



## 4. SCHEMES

### DEBT

- Escorts Income Plan ( A / B )  
  Escorts Gilt Plan  
  Escorts Opportunities Fund ( A / B )  
 Escorts Liquid Plan  
  Escorts Floating Rate Fund

Default Option : Option A <10000/- (with exit load)

Default Option : Option B >10000/- (without exit load)

Minimum application for subscription is Rs. 1000/- for all the schemes except for Tax Plan which is Rs. 500/-

Amount in Figures (Rs.) \_\_\_\_\_ D.D. Charges (Rs.) \_\_\_\_\_ Net Amount (Rs.) \_\_\_\_\_

Cheque/Draft No. \_\_\_\_\_ Date \_\_\_\_\_

Amount in Words (Rs.) \_\_\_\_\_

Bank Name / Branch \_\_\_\_\_

Cheque/Draft payable in favour of "ESCORTS INCOME PLAN", "ESCORTS TAX PLAN", "ESCORTS OPPORTUNITIES FUND", "ESCORTS BALANCED FUND", "ESCORTS GROWTH PLAN" and "ESCORTS GILT PLAN", "ESCORTS LIQUID PLAN", "ESCORTS FLOATING RATE FUND", respectively.

### EQUITY

- Escorts Growth Plan  
 Escorts Tax Plan

### BALANCED

- Escorts Balanced Fund

- Growth Plan  
 Dividend Plan  
 Daily    Weekly    Monthly  
 Payout  
 Reinvestment  
 Bonus Option

Minimum investment amount Rs. 1000/- for Option A and Rs. 10,000/- for Option B

## 5. SYSTEMATIC INVESTMENT PLAN (SIP)

Frequency  Monthly  Quarterly   Enrolment Period From \_\_\_\_\_ (dd/mm/yy) To \_\_\_\_\_ (dd/mm/yy)

Please find enclosed my / our Cheque of Rs.\* \_\_\_\_\_ each for \_\_\_\_\_ Months / quarters. The Cheque date should be either 1st or 10th every month / quarter.

\* Minimum Rs. 500/- (Monthly)

\* Minimum Rs. 1250/- (Quarterly)

SIP Date  1st  10th

Cheque Nos. From \_\_\_\_\_ To \_\_\_\_\_

Drawn on Bank \_\_\_\_\_ Branch \_\_\_\_\_

## 6. SYSTEMATIC WITHDRAWAL PLAN (SWP)

Frequency  Monthly  Quarterly  Half Yearly   SWP Date  1st  10th

Scheme \_\_\_\_\_

Fixed Amount (Rs.)# \_\_\_\_\_ OR Capital Appreciation

# Minimum Rs. 1000/- Period from : M/Y \_\_\_\_\_ M/Y \_\_\_\_\_

\* In case of Appreciation Withdrawal Option Please note that first withdrawal would be effected after a month / quarter from the start date.

## 7. SYSTEMATIC TRANSFER PLAN (STP)

Frequency  Monthly  Quarterly  Half Yearly

From ELP / EFRF to \_\_\_\_\_  Fixed amount (Rs.) \_\_\_\_\_ (Min. Rs. 1000/-)  
 (Minimum balance should be Rs. 1 Lakh)    Capital Appreciation (Min. Rs. 500/-)

No. of installments \_\_\_\_\_ (Min. 6 installments)

Transfer Date  1st of every month / beginning of quarter    15th of every month / beginning of quarter

## 8. NOMINATION

Name of the Nominee \_\_\_\_\_

(Address : \_\_\_\_\_)

Name of the Guardian \_\_\_\_\_

(If the Nominee is minor)

(Relationship (If applicable) \_\_\_\_\_)

I/We hereby nominate the above person to receive all the amounts to my credit in the event of my/our death. Payment to the nominee of the redemption amounts shall discharge the Mutual Fund of all liability towards the estate of the deceased Unit holder(s) and his/her/their successor(s) legal heir(s).

## 9. E-MAIL COMMUNICATION (Optional)

I/We wish to receive the following via e-mail

Account Statement

Quarterly Review & Annual Report

Communication on Change of Address, Bank, etc.

Transaction Confirmation

## 10. DECLARATION

### The Trustee

### Escorts Mutual Fund,

I/We have read and understood the offer documents(s) of Escorts Mutual Fund. I/We apply for the units of the scheme(s) and I/We agree to abide by the terms, conditions, rules and regulations of the scheme. I/We confirm to have understood the terms & conditions. Its investment objectives, investment pattern, fundamental objectives and risk factors applicable to the respective Fund(s). I/We agree to abide by the terms, conditions, rules and regulations of the plans(s). I/We 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.

### APPLICABLE FOR NRIs/OCBs

I/We confirm that I am/We are Non-Resident(s) of Indian nationality/origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External Account / FCNR Account.  Yes  No

If yes,  Repatriation  Non Repatriation

## 11. SIGNATURES ( Please use black ink)

First / Sole Applicant

\_\_\_\_\_

Second Applicant

\_\_\_\_\_

Third Applicant

\_\_\_\_\_

For Further Enquiries Please call us at :

### North :

New Delhi : 011- 23321654, 41514100

Chandigarh : 09888828205

Lucknow : 09839220192

Jaipur : 09314519533

Gurgaon : 09312667457

Kanpur : 0512 - 2367927, 09335342818

Allahabad : 09935506749

### East :

Kolkata : 09830261721

Patna : 09835066510, 09334179682

Bokaro : 09334171028

Jamshedpur : 09934569551

### West :

Mumbai : 022-24218150 / 51 / 52 09322590339

Ahmedabad : 09327050566

Pune : 09890809099

Nagpur : 09822942434

### South :

Bangalore : 080-22075106