

Deutsche Mutual Fund

SYSTEMATIC INVESTMENT PLAN (SIP) FORM

Please use separate SIP Form for investing in each Scheme / Plan

BROKERAGE INFORMATION

| | |
|------------------------------|-----------------------|
| Broker Name & ARN | Sub-Broker ARN |
| | |

SIP Application No.

Application Date & Time

APPLICANT'S INFORMATION (Please fill in Block Letters)

Folio No. (for existing Unit holder) KYC Yes No Common Application Form No. (for New Investor)

Name of Sole / First Applicant
PAN** Enclosed (Please ✓) PAN Card copy** KYC Compliance proof

Name of Second Applicant
PAN** Enclosed (Please ✓) PAN Card copy** KYC Compliance proof

Name of Third Applicant
PAN** Enclosed (Please ✓) PAN Card copy** KYC Compliance proof

Name of Guardian (in case Sole / First Applicant is a Minor)
PAN** Enclosed (Please ✓) PAN Card copy** KYC Compliance proof

*W.e.f. 03 March, 2008, if the investment is Rs. 50,000 and above, all the applicants need to be KYC Compliant. If KYC is recorded in the Folio No., No further proof needs to be submitted. ** 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 returned across the counter. Please see instruction 2b on page 12.

SYSTEMATIC INVESTMENT PLAN (SIP) DETAILS

Scheme Plan

Option Sub-option

Mode of SIP (Please ✓) Cheques SIP Auto Debit Facility (In case of SIP through Auto Debit Facility attached SIP Auto Debit form needs to be filled up.)

Period of Enrollment From To SIP Date (Please ✓) 7th 15th 21st 28th

Frequency (Please ✓) Monthly Quarterly Weekly Amount per Installment Rs.

Total Cheques Cheques Nos. From To

Drawn on Bank Branch

Note: The initial subscription amount and subsequent installment amounts should be the same
Completed Application Form, SIP Auto Debit Form and the first cheque should be submitted at least 21 days before the first transaction date.

DECLARATIONS & SINGATURE/S

I/We have read and understood the contents of the Offer Document(s) of the respective Scheme(s) of Deutsche Mutual Fund and the instructions overleaf. I/We hereby apply to the Trustees of Deutsche Mutual Fund for enrolment under the SIP of the above Scheme(s)/Plan(s), as indicated above and agree to abide by the term, conditions, rules and regulations of the Scheme. I/We have understood the details of the Scheme(s) and I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this enrolment. I/We confirm that in the event I/We have mentioned "Not Applicable" / left the space blank against PAN in this Enrolment Form, I am/we are not required to obtain a PAN under the provisions of the Income Tax Act, 1961. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the fund, I/We authorise the Fund to redeem the funds invested in the scheme, in favour of the applicant at the applicable NAV on the date of such redemption and undertaking such other action with such funds that may be required by law. **I/We hereby confirm that I/We am/are in compliance with SEBI (Central Database of Market Participants) Regulations, 2003 and agree to comply with all circulars/notifications issued thereunder from time to time.

| | | |
|-------------|---------------------------|----------------------|
| SIGNATURE/S | First/Sole Account Holder | <input type="text"/> |
| | Second Account Holder | <input type="text"/> |
| | Third Account Holder | <input type="text"/> |

**Applicable to persons mandated by SEBI to obtain Unique Identification Number.

SIP AUTO DEBIT (ECS) FACILITY FORM Registration cum Mandate Form for ECS (Debit Clearing)

Folio No. (for existing Unit holder) Please read the Terms & conditions for ECS overleaf

New SIP Registration - by existing investor Change in Bank Account for an existing investor with DMF New SIP Registration - by new investor (Also attach the new Application Form duly filled & signed)

ECS DEBIT BANK ACCOUNT DETAILS (MANDATORY)

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

Name of the Account Holder as in Bank Records

| | | |
|----------------|---|---|
| Account No. | <input type="text"/> | Account Type (Please ✓) <input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO |
| Bank Name | <input type="text"/> | |
| Bank City | <input type="text"/> | Pin Code <input type="text"/> |
| Branch Address | <input type="text"/> | |
| MICR Code | <input type="text"/> This is a 9 digit number next to your Cheque No. | IFSC Code <input type="text"/> |

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) and that my/our payment towards my/our investment in Deutsche Mutual Fund shall be made from my/our below mentioned bank account number with your bank. I/We authorise Deutsche Asset Management (India) Pvt. Ltd., (Investment Manager to Deutsche Mutual Fund), acting through their service providers and representative carrying this ECS mandate Form to get it verified & executed.

| | | | | |
|----------------------------------|-------------|---------------------------|-----------------------|--|
| Account No. <input type="text"/> | SIGNATURE/S | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | | First/Sole Account Holder | Second Account Holder | Third Account Holder As in Bank Records |

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

SIP Application No.

Received from Mr./Ms./M/s.

an application for SIP enrolment in the Scheme

Plan Option

Total Amount (Rs.) Cheque Nos. From To

drawn on on Monthly Quarterly basis

ISC Stamp & Signature