

# Distributor Service Request Form

For legibility, please use BLOCK LETTERS in black or dark ink.

Stamp & Date

| ARN                |          | IE     | $\top$   |               |         | _       | _        | _        | _        | _        |      |      |       |          |       |        |       |       |       | _    |      |      |      |      | Т    | Т     | Т     | Т    |       |       |       |      | _    |        | Т     |
|--------------------|----------|--------|----------|---------------|---------|---------|----------|----------|----------|----------|------|------|-------|----------|-------|--------|-------|-------|-------|------|------|------|------|------|------|-------|-------|------|-------|-------|-------|------|------|--------|-------|
| ARN                |          |        | <u> </u> | Ш             |         | <u></u> | <u> </u> | Ļ        |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
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| CHANGE IN          | BANK     | ACC    | OU:      | NT            | (see    | no      | ote 2    | 2)       |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| I/We would like    |          |        | acility  | y of r        | eceiv   | ving    | brok     | erag     | ge pa    | aym      | ents | thr  | ougl  | h Nl     | EFT/  | RTC    | GS a  | nd fu | ırnis | h be | elow | my   | /our | Bar  | ık E | Oetai | ls fo | r th | is pı | irpos | se:   |      |      |        |       |
| New Accoun         |          | ils    |          |               |         |         |          |          |          |          |      |      |       |          | 7     |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| Account Number     | er       |        |          |               |         |         |          |          |          |          |      |      |       |          |       | F      | Acco  | unt   | Тур   | e (• | ()   |      | Cur  | rent |      |       | Sav   | ing  | S     |       |       |      |      |        |       |
| Bank Name          |          |        |          |               |         |         |          |          |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| Bank Address       |          |        |          |               |         |         |          |          |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        | T     |
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| City               |          |        |          |               |         |         |          |          |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      | Pin   | Co    | de    |      |      |        |       |
| State              |          |        |          |               |         |         |          |          |          |          |      |      |       |          | C     | ount   | ry    |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| MICR Code          |          |        | $\top$   |               | $\Box$  |         |          |          |          |          | IFS  | C (  | RTO   | GS/I     | NEF   | T) -   | . [   |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| (This is the 9 d   | igit nur | nber 1 | next     | to yo         | our cl  | hequ    | ie ni    | ımb      | er)      |          |      |      |       |          |       |        |       | de o  | n a   | che  | que  | If   | you  | do 1 | not  | find  | it, j | plea | se a  | sk y  | our   | banl | k br | anch   | for   |
| Please enclose     | a cance  | lled c | hequ     | ie/lato       | est A   | CCO     | unt s    | tate     | emer     | nt/co    | ору  | of p | pass  | boo      | k of  | the    | Baı   | ık A  | /c n  | nent | tion | ed h | ere. | In t | he   | abse  | ence  | of   | this, | you   | ır re | ques | st m | ay n   | ot be |
| processed.         |          |        | _        |               | _       | _       | _        | _        |          | _        |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| NEW ADDRE          | SS CI    | HANG   | GE (     | OF A          | ADD     | RES     | SS (     | see      | e no     | ote      | 3)   |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
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| City               |          |        | _        |               |         |         | $\perp$  | 4        |          | _        |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      | Pin   | Co    | de    |      | 4    | _      | _     |
| State              |          |        | $\perp$  |               |         |         |          |          |          |          |      |      |       |          | С     | ount   | ry    |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| CHANGE IN          | CONT     | ACT    | DE       | TAIL          | .S (s   | see     | not      | e 4      | 1)       |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| C44                |          | О      | $\top$   | $\overline{}$ |         |         |          | $\equiv$ | $\equiv$ | $\equiv$ |      |      |       |          |       | Ex     | tn.   |       | T     |      |      | T    |      | Fa   | x    |       |       |      |       | T     | T     | T    | T    | $\top$ | Т     |
| Contact<br>Details | Phone    | R      |          |               |         |         |          | +        | +        | -        |      |      |       |          |       |        |       |       |       | M    | obil | e    |      |      | -    |       |       |      |       |       |       |      |      |        |       |
| e-mail (To be f    | illed in |        |          |               |         |         |          |          |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| Existing e-mail II |          | in ou  | r reco   | ords v        | vill be | e ren   | laced    | wit      | th the   | e e-1    | mail | IDs  | mer   | ntion    | ed ii | n this | s sec | tion  |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| DISTRIBUTO         |          |        |          |               |         |         |          |          |          |          |      | 113  | 11101 | T. T. C. |       |        | , 500 |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
| [To be signed by   |          |        |          |               |         |         |          | •        |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
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| X                  |          |        |          |               |         |         |          |          |          |          |      |      |       |          |       | ×      | (     |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |
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|                    |          |        | Auth     | oriz          | ed S    | igna    | itory    | 1        |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      | Aut  | hor  | ized  | Sig   | gnat | ory   | 2     |       |      |      |        |       |
|                    | / M      | I M    | /        | Y             | Y       | Y       | Y        |          |          |          |      |      |       |          |       |        |       |       |       |      |      |      |      |      |      |       |       |      |       |       |       |      |      |        |       |

Request submitted

# **GENERAL INSTRUCTIONS**

#### **NOTE 1 - DISTRIBUTOR DETAILS**

Please furnish your name and ARN code.

#### NOTE 2 - CHANGE IN BANK ACCOUNT DETAILS

- Please fill in the MICR code and IFSC of your bank branch in the space provided and enclose a cancelled cheque together with your request for change in bank details.
  If there is a minor mismatch in the bank account number submitted by you and the account number on the cheque, we will update the bank account number asappearing on the cheque provided your name appears on it.
- · Please note that post updating your new bank details, your future brokerage payments would be paid out electronically via NEFT/RTGS into your new bank account.

### **NOTE 3 - CHANGE OF ADDRESS**

Please provide complete details of your address and do not fill in a P.O. Box address as the same will not be updated in our records. Post updating your new address, all future correspondence including commission payment would be sent to your new address only.

#### **NOTE 4 - CHANGE IN CONTACT DETAILS**

- · Please fill in phone numbers including the STD/ISD codes, mobile number and your e-mail ID accurately.
- Once your e-mail ID is updated, brokerage structure communication will be sent to your new e-mail IDs.
- · You can register two of your e-mail IDs for mailback services from CAMS using the form in the prescribed format.

## NOTE 5 - DISTRIBUTOR SIGNATURE(S)

- · Authorised signatories should sign this section in the space provided.
- Without signature(s), this form will not be processed.

## **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 |