

Application Form

SIP Plus

HSBC Mutual Fund

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units)

Distributor / Broker ARN	Sub-Broker Code
ARN - 0155 NJ India Invest	

Application No. : SP

For Office Use Only

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

1 EXISTING UNITHOLDER [Please fill in your Folio No. below. Please furnish only KYC and PAN details in Section 2 (if not provided earlier) and proceed to Auto Debit Form]

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

2 APPLICANT'S INFORMATION (Please fill in Block Letters use one box for one alphabet leaving one box blank between two words)

SOLE / FIRST APPLICANT'S PERSONAL DETAILS

Name Mr Ms M/s

PAN** (Mandatory) Enclosed (✓) PAN Card Copy KYC Compliance Proof*

Date of Birth[‡] (Mandatory for Minors)

Occupation[‡] (✓) Private Sector Service Public Sector / Government Service Business Professional Agriculturist Retired
 Housewife Student Forex Dealer Others (Please specify) _____

Guardian Name (if Sole / First applicant is a Minor) **Contact Person** (in case of Non-individual Investors only)

Mr Ms M/s

PAN** (Mandatory) Enclosed (✓) PAN Card Copy KYC Compliance Proof*

Date of Birth[‡] (Mandatory for Minors) (PAN/KYC Compliant not required for contact person but required for Guardian of Minor)

Nationality[‡] **Country of Residence[‡]**

Address for Correspondence[‡] [P.O. Box Address is NOT sufficient] (Should be same as in CVL records, please refer to point 6 in Important Instructions)

City Pin Code

State Country

Contact Details

Phone O Extn. Fax
 R Mobile

Receive Account Statement, Annual Reports and other information instantly by e-mail* **I/We wish to receive updates via SMS on my mobile (✓)**

e-mail

I / We wish to receive the above by email *** Note :** Where the investor has not opted for any option or has opted for both options, the application will be processed as per the default option, i.e., receive the account statement, annual reports and other correspondence by e-mail and receive SMS updates on Mobile.
 I / We do not wish to receive the above by email

Overseas Address (Mandatory in case of NRI / FII applicant in addition to mailing address) (Should be same as in CVL records, please refer to point 9 in Important Instructions)

City

State Country Zip Code

Status (✓) Resident Individual Minor Partnership Company HUF FII NRI Trust Society AOP / BOI Others _____

Mode of Holding (✓) Single Joint Anyone or Survivor

Name of Second Applicant

Mr Ms M/s

PAN** (Mandatory) Enclosed (✓) PAN Card Copy KYC Compliance Proof*

Name of Third Applicant

Mr Ms M/s

PAN** (Mandatory) Enclosed (✓) PAN Card Copy KYC Compliance Proof*

PoA Holder Details* (If the investment is being made by a Constituted Attorney please furnish Name and PAN of PoA holder)

Mr Ms M/s

PAN** (Mandatory) Enclosed (✓) PAN Card Copy

* W.e.f. 01 February, 2008, if the investment is Rs. 50,000 and above, **all the applicants including PoA Holder** need to be KYC Compliant. Please see point 7 under Important Instructions.

** Please note that w.e.f. 01 January, 2008, copy of PAN Card is Mandatory for all investors (including Joint Holders, Guardian in case of Minor and NRIs). Please submit photocopy of PAN Card (alongwith the original) for verification, which will be return across the counter. Please see point 6 under Important Instructions.

‡ Please note that information sought here will be obtained from CVL also. In case of any differences, the CVL input will apply.

...continued overleaf %

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

Application No. : SP

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

Received from Mr Ms M/s application for
 Units of Scheme _____ Plan _____ Option/Sub-option _____

Total Cheques ECS (Debit Clearing) / Direct Debit Facility Total Amount (Rs.)

Date **Please Note :** All purchase are subject to realisation of cheques.

ISC Stamp, Signature & date

3 BANK ACCOUNT DETAILS (MANDATORY as per SEBI Guidelines)

My / our bank details are the same as mentioned in point 1 of the Auto Debit Form (✓) Yes No
 If no, please provide the following details:
 A/c. No. _____ A/c. Type (✓) Current Savings NRO* NRE* * For NRI Investors
 Bank Name _____
 Branch Address _____ City _____
 MICR Code _____ RTGS IFSC Code _____ NEFT IFSC Code _____
(9 digit number next to your Cheque No.)
 For Rupees One lakh and above For less than Rupees One lakh
 Please also provide a cancelled cheque leaf of the same bank account as mentioned above.
 Mentioning your RTGS IFSC Code or NEFT IFSC Code, as applicable, will help us transfer the amount to your bank account quicker, electronically.

4 INVESTMENT DETAILS (Please (✓) Scheme / Plan / Option and then choose Option A, B or C below) (Please use separate forms for Options A, B and C below)

Scheme † (✓) HEF HIOF HPTF HMEF HTSF HDF Plan / Option (✓) Growth Dividend Reinvestment Dividend Payout

(A) MONTHLY SIP : SIP Date 3rd 10th 17th 26th 30th ## All Dates Period of enrolment 36 months 48 months 60 months
 Amount (Rs. Figures) _____ (minimum instalment amount is **Rs. 2000**)
 The first SIP instalment cheque should be dated the date of submission of the Application Form. Auto-Debit instructions will apply for subsequent installments beginning with the nearest SIP Date at least 25 business days after the first SIP Date. Please note that the first SIP instalment cheque and Auto-Debit instruction should be for the same amount. Any SIP into equity scheme listed under † is eligible for insurance cover (Insurance cover per SIP is = instalment amount x tenure). Maximum total insurance cover per investor is Rs. 10,00,000. ## Last day of the month for February

(B) STP : From Scheme (✓) HIF HGF HMIP HFRF HCF HUSBF HFDF
 STP Date (✓) 3rd 10th 17th 26th 30th ## All Dates Period of enrolment 36 months 48 months 60 months
 Amount (Rs. Figures) _____ (minimum instalment amount is **Rs. 2000**)
 Any STP into equity scheme listed under † is eligible for insurance cover (Insurance cover per STP is = instalment amount x tenure). Maximum total insurance cover per investor is Rs. 10,00,000. ## Last day of the month for February

(C) LUMP SUM INVESTMENT : Scheme **HSBC TAX SAVER EQUITY FUND** Amount (Rs. Figures) (Min investment amount Rs. 10,000)
 Only minimum investment of Rs.10,000 in HSBC Tax Saver Equity Fund qualifies for insurance cover (Insurance cover = amount invested). Please use the normal form for investment of lesser denomination.

(D) MICRO SIP : Date of Birth DD MM YY YY Supporting Document type* _____ Reference No. (if available) _____
 ## Last day of the month for February. *For the permissible list of applicable documents please refer to Page 8.

5 PAYMENT MECHANISM (✓ any one only)

(A) Cheques (Please provide the details) Total No. of Cheques _____ Cheque Nos. From _____ To _____
 Drawn on Bank _____ City _____
 Branch _____
 A/C No. _____ A/c. Type (✓) Current Savings NRO* NRE* * For NRI Investors

(B) ECS (Debit Clearing) / Direct Debit Facility (Please complete the SIP Auto Debit Form if you have ticked Option B)
 First instalment has to be through cheque / DD. Bank _____
 Cheque / DD No. _____ Branch _____

With respect to the cheque for the 1st instalment, 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 is (✓) Spouse Child Parent Relative Sibling Friend Others. Application Form without this information is liable to be rejected.

6 NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly) (ref. important instruction 11)

I/We _____ and _____ (strike out which is not applicable)
 do hereby nominate the undermentioned nominee(s) to receive the units allotted to my / our credit in my Folio in the event of my / our death.
Name and Address of Nominee(s) If the nominee is a minor, Name & Address of the guardian is Mandatory

	First Nominee	Second Nominee	Third Nominee
Name			
Guardian's Name			
Address			
Allocation %			
Date of Birth (if nominee is a minor)			

7 DECLARATION AND SIGNATURES

The Trustees, HSBC Mutual Fund
 Having read and understood the contents of the Combined Scheme Information Document, SAI and Addenda of the Scheme(s) issued till date, I/We hereby apply under Direct / AMFI Certified empanelled distributors to the Trustees of HSBC Mutual Fund for units of the Scheme / Plan / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of 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 hereby authorise HSBC Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment 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. I/We hereby declare that the particulars given above are correct and express my / our willingness to make payments referred above through participation in ECS / Direct Debit Facility. 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 have read and agreed to the terms and conditions for ECS / Direct Debit. *1/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/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) of HSBC Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.
 *Applicable to NRI
 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/We do not have any existing Micro SIP** investments which together with the current application will result in aggregate investments exceeding Rs. 50,000/- in a year. (Applicable for Micro SIP investments only.)

Sole / First Applicant / Guardian / PoA	
Second Applicant / PoA	
Third Applicant / PoA	
Date	_____

Applications from investors resident in USA or Canada shall be rejected.
 Default options will be applied in cases where the information provided is either ambiguous or has any discrepancy.

CALL US AT

HSBC MUTUAL FUND INVESTOR SERVICE CENTRES :

- Ahmedabad : Tel : 98983 77319 • Bengaluru : Tel : 080 4118 6519 • Chandigarh : Tel : 0172 500 8119 • Chennai : Tel : 044 4200 8719 • Coimbatore : Tel : 98944 77319
- Hyderabad : Tel : 040 6667 4719 • Indore : Tel : 98934 77319 • Kochi : Tel : 98954 77319 • Kolkata : Tel : 033 2213 9919 • Lucknow : Tel : 99367 97319
- Mumbai : Tel : 022 6666 8819 • New Delhi : Tel : 011 4149 0719 • Pune : Tel : 020 2600 1119 • Vadodara : Tel : 98983 77319

CAMS CENTRES: Tel.: 1-800-200-2267

Contact us at hsbcmf@hsbc.co.in

Visit us at www.assetmanagement.hsbc.com/in

AUTO DEBIT FORM - For SIP Investments -
Please use this Form if you have ticked Option B under Section 5 of Application Form.

1 ECS DEBIT BANK ACCOUNT DETAILS (MANDATORY) (Cheque should be drawn on bank, details provided below or please attach cancelled Cheque copy.)

I / We hereby authorise HSBC Asset Management (India) Pvt. Ltd., Investment Manager to HSBC Mutual Fund acting through their authorised service providers to debit my / our following bank account by ECS (Debit Clearing) / Direct Debit Facility or any other facility for collection of SIP payments.

Name of the Account Holder as in Bank Records First Name Middle Name Last Name

Name of the Bank

Branch Address City

Account Number A/c. Type (✓) Current Savings NRO* NRE* * For NRI Investors

Monthly Debit Amount SIP Date (✓) Monthly: 3rd 10th 17th 26th 30th ## All Dates
 Quaterly (10th) ## Last day of the month for February

MICR Code (9 digit number next to your Cheque No.) SIP Period Start Date End Date

2 AUTHORISATION OF THE BANK ACCOUNT HOLDER [to be signed by the Account Holder(s)]

This is to inform I / we have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Direct Debit Facility and that my / our payment towards my / our investment in HSBC Mutual Fund shall be made from my / our below mentioned bank account number with your bank. I / We authorise HSBC Asset Management (India) Pvt. Ltd. (Investment Manager to HSBC Mutual Fund), acting through their service providers and representative carrying this ECS mandate / Direct Debit Facility Form to get it verified & executed. Mandate verification charges, if any, maybe charged to my / our account.

SIGNATURE(S) (As In Bank Records)

Account Number

Sole/First Account Holder Second Account Holder Third Account Holder

AUTO DEBIT FORM - For MICRO SIP Investments -
Please use this Form if you have ticked Option B under Section 5 of Application Form.

1 ECS DEBIT BANK ACCOUNT DETAILS (MANDATORY) (Cheque should be drawn on bank, details provided below or please attach cancelled Cheque copy.)

I / We hereby authorise HSBC Asset Management (India) Pvt. Ltd., Investment Manager to HSBC Mutual Fund acting through their authorised service providers to debit my / our following bank account by ECS (Debit Clearing) / Direct Debit Facility or any other facility for collection of SIP payments.

Name of the Account Holder as in Bank Records First Name Middle Name Last Name

Name of the Bank

Branch Address City

Account Number A/c. Type (✓) Current Savings NRO* NRE* * For NRI Investors

Monthly Debit Amount SIP Date (✓) Monthly: 3rd 10th 17th 26th 30th ## All Dates
 Quaterly (10th) ## Last day of the month for February

MICR Code (9 digit number next to your Cheque No.) SIP Period Start Date End Date

2 AUTHORISATION OF THE BANK ACCOUNT HOLDER [to be signed by the Account Holder(s)]

This is to inform I / we have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Direct Debit Facility and that my / our payment towards my / our investment in HSBC Mutual Fund shall be made from my / our below mentioned bank account number with your bank. I / We authorise HSBC Asset Management (India) Pvt. Ltd. (Investment Manager to HSBC Mutual Fund), acting through their service providers and representative carrying this ECS mandate / Direct Debit Facility Form to get it verified & executed. Mandate verification charges, if any, maybe charged to my / our account.

SIGNATURE(S) (As In Bank Records)

Account Number

Sole/First Account Holder Second Account Holder Third Account Holder

ECS / Direct Debit - Terms & Conditions

- ECS facility is offered to the investors having bank accounts in **select cities mentioned below.**
 - Agra • Agra • Ahmedabad • Allahabad • Amritsar • Asansol • Aurangabad • Bangalore • Bardhaman • Baroda • Belgaum • Bhiwara • Bhopal • Bhubaneswar • Bijapur • Calicut • Chandigarh • Chennai • Cochin • Coimbatore • Cuttack • Davangere • Dehradun • Delhi • Dhanbad • Durgapur • Erode • Gadag • Gorakhpur • Guwahati • Gwalior • Haldia • Hubli • Hyderabad • Indore • Jabalpur • Jaipur • Jalandhar • Jammu • Jamshedpur • Jodhpur • Kakinada • Kanpur • Kolhapur • Kolkatta • Lucknow • Ludhiana • Mandya • Mangalore • Mumbai • Mysore • Nasik • Nagpur • Nellore • Panjim • Patna • Pune • Raipur • Rajkot • Ranchi • Salem • Shimla • Shimoga • Sholapur • Siliiguri • Surat • Tirupati • Trichur • Trivandrum • Tumkur • Udaipur • Udipi • Varanasi • Vijayawada • Vizag
- The cities in the list may be modified / updated / changed / removed at any time in future entirely at the discretion of HSBC Mutual Fund without assigning any reason or prior notice. If any city is removed, SIP instructions for investors in such cities via ECS (Debit) route will be discontinued without prior notice.
- The bank account provided for ECS (Debit) should participate in local MICR clearing.
- Investor will not hold HSBC Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles of ECS / Direct Debit Facility.
- HSBC Asset Management (India) Pvt. Ltd., registrars CAMS and other service providers shall not be responsible and liable for any damages / compensation for any loss, damage etc. incurred by the investor. The investor assumes the entire risk of using this facility and takes full responsibility.
- You can choose to discontinue this facility by giving 25 Business Days written notice to our Registrar CAMS.
- HSBC AMC and its service providers reserve the right to disclose the details of the Investors and their transactions using the SIP Auto Debit to third parties for the purposes of verification and execution of the Auto Debit Facility as also for the purpose of law enforcement, fraud prevention, audit and inspection requirement etc.
- The Investor undertakes and agrees that the SIP Auto Debit Facility requested for via this Form is subject to acceptance of the terms and conditions mentioned in Combined Scheme Information Document.
- Please refer Addendum dated September 28, 2007.

List of Banks / Branches for SIP Direct Debit Facility:

Banks	Branches
Axis Bank Ltd., Centurion Bank of Punjab, HDFC Bank Ltd., IndusInd Bank Ltd., IICI Bank, IDBI Bank Ltd., ING Vysya Bank Ltd. and Kotak Mahindra Bank Ltd.	All Branches
Bank of Baroda, Bank of India and Punjab National Bank	Select Branches

Insurance - Terms and Conditions

- Age (Entry Age)- 20 yrs to 50 yrs completed as on last birthday Cover Period - 36 months or 48 months or 60 months only.
- The Insurance Tenure = SIP tenure. The insurance tenure is available in multiples of one year and for a maximum 5 years.
- Minimum HSBC SIP of Rs.2000 for a minimum period of 36 months.
- Only individuals / Karta of HUF are eligible for the Insurance Cover under the SIP Plus Product.
- Cover shall automatically stand cancelled upon occurrence of any of the below events*:
 - Instruction to cease the SIP.
 - Non-payment of more than 2 consecutive SIPs and 4 Defaults in total.
- Please refer Addendum dated September 28, 2007.
- For further details please visit www.assetmanagement.hsbc.com/in