am the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I will be responsible for it. I authorize the Fund to update its records from the FATCA/CRS information provided by me and received by the Fund from other SEBI Registered Intermediaries. Further, I authorize the Fund to share the given information provided by me to the Fund with other SEBI Registered Intermediaries to facilitate single submission / update. I also undertake to keep the Fund informed in writing about any changes / modification / update to the above information in future and also undertake to provide any other additional information as may be required at the Fund's end and / or by the domestic tax authorities. I authorize the Fund/AMC/RTA to close or suspend my account(s) under intimation to me for non-submission of documentation.				
OTHER DECLARATIONS				
Having read and understood the contents of the Scheme Information Document, Key Information Memorandum, Statement of Additional Information and Addenda of the Scheme(s) issued till date, I/We hereby apply to the Trustees of HSBC Mutual Fund for units of the relevant Scheme and agree to abide by the terms, conditions, rules and regulations of the Scheme and the above mentioned documents of HSBC Mutual Fund. I/We hereby authorise HSBC Mutual Fund, the AMC and its Agents to disclose my/our details including investment details to my/our bank(s)/HSBC Mutual Fund's Bank(s) and /or Distributor/Broker/Investment Advisor and to verify my/our bank details provided by me/us, or to disclose to such other service providers as deemed necessary for conduct of business. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the Fund, the AMC, its service providers or representatives responsible. I/We will also inform the AMC, about any changes in my/our bank account. I/We confirm that I am/we are Non-Residents of Indian Nationality/Origin and that the funds are remitted from abroad through approved banking channels or from my/our NRE/NRO/FCNR Account (<i>Applicable to NRI</i>).				
I/We confirm that the details provided by me/us are true and correct. I/We hereby declare that the amount being invested by me/us in the Scheme(s) is through legitimate sources and is not held or designed for the purpose of contravention and/or evasion of any Act, Rules, Regulations or any other applicable laws or Notifications issued by any governmental or statutory authority from time to time. I/We acknowledge that the AMC has not considered my/our tax position in particular and that I/we should seek tax advice on the specific tax implications arising out of my/our participation in the Scheme. 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. I/We confirm that 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.				
I/We confirm that I am/We are not United States person(s) under the laws of United States or resident(s) of Canada. In case of change to this status, I/We shall notify the AMC, in which event the AMC reserves the right to redeem my/our investments in the Scheme(s).				
We confirm that we have not issued any bearer shares or share warrants. We also confirm that we will inform the AMC if bearer shares or share warrants are issued subsequently.				
X		X		
Sole/First Applicant/Guardian/PoA		Second Applicant / PoA		
X		X		
Third Applicant / PoA				
Date _____		Please write Application Form No./Folio No. on the reverse of the Cheque/Demand Draft. Default options will be applied in cases where the information provided is either ambiguous or has any discrepancy.		

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	EUIN	Branch Code	Time Stamp
361161			E689889		

Investor's Declaration where EUIN is not furnished: I/We confirm that the EUIN 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	X	2nd Applicant / Authorised Signatory	X	3rd Applicant / Authorised Signatory	X
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☐ New SIP Registration ☐ SIP Renewal ☐ Update new OTM debit mandate for already registered SIP ☐ OTM Debit Mandate to be registered in the folio.
☐ OTM Debit Mandate is already registered in the folio. Please fill, Unique Mandate Reference Number (UMRN)

1 APPLICANT INFORMATION

Name of Sole/1st Unit Holder	First Name	Middle Name	Last Name
Folio No.	PAN		
Contact Details			
Mobile No.	+ 9 1	Tel. (Res./Office)	
Mobile belongs to :	☐ Self ☐ Spouse ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ Guardian (to Minor investment) ☐ POA ☐ PMS		
*E-mail		Email ID to be filled in CAPITAL LETTERS	
E-mail belongs to :	☐ Self ☐ Spouse ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ Guardian (to Minor investment) ☐ POA ☐ PMS		

2 OTM DEBIT MANDATE FOR NACH/ECS/AUTO DEBIT

UMRN	F O R O F F I C E U S E O N L Y	Date	D D M M Y Y Y Y
Utility Code		☐ Create ☐ Modify ☐ Cancel	
Sponsor Bank Code		I/We hereby authorize	HSBC Mutual Fund
To debit (✓)	☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Others	Bank Account No.	
with Bank	Name of customers bank	IFSC/MICR	
An amount of Rupees	In Words	₹	In Figures
Debit Type:	☒ Fixed Amount ☒ Maximum Amount	Frequency:	☒ Daily ☒ Weekly ☒ Bi-Monthly ☒ Monthly ☒ Quarterly ☒ Half-Yearly ☒ Annually ☒ As & when presented
Reference 1	Folio No.	Reference 2	Application Number
Mobile No.		Email ID	

1. I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per the latest schedule of the charges of the bank. 2. 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 the account, based on the instructions as agreed and signed by me. 3. 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. 4. I/We understand and accept that in case transaction/s initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law (including Negotiable Instruments Act).

PERIOD* (Mandatory)			Maximum period of validity of this mandate is 40 years only.
From	D D M M Y Y Y Y	X	X
To	D D M M Y Y Y Y	Signature of Primary Bank Account Holder	Signature of Bank Account Holder
		Signature of Bank Account Holder	Signature of Bank Account Holder
		Name as in bank records	Name as in bank records

Received from	Folio No./Application No.	
Scheme	Plan	Option/Sub-option
☐ New SIP Registration ☐ SIP Renewal ☐ Update New OTM Debit Mandate ☐ OTM Debit Mandate to be registered in the folio. ☐ OTM Debit Mandate is already registered in the folio.		
☐ SIP Amount Rs.	Frequency	☐ Daily ☐ Weekly ☐ Monthly ☐ Quarterly
☐ STP Top Up Amount Rs.	Frequency	☐ Half Yearly ☐ Yearly

3 SIP & INVESTMENT DETAILS (For more than One Scheme please issue cheque favouring “HSBC Multi SIP Collection Account”)

First SIP Details															
Instrument No.															
Dated															
Cheque Amount	₹														
Bank Name											A/C No.				
Branch											City				
A/c. Type	☐ Current ☐ Savings ☐ NRO* ☐ NRE* ☐ Others UMRN for OTM														
Reason for your SIP (✓)	☐ Children's Education ☐ Children's Marriage ☐ House ☐ Car ☐ Retirement ☐ Others														

1	Scheme 1	Name		Plan		Option/Sub option	
	IDCW Frequency				SIP Date	☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default^*) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st	
	SIP period	From	M M Y Y	To	M M Y Y		
	[If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate]						
	SIP Frequency	☐ Daily ☐ Weekly^ ☐ Monthly^ ☐ Quarterly (10th)			SIP Day	☐ Monday ☐ Tuesday ☐ Wednesday^ ☐ Thursday ☐ Friday	
	SIP Amount (figures)	₹			(words)		
	☐ SIP Top Up (Optional) – Available only for investments effected through Auto Debit.						
	Top Up Amount	₹	Amount in multiples of ₹ 500 only		Top Up Frequency	☐ Half Yearly ☐ Annual (Default) ^	
	Top Up to continue till SIP amount reaches^^	₹			OR	Top Up to continue till #	D D M M Y Y Y Y

2	Scheme 2	Name	Plan	Option/Sub option
IDCW Frequency				
SIP period		From M M Y Y To M M Y Y [If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate]		
SIP Frequency		SIP Date		
☐ Daily ☐ Weekly [△] ☐ Monthly [^] ☐ Quarterly (10th)		☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default [△]) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st		
SIP Amount (figures)		SIP Day		
₹ (words)		☐ Monday ☐ Tuesday ☐ Wednesday [△] ☐ Thursday ☐ Friday		
☐ SIP Top Up (Optional) – Available only for investments effected through Auto Debit.				
Top Up Amount		Top Up Frequency		
₹ Amount in multiples of ₹ 500 only		☐ Half Yearly ☐ Annual (Default) [△]		
Top Up to continue till SIP amount reaches^^ ₹		OR Top Up to continue till # D D M M Y Y Y Y Y		

3	Scheme 3	Name		Plan		Option / Sub option	
IDCW Frequency							
SIP period							
From				To			
M M Y Y M M Y Y				M M Y Y M M Y Y			
[If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate]							
SIP Frequency				SIP Day			
☐ Daily ☐ Weekly [△] ☐ Monthly [^] ☐ Quarterly (10th)				☐ Monday ☐ Tuesday ☐ Wednesday [△] ☐ Thursday ☐ Friday			
SIP Amount (figures)				SIP Amount (figures)			
₹				₹			
(words)				(words)			
☐ SIP Top Up (Optional) – Available only for investments effected through Auto Debit.							
Top Up Amount				Top Up Frequency			
₹				☐ Half Yearly ☐ Annual (Default) [^]			
Top Up to continue till SIP amount reaches ^{^^}				Top Up to continue till #			
₹				D D M M Y Y Y Y			

* For NRI Investors. [△] If the day for Weekly SIP is not selected, Wednesday will be the default day. [^] If no debit date is mentioned default date would be considered as 10th of every month/quarter. Minimum gap of 21 days required between first cheque and subsequent instalment. In case of discrepancy in the SIP Period, the one mentioned in the Debit Mandate will be considered. Please ensure the amount mentioned in the NACH form is a total of per SIP installment requested above. ^{^^} SIP Top Up will cease once the mentioned amount is reached. [#] It is the date from which SIP Top-Up amount will cease. Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment.

4 DECLARATION AND SIGNATURE(S) (to be signed by all Unit Holders if Mode of Holding is 'Joint')

OTHER DECLARATIONS (Signature(s) should be as it appearing on the Application Form and in the same order

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 participation in Electronic Debit arrangement/NACH (National Automated Clearing House). If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the user institution or any of their appointed service providers or representatives responsible. I/We will also inform HSBC Mutual Fund about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

I/We hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/ us to the group companies of HSBC Mutual Fund for any valid business purposes including marketing or sales promotion or with any statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.

X	X	X
Sole/First Applicant/Guardian/PoA	Second Applicant/ PoA	Third Applicant/PoA

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 Services.

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

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	EUIN	Branch Code
361161			E689889	

Investor's Declaration where EUIN is not furnished: I/We confirm that the EUIN 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	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

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 SMART SIP COMBO (Please ✓ any one) SIP Frequency will be by default **Monthly**.

☐ BALANCED SIP COMBO ☐ Regular ☐ Direct					☐ ESSENTIALS SIP COMBO ☐ Regular ☐ Direct																					
	Growth*	IDCW® Payout	IDCW® Reinvest-ment#	Amount		Growth*	IDCW® Payout	IDCW® Reinvest-ment#	Amount																	
HSBC Aggressive Hybrid Fund	☐	☐	☐	₹	HSBC Flexi Cap Fund	☐	☐	☐	₹																	
HSBC Balanced Advantage Fund	☐	☐	☐	₹	HSBC Value Fund	☐	☐	☐	₹																	
HSBC Equity Savings Fund	☐	☐	☐	₹	HSBC Midcap Fund	☐	☐	☐	₹																	
☐ EXCLUSIVE SIP COMBO ☐ Regular ☐ Direct					☐ MARKET CAP SIP COMBO ☐ Regular ☐ Direct																					
	Growth*	IDCW® Payout	IDCW® Reinvest-ment#	Amount		Growth*	IDCW® Payout	IDCW® Reinvest-ment#	Amount																	
HSBC Business Cycles Fund	☐	☐	☐	₹	HSBC Large Cap Fund	☐	☐	☐	₹																	
HSBC Large & Mid Cap Fund	☐	☐	☐	₹	HSBC Midcap Fund	☐	☐	☐	₹																	
HSBC Infrastructure Fund	☐	☐	☐	₹	HSBC Small Cap Fund	☐	☐	☐	₹																	
☐ DIY SIP COMBO ☐ Regular ☐ Direct					SIP DEBIT DATE ☐ (✓ any one)																					
Scheme Name	Growth*	IDCW® Payout	IDCW® Reinvest-ment#	Amount	☐ 1st	☐ 2nd	☐ 3rd	☐ 4th	☐ 5th	☐ 6th	☐ 7th	☐ 8th	☐ 9th													
					☐ 10th (Default)	☐ 11th	☐ 12th	☐ 13th	☐ 14th	☐ 15th	☐ 16th	☐ 17th														
					☐ 18th	☐ 1s9th	☐ 20th	☐ 21st	☐ 22nd	☐ 23rd	☐ 24th	☐ 25th	☐ 26th													
					☐ 27th	☐ 28th	☐ 29th	☐ 30th	☐ 31st																	
					SIP PERIOD																					
					From <table><tr><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> ^^To <table><tr><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>										M	M	Y	Y	Y	Y	M	M	Y	Y	Y	Y
M	M	Y	Y	Y	Y																					
M	M	Y	Y	Y	Y																					

* Default option if not selected. # Default IDCW Frequency will be considered. ^^ If end date is not mentioned then the SIP will be considered based on end date provided in NACH Mandate. @ IDCW stands for 'Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of the sale price that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculated in accordance with the Regulations).

OTM DEBIT MANDATE FOR NACH/ECS/AUTO DEBIT



HSBC Mutual Fund

UMRN	F O R O F F I C E U S E O N L Y	Date	D D M M Y Y Y
Utility Code		☐ Create ☐ Modify ☐ Cancel	
Sponsor Bank Code		I/We hereby authorize	HSBC Mutual Fund
To debit (✓)	☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Others	Bank Account No.	
with Bank	Name of customers bank	IFSC/MICR	
An amount of Rupees	In Words	₹	In Figures
Debit Type:	☒ Fixed Amount ☒ Maximum Amount	Frequency:	☒ Daily ☒ Weekly ☒ Bi-Monthly ☒ Monthly ☒ Quarterly
			☒ Half Yearly ☒ Annually ☒ As & when presented
Reference 1	Folio No.	Reference 2	Application Number
Mobile No.		Email ID	

1. I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per the latest schedule of the charges of the bank. 2. 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 the account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorized to cancel/amend this mandate this mandate by appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorized the debit. 4. I/We understand and accept that in case transaction/s initiated against this mandate (within valid period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law, action may be taken against me/us under applicable law (including Negotiable Instruments Act).

PERIOD* (Mandatory)									
From	D	D	M	M	Y	Y	Y	Y	Y
To	D	D	M	M	Y	Y	Y	Y	Y

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

Name as in bank records

X

Signature of Primary Bank Account Holder

Name as in bank records

X

Signature of Bank Account Holder

Name as in bank records

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

Name as in bank records

Name as in bank records

Name as in bank records

First Instalment Details: (Please issue cheque favouring “HSBC MF Multi Scheme SIP”)

4 DECLARATION, CONSENT & SIGNATURES (To be signed as per Mode of Holding)

Having read and understood the contents of the Combined Scheme Information Document, SAI and Addenda of the Scheme(s) issued till date, I/We confirm that the details provided by me/us are true and correct. I authorise HSBC Mutual Fund and its Registrar to update the new bank details in the folio/s as mentioned above. In case of any Unitholder/s who have already opted for multiple bank account registration facility and use this form, then the bank account mentioned in this form will be updated as new default bank account. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold HSBC Asset Management (India) Pvt. Ltd. (Investment Manager to HSBC Mutual Fund), their appointed service providers or representatives responsible. I/We will also inform HSBC Asset Management (India) Pvt. Ltd., about any changes in my/our bank account. I/We will not hold the Fund/AMC/RTA for any delay in payment, if any redemption is submitted within few days of submission of change of bank mandate and understand that the AMC/RTA may hold any redemption payment pending for verification of such change in bank mandate received prior to the redemption submission date. The AMC/RTA reserves a right to call for any additional details and/or documents. I/We also understand that the fund/AMC/RTA reserve a right to process any redemption with old bank mandate as redemption and change of bank mandate, are considered as two separate requests.

X	X	X
Sole/First Applicant/Guardian/PoA	Second Applicant/PoA	Third Applicant/PoA

Please read the below instructions carefully before filling the form. 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. Your investment would be processed in the specified folio. Your personal information and bank account details would apply to this investment as well.
Contact Details: 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. 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.
* Please mention 14 digit KYC Identification Number (KIN) and Date of Birth if KYC is registered under Central KYC Records Registry (CKYCR).
- Permanent Account Number (PAN):** Furnishing of PAN is mandatory for all applicants except where specific dispensation is provided under law.
2. **Smart SIP Combo:** Investor has an option to choose from pack of schemes of HSBC Mutual Fund by issuing a single cheque or ECS mandate. Following Smart SIP Combo available:
 - **Balanced SIP Combo** – This combo is suitable for investors wanting to maintain a disciplined asset allocation. This combo invests in HSBC Aggressive Hybrid Fund, HSBC Balanced Advantage Fund and HSBC Equity Savings Fund and is ideal for investors who are new to equity investing.
 - **Essential SIP Combo** - This combo is suitable for investors looking to build the core of their portfolio. This combo invests in HSBC Flexi Cap Fund, HSBC Value Fund and HSBC Midcap Fund and is ideal for investors who are looking to build wealth in the long term.
 - **Exclusive SIP Combo** - This combo is suitable for investors looking to add the much needed zing to their portfolio. This combo offers blend of HSBC Business Cycles Fund, HSBC India Special Situations Fund, HSBC Infrastructure Fund that uncovers those companies that have the potential to show maximum growth in the long term.
 - **Market Cap SIP Combo** - This combo is suitable for investors looking to strike a balance between large, mid and small cap allocation. This combo offers mix of large, mid and small cap companies for growth across equities through HSBC Large Cap Fund, HSBC Midcap Fund and HSBC Small Cap Fund. This combo is ideal for investor's seeking better growth with slightly higher risk appetite.
 - **DIY (Do It Yourself) Pack** - This combo offers freedom to choose from our wide range of equity and debt schemes and create combination that best suits your needs. This combo is ideal for investors seeking maximum returns through a customized portfolio.
 - **Minimum application amount and number of instalments:**

Frequency	Minimum Installment Amount			Minimum number of Installments			SIP Dates ➡
	Equity and Hybrid Schemes#	Debt and Fund of Funds (FoF) Schemes#	HSBC ELSS Tax Saver Fund ¹	Equity and Hybrid Schemes#	Debt and Fund of Funds (FoF) Schemes#	HSBC ELSS Tax Saver Fund*	
Daily	Rs. 500/-	Rs. 500/-	Not Applicable	Minimum 6 installments subject to aggregate of Rs. 6,000/-		Not Applicable	Monday to Friday ²
Weekly	Rs. 500/-	Rs. 500/-	Rs. 500/-	Minimum 6 installments subject to aggregate of Rs. 6,000/-		Minimum 6 installments subject to aggregate of Rs. 3,000	Any Day from Monday to Friday
Monthly	Rs. 500/-	Rs. 1,000/- ³ ‡ Rs. 500/- for HSBC Gold ETF FoF Fund	Rs. 500/-	Minimum 6 installments subject to aggregate of Rs. 6,000/-		Minimum 6 installments subject to aggregate of Rs. 3,000	Any Date of the month
Quarterly	Rs. 1,500/-	Rs. 1,500/-	Rs. 500/-	Minimum 4 installments subject to aggregate of Rs. 6,000/-		Minimum 6 installments subject to aggregate of Rs. 3,000	

in multiples of Re. 1/- * in multiples of Rs. 500/-

\$ Daily SIP will be processed from Monday to Friday. In case of a non-business day falling between Monday to Friday (both days inclusive) then the daily SIP installment for that day will not be processed on the next business day.

- ❖ In case investor has missed to tick the date for Monthly and Quarterly frequency then the default date will be considered as 10th. Similarly, in case of Weekly SIP frequency the Default day will be considered as Wednesday. In case the chosen date falls on a Non-Business Day or on a date which is not available in a particular month, the SIP will be processed on the immediate next available Business Day. If the choice of date selected is more than one date then the SIP installment will be processed only for Business Days when NAV is available. No SIP installment shall be processed for Saturday, Sunday or any other non-business day.
 - The SIP frequency considered for Multi Scheme SIP Investment is only Monthly.
 - A minimum gap of 21 Calendar Days needs to be maintained between the first and second SIP installments.
 - Investors can discontinue a SIP at any time by sending a written request to any Official Point of Acceptance or to the registrar CAMS. Please note that effect from December 1, 2024 it would take T+2 Business days for the SIP to discontinue from the date of receipt of the duly filled request. Any installment due during this period might get debited from the bank account if it falls within T+2 Business days. The AMC reserves the right to introduce/discontinue SIP/ variants of SIP from time to time. Further in case of 3 consecutive SIP payment instructions provided by the investor are dishonored for insufficiency of funds, the AMC reserves the right to discontinue the SIP.
 - The default IDCW frequency will be considered for applicable schemes, please refer KIM for default IDCW frequencies of the schemes.
 - If you are not investing through a Distributor, please suffix "Direct Plan" after the scheme name.
 - Third Party Payments for investments are not accepted except in the below cases :
 - Payment by employer on behalf of employees under SIP or lump sum subscription through Pay Roll deductions or deductions out of expense re imbursements.
 - Custodian on behalf of an FPI or Client made by Custodian.
 - Payment by an AMC to its empanelled distributor on account of commission/incentive etc. in the form of Mutual Fund units through SIP or lump sum /one time subscription.
 - Payment by a Corporate to its Agent/Dealer/Distributor on account of commission or incentive payable for sale of its goods/ services in the form of Mutual Fund units through SIP or lump sum /one time subscription.
- In the above cases, necessary declaration/ banker's certificate needs to be provided confirming the source of funds for the investment. Please refer the SAI for more details.

3. OTM Debit Mandate Form for NACH/ECS/Auto Debit:

- Please fill all the required details in the Debit Mandate Form for NACH/ECS/Auto Debit. The sole/first holder must be one of the holders in the bank account..
 - The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
 - The 9 digit MICR and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.
 - From date and To date is mandatory. However, the maximum duration for enrollment is 40 years.
- Mandatory Information to be provided by investors in One Time Debit Mandate Form (OTM):** • Date of Mandate • Bank A/c Type • Bank Account Number • Bank Name • IFSC and/or MICR Code • Maximum Amount (Rupees in figures and words) • Folio No./Application. No. • Mandatory From Date • Mandate To Date • Signature(s) as per Bank records • Name(s) as per Bank records

4. Investment & Payment Details:

- Your investment cheque should be crossed "Account Payee only" and drawn favoring "HSBC Multi Scheme SIP".
- Initial cheque amount should be equal to Total SIP amount
- Please ensure that the investment cheque issued by you complies with CTS 2010 requirement Stipulated by the Reserve Bank of India. The words "CTS 2010" should appear on the face of the cheque.
Payments made by Cash/Money Order/Postal Order, Non- MICR cheques Outstation cheques are not accepted.
- Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.**

5. Declarations & Signatures:

Unit holders need to sign here in accordance to the Mode of Holding provided to us.

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 Services.

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

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	EUIN	Branch Code	Time Stamp
361161			E689889		

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.

Investor's Declaration where EUIN is not furnished: I/We confirm that the EUIN 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	X	2nd applicant / Authorised Signatory	X	3rd applicant / Authorised Signatory	X
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1 UNIT HOLDER INFORMATION

Name of Sole/1st Unit Holder	First Name	Middle Name	Last Name
Folio No.		Date of Birth^ ~	D D M M Y Y Y Y
	First Unit Holder	Second Unit Holder	Third Unit Holder
PAN/PEKRN**			
KIN^			
Email ID			
E-mail belongs to:			
☐ Self ☐ Spouse ☐ Guardian (to Minor investment) ☐ Dependant Children ☐ Dependant Parents ☐ Dependant Siblings ☐ Custodian ☐ POA ☐ PMS			
~ Transactions subject to rejection if minor has turned major and relevant documents for change in status not submitted. Refer SID/SAI for instructions related to folios held in the name of Minor. 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 SYSTEMATIC TRANSFER PLAN (STP)\$ (Please write Scheme Name/Plan/Option/Sub-option below) Registration Cancellation

Transfer From:	Scheme Name	HSBC	Scheme Name	Transfer To:	Scheme Name	HSBC	Scheme Name
Plan				Plan			
Option/Sub-option				Option/Sub-option			
STP Frequency:	☐ Daily^ ☐ Weekly ^ ☐ Fortnightly ☐ Monthly (Default [¶]) ☐ Quarterly (10th)						
STP Day:	☐ Monday ☐ Tuesday ☐ Wednesday (Default^*) ☐ Thursday ☐ Friday						
Transfer Options:	☐ Fixed Amount ☐ Capital Appreciation (1st Business Day of the month)						
Transfer Amount:	Amount per instalment Rs.			(Minimum Transfer Amount for Liquid & Overnight - Rs. 1,000. All other Schemes - Rs. 500)			
Installment commencing:	From	M M Y Y Y Y	To	M M Y Y Y Y	Or	☐ Until Canceled (Default)*	
STP Date	☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st						
\$ To be submitted 7 days prior to the STP date incase of Registration & 14 days incase of Cancellation. 6 installments for registration. The minimum amount required under the source scheme for registering STP is ₹ 6,000. Default Date will be applied in case of no information, ambiguity or discrepancy. ¶ If no debit date is mentioned default date would be considered as 10th of every month/quarter. ^ Daily and Weekly STP facility shall be available only under Fixed Amount Systematic Transfer Plan. If the day for Weekly STP is not selected, Wednesday will be the default day. * If end date is not mentioned, Until Canceled will be the default option.							

3 IDCW TRANSFER PLAN (IDCWTP)

SOURCE SCHEME (From where you wish to transfer the amount)			
Scheme Name	HSBC	Scheme Name	Plan
Option/Sub-Option (✓)	☐ Reinvestment of IDCW@ ☐ Payout of IDCW@		
TARGET SCHEME (To where you wish to transfer the amount)			
Scheme Name	HSBC	Scheme Name	Plan
Option/Sub-Option (✓)	☐ Reinvestment of IDCW@ ☐ Payout of IDCW@		
IDCW Frequency	☐ Daily ☐ Weekly ☐ Monthly ☐ Quarterly ☐ Fortnightly ☐ Half Yearly ☐ Yearly		
@ Note: IDCW stands for 'Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of the sale price that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculated in accordance with the Regulations).			

Received from _____ Folio No. _____

Scheme _____ Plan _____ Option/Sub-option _____

☐ STP Instalment amount Rs. _____ Frequency: ☐ Daily ☐ Weekly ☐ Fortnightly ☐ Monthly ☐ Quarterly
☐ IDCWTP ☐ SWP Amount Rs. _____ OR _____ Units
 Frequency: ☐ Monthly ☐ Quarterly ☐ Half-Yearly ☐ Yearly

4 SYSTEMATIC WITHDRAWAL PLAN (SWP)\$ (Please write Scheme name/Plan/Option/Sub-option below) ☐ Registration ☐ Cancellation

Scheme:	HSBC		Scheme Name		Plan
Option/Sub-option*					
SWP Frequency:	☐ Monthly (Default) ☐ Quarterly (10th) ☐ Half-Yearly ☐ Yearly				
Withdrawal Options:	☐ Fixed Amount ☐ Capital Appreciation [¥] (1st Business Day of the month) (Redemption amount will equal appreciation)				
Period of enrolment:	From M M Y Y Y Y To M M Y Y Y Y				
Withdrawal preference:	Amount Rs. OR Units (Redemption amount will equal appreciation)				
Minimum Amount for SWP: For Liquid & Overnight Schemes - Rs. 1,000 and in multiples of Re. 1/- thereafter or 1 unit or in multiples of 1 unit. All other Schemes - Rs. 500 and in multiples of Re. 1/- thereafter or 50 units or in multiples of 1 unit.					
SWP Date	☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th (Default) ☐ 11th ☐ 12th ☐ 13th ☐ 14th ☐ 15th ☐ 16th ☐ 17th ☐ 18th ☐ 19th ☐ 20th ☐ 21st ☐ 22nd ☐ 23rd ☐ 24th ☐ 25th ☐ 26th ☐ 27th ☐ 28th ☐ 29th ☐ 30th ☐ 31st				
BANK DETAILS FOR THE ABOVE WITHDRAWAL					
#Bank A/C No.					A/c. Type: ☐ Current ☐ Savings ☐ NRO ☐ NRE ☐ FCNR ☐ Others
Bank Name					
\$ To be submitted 7 days prior to the SWP date in case of Registration ^^ Minimum 6 installments for Liquid and Overnight and 12 installments for all Other Schemes for registration. The minimum amount required under the source scheme for registering SWP is ₹ 6,000. ¥ Available for Growth Plan only. # Please specify the bank details in which you wish to receive the redemption proceeds. Kindly note that this bank account should be one of the registered bank account in the folio else by default the redemption proceeds will be credited into the default bank account. Also this cannot be treated as change of bank mandate.					

5 DECLARATION & SIGNATURES (To be signed as per Mode of Holding)

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. I/We understand that the upfront commission will be paid directly by me/us to the AMFI registered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed the commissions to me/us (in trail commission or any other), payable to him for different schemes of mutual funds from amongst which the scheme is being recommended to me/us.

I/We confirm that the details provided by me/us are true and correct. I/We hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/ us to the group companies of HSBC for any valid business purposes including marketing or sales promotion or with any statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.

X	X	X
Sole/First Applicant/Guardian/PoA	Second Applicant/ PoA	Third Applicant/PoA

GENERAL INSTRUCTIONS

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. Please note in case of any error while filling the form all applicants must sign against the corrections.

Systematic Transfer Plan (STP):

- STP will be registered within 7 calendar days from the date of your request.
 - You can cancel a registered STP at any time by submitting a written request. The cancellation will be processed within 14 days.
 - If the plan/option of the source scheme is not mentioned and there is only one plan/option available in the folio, the STP will be processed.
 - If the plan/option of the target scheme is not mentioned, the STP will be processed as per the default options mentioned in the Scheme Information Document of the respective scheme.
 - If no debit date is mentioned default date would be considered as 10th of every month/quarter.
 - STP transfers can be made on a daily basis i.e. Monday to Friday subject to such days being business days. Daily STP is available only for fixed amounts.
 - Weekly STP facility shall be available only under Fixed Amount Systematic Transfer Plan. If the day for Weekly STP is not selected, Wednesday will be the default day
 - Minimum Transfer Amount:**
 - For Liquid & Overnight Schemes - Rs. 1,000 and in multiples of Re. 1 thereafter (Minimum Installment - 6).
 - All other Schemes - Rs. 500 and in multiples of Re. 1 thereafter (Minimum Installment - 6).
- The minimum amount required under the source scheme for registering STP is ₹ 6,000.
- In case the criterion of the minimum amount for the purpose of transfer of units under the STP facility is not met, the AMC reserves the right to discontinue the STP/cancel the registration for STP.

Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.

IDCW Transfer Plan (IDCWTP):

- IDCW Transfer Plan facility is available in the IDCW options under all open ended schemes of the HSBC Mutual Fund except HSBC Tax Saver Equity Fund where in the said scheme can only be the Source scheme and not the Target Scheme.
- The minimum amount of IDCW eligible for transfer under the IDCWTP facility is Rs. 100 (as reduced by the amount of applicable statutory levy). In case the amount of IDCW is less than or equal to Rs. 100 per folio, the same will get compulsorily reinvested in the Source Scheme as per applicable NAV.
- Under the IDCWTP facility, IDCW declared in the Sources Scheme will be automatically invested in the Target Scheme as per the applicable NAV of the Business Day immediately succeeding the record date.
- The provisions pertaining to "Minimum Initial Application Amount" and "Minimum Additional Application Amount" in respect of the Target Scheme will not be applicable for the investments made through the IDCWTP facility.
- Units allotted under the IDCWTP facility will be subject to exit load as per the provisions specified in the Scheme Information Document of the Target Scheme.

Systematic Withdrawal Plan (SWP):

- SWP will be registered within 7 calendar days from the date of your request.
- You can cancel a registered SWP at any time by submitting a written request. The cancellation will be processed within 14 days.
- If your SWP request specifies both amount and units, the SWP will be processed on the basis of amount.
- If the scheme/plan/option is not mentioned and there is only one scheme/plan/option available in the folio, the same will be processed.
- If no debit date is mentioned default date would be considered as 10th of every month/quarter. If the day for Weekly STP is not selected, Wednesday will be the default day.
- Minimum Amount for SWP:**
 - For Liquid & Overnight Schemes - Rs. 1000 and in multiples of Re. 1 thereafter or 1 unit (Minimum Instalment - 6)
 - All other Schemes - Rs. 500 and in multiples of Re. 1 thereafter or 50 units or in multiples of 1 unit (Minimum Instalment - 12)
- In case the criterion of the minimum amount for the purpose of transfer of units under the SWP facility is not met, the AMC reserves the right to discontinue the SWP/cancel the registration for SWP.

CALL US AT				Self-service request at your Fingertips
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 Services.				
TOLL FREE NUMBERS				
Description	Investor related queries	Distributor related queries	Online related queries	
Toll Free No.	1800-4190-200/1800-200-2434	1800-419-9800	1800-4190-200/1800-200-2434	Investor (Dialing from abroad)
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