

(Please refer Product labeling available on cover page of the KIM and terms and conditions overleaf)

The Application Form should be completed in ENGLISH and in **BLOCK LETTERS** only. Please tick in the appropriate box wherever applicable and strike off the section(s) not in use.

Use separate forms for pausing multiple SIPs under one/multiple scheme(s) in a folio.

1. Existing Folio Details	
Folio No.	
Existing UMRN	(If UMRN is registered in the folio)
A. First / Sole Investor	Name PAN / PEKRN
B. Gurdian	Name PAN / PEKRN

2. Existing SIP Details (Refer instruction 7)				
Scheme/Plan/Option/Sub-option	SIP Installment Amount (₹)	SIP Date(s)	Frequency	Registered Period
Mahindra Manulife			☐ Monthly ☐ Quarterly	Start: End : or ☐ Until cancelled

3. Pause SIP Details (Refer instructions 3,4,5 & 6)	
Pause SIP Start Date:	
Pause SIP End Date:	
(Pause SIP request must be submitted 15 days in advance of the next SIP installment date)	
*No. of installments by default is 3 under monthly frequency and only 1 under quarterly frequency.	

4. Declaration and Signature(s)
I/We have read and understood the contents of the scheme related documents (i.e. Scheme Information Document / Key Information Memorandum & Statement of Additional Information) of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations of the Scheme(s) including the terms and conditions/instructions pertaining to the Pause SIP Facility as on the date of this transaction. I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Fund, its Sponsor/s, Trustees, AMC, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi- judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the AMC / the Fund, their appointed service providers or representatives responsible.

Sign Here First/Sole Unit holder / Guardian / Karta / PoA Holder	Sign Here Second Unit holder	Sign Here Third Unit holder
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Please note: Signature(s) should be as appearing in the folio and in the same order In case the mode of operation is joint, all Unit holders are required to sign this application.

TEAR HERE