

TRANSACION CHARGES FOR APPLICATION THROUGH DISTRIBUTIOR SACE IN SACE AND A SA	DISTRIBUTOR / /	instructions				ARN C									SL	JB-BRC	KER C	ODE/	AGEN	T CODI		DATE	& TIMI	E OF RE	CEIPT
Set Pit Retention de autorité de la control																						FO	R OFFIC	E USE O	NLY
distributor of methicularity to edition of in-appropriate procession of the certification and the certificatio	1/We hereby confirm	that the EUII	N box has	been int	entiona	lly left bl	ank by	me/us a	as this is	an "ex	ecution-	only" tra	nsactio	n without	any inte	eraction	or advic	e by th	e emplo	yee/rela	l itionshir				
TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENTS ONLY (Please tok kmy one of the below) good in the large First Time Inventor in Mutual Funds (b. 155-bit has below in the section of the proposed of the p																									
Incomform that I am a First Time Investor in Mutual Flunds (set. 100-91 to become control and incoming that I am a First Time Investor in Mutual Flunds (set. 100-91 to become control and incoming that I am a First Time Investor in Mutual Flunds (set. 100-91 to become control and incoming that I am a First Time Investor in Mutual Flunds (set. 100-91 to become control and incoming that I am a First Time Investor in Mutual Flunds (set. 100-91 to become control and incoming the Investor Investor Investor I am a First Time Investor in Mutual Flunds (set. 100-91 to become that I am a First Time Investor in Mutual Flunds (set. 100-91 to become that I am a First Time Investor in Mutual Flunds (set. 100-91 to be control and investor	Sole /1st Appli	cant/Guardia	n/Authorise	ed Signat	.ory/PO/	A Holder			2nd Applicant/Authorised Signatory/POA Holde										3rd Ap	oplicant/	Authorise	ed Signa	tory/PO	A Holder	
Goodinn that I am a First Time Investor in Mutual Funds (Ref. 150 = No Excelled as seasons) more to transcribe of No. 1,000 and more) (Ref. 150 = No Excelled as seasons) more to transcribe of No. 1,000 and more) (Ref. 150 = No Excelled as seasons) more to transcribe of No. 1,000 and more) (Ref. 150 = No. 1,000 and	TRANSACTION	CHARG	ES EQP	APPI	ICAT	IONS	THR	OUGL	DIST	RIBLI	TOR	S/AGE	NTS	ONL Y	Please	ticka	חע ממפ	of the	helo	v)					
(the LTDN-will be educated as transaction charges for transaction of the 1,000c and many) (the LTDN-will be deducated as transaction charges for the instruction of the 1,000c and many) (the state of the property of the 1,000c) and many forms the property of the 1,000c) and many forms the property of the 1,000c) and many forms are property of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c) and many forms are present to the sequence of country of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c) and many forms are present to the sequence of country of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c) and the property of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c). (In the Country DETAILS Companies pre-invested to the property of the 1,000c). (In the Country DETAILS Country DETAILS Country								0001	I DIOT	KIDO	TOIL										ual Fur	nde			
EXISTING INVESTOR INFORMATION Demait Mode	(Rs. 150/-will be In case the purchase/su	deducted as bscription an	transaction	n charges	s for tran	nsaction of and your	of Rs. 1 AMFIR	Registere	ed Distribu	tor has	chosen	opt in' op	otion of c	(Rs. harging T	100/- will ransactio	be dedu on Charg	cted as t	transact	ion cha	rges for	ransacti	on of Rs			
DEMAT ACCOUNT DETAILS PERCENT SET OF NUMBER DEMAT ACCOUNT NOT NUMBER DEMAT ACCOUNT NOT NUMBER DEMAT ACCOUNT NOT NUMBER DEMAT ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS DEMAT ACCOUNT NUMBER DETAILS DEMAT ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS DEMAT ACCOUNT NUMBER DETAILS DEMAT ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS TO ACCOUNT NUMBER DETAILS DEMAT AC					s will be	issued a	against	tne balai	nce amou	int inves	stea.(rei	er Genei	rai inforr	nation Po	int No. 1	1)									
NSDL Depositiony Participant Name Endicauses			PORWIA	TION		emat	Mode	e		П	Phys	ical M	lode				Folio	Num	ber						
NSDL Depository Participant Name Enclosures Citient Minister List Delivery Instruction Stip	DEMAT ACCOU	NT DET								nentio	ned in t	he applic	cation fo	orm mate	hes with	that, of	the acc	ount h	eld in d	eposito	ry partic	ipant. I	Demat A	count d	etails a
CDSL PP D Number Beneficiary Account Number NEW INVESTOR INFORMATION NAME OF FIRST/SOLE APPLICANT Mr. Ms. Ms. NAME DF FIRST/SOLE APPLICANT Mr. Ms. Ms. NAME DF FIRST/SOLE APPLICANT Mr. Ms. Ms. PANPERN # CNYC brood # Date of Bistrh/Date of Incorporation CNYC brood # Date of Bistrh/Date of Incorporation Note of First/Sole Applicant (in case of Minor) / Contact Person (in case of non individual applicant) Mr. Ms. PANPERN # Father's Name/Name of Guardian (in case of Minor) / Contact Person (in case of non individual applicant) Mr. Ms. PANPERN # CNYC brood # Relationship with Minor/Designation MANDATORY. COUNTRY Pin Code Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). State Country Pin Code Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). State Country Pin Code Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). State Country Pin Code Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). State Country Pin Code Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). Overseas Address (Mandatory in case of NRIFII PD Box address is not sufficient). State Country Pin Code Overseas						iemat m	oue is t	opieu ai	oove.,			Ei	nclosu	res											
Beneficiary Account Number Transaction Cun Helding Statement												_ _	Clie	ent Mas	ter List	Deliver	v			Ir	structi	on Slip			
NAME OF FIRST/SOLE APPLICANT Mr. Ms. M/s. PAN/PERN # KYC Proof # Date of Birth/Date of Incorporation	CDSL			t Numb	er _								_					nent		Ш "	.01. 401.	o op			
NAME OF FIRST/SOLE APPLICANT Mr. Ms. Ms. NS. Ms. NS. PAN/PERN # LOCYC Id Abdhaar No Bate of Birth/Date of Incorporation Mr. Ms. NYC Proof # Date of Birth/Date of Incorporation By planing bit Aughbaar number provide my prosper for sharing / declaring of the purpose of updating the same in my / our foil Father's Name/Name of Guardian (in case of Minor) / Contact Person (in case of non individual applicant) Mr. Ms. PAN/PERN # CKYC Id Audhaar No Namiling Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address (Mandatory in case of NRIFILP B Box address is not sufficient) Mailing Address (Mandatory in case of NRIFILP B Box address is not sufficient) Mobile First/Sole Applicant ToTher Person (in case of NRIFILP B Box address is not sufficient) Mode of Holding Single Joint Anyone or Survivor (s)(Debatic totion in ase of rore than one Accesses Address Mode Applicant) PRINTSOLE APPLICANT OTHER DETAILS Telephone Email Mode of Holding Single Joint Anyone or Survivor (s)(Debatic totion in ase of rore than one Accesses Andress Minor Applicant) Particular Retired Others Statistics (Applicant) Particular Report of Particular Retired Others Statistics (Applicant) Particular Retired Others Statis					-			-		-							, Otato								
NAME OF FIRST/SOLE APPLICANT Mr. Ms. Ms. NS. Ms. NS. PAN/PERN # LOCYC Id Abdhaar No Bate of Birth/Date of Incorporation Mr. Ms. NYC Proof # Date of Birth/Date of Incorporation By planing bit Aughbaar number provide my prosper for sharing / declaring of the purpose of updating the same in my / our foil Father's Name/Name of Guardian (in case of Minor) / Contact Person (in case of non individual applicant) Mr. Ms. PAN/PERN # CKYC Id Audhaar No Namiling Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address (Mandatory in case of NRIFILP B Box address is not sufficient) Mailing Address (Mandatory in case of NRIFILP B Box address is not sufficient) Mobile First/Sole Applicant ToTher Person (in case of NRIFILP B Box address is not sufficient) Mode of Holding Single Joint Anyone or Survivor (s)(Debatic totion in ase of rore than one Accesses Address Mode Applicant) PRINTSOLE APPLICANT OTHER DETAILS Telephone Email Mode of Holding Single Joint Anyone or Survivor (s)(Debatic totion in ase of rore than one Accesses Andress Minor Applicant) Particular Retired Others Statistics (Applicant) Particular Report of Particular Retired Others Statistics (Applicant) Particular Retired Others Statis	NEW INVESTOR	INCOR	A ATION																						
PAN/PERN #																									
By sharing the Aashbaar number I provide my consent for sharing / diadosing of my Aashbaar number of beit Registers and Transfer Agent (FITA) for the purpose of updating the same in my / or for feel feel feel feel feel feel feel fee	NAME OF FIRST	SOLE AF	PLICAN	1T						Mr.	. [Ms.		M/s.											
By sharing the Aathaar number I provide my consent for sharing / diadosing of my Aathaar number of the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for for the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for for the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for for the Register and Treader Agent (FTA) for the purpose of updating the same in my / or for for the Register and Treader Agent (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for my Aathaar number (FTA) for the purpose of updating for the same in my for the form for my for form for my for																									
Aachaar No By sharing the Aabhaar renormanian within soasing enagement or ordering of deciding of my Aachbaar man engagement measure management or ordering of the college of the purpose of updating the same is my our followed their Registrar and Transfer Agent (RTA) for the purpose of updating the same is my our followed their Registrar and Transfer Agent (RTA) for the purpose of updating the same is my our followed their Registrar and Transfer Agent (RTA) for the purpose of updating the same is my our followed their Registrar and Transfer Agent (RTA) for the purpose of updating the same is my our followed their Registrar and Transfer Agent (RTA) for the purpose of updating the same is my our followed their Registrar and Transfer Agent (RTA) for the purpose of updating the same is my our followed the				 	<u> </u>			-				KYC Pı	roof #		Date o	f Birth/	Date of	Incor	ooratio	n	D	D	IVI	IVI	Υ
Father's Name/Name of Guardian (in case of Minor) / Contact Person (in case of non individual applicant) Mr. Ms. PAN/PERN # KYC Proof # Relationship with Minor/Designation MANDATORY CKYC Id Aadhaar No Season of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) State Country Pin Code Coverseas Address FIRST/Sole Applicant Office DETAILS Telephone Email Mode of Holding Single Joint Anyone or Survivor (S)(Celastic option in case of more than one A Coverseas and with PO Box address please provide your Indian address) FIRST/Sole Applicant) Gross Annual Income Below 1 Lac 5 - 10 Lacs Schools of 10 Lacs Schools Sc				 	<u> </u>			-				-	-												
Father's Name/Name of Guardian (in case of Minor) / Contact Person (in case of non individual applicant) Mr. Ms. PAN/PERN # Relationship with Minor/Designation MANDATORY CKYC Id Aadhaar No Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) State Country Pin Code Coverseas Address (Mandatory in case of NRI/FILPO Box address is not sufficient) State Coverseas Address (Mandatory in case of NRI/FILPO Box address is not sufficient) Mode of Holding Single Joint Anyone or Survivor (s)(Defaut option in case of more than one A Coverseas Address) PERST/SOLE APPLICANT OTHER DETAILS Tolephone Business Professional House Wife Agriculture Service Student Registral and Transfer Agent (RTA) or the purpose of updating the same in my four following in the same in my four	Aadhaar No																								
PAN/PERN # Relationship with Minor/Designation MANDATORY CKYC Id Aadhaar No Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient Investors residing overseas and with PO Box address please provide your Indian address) Overseas Address (Mandatory in case of NRIFII PO Box address is not sufficient Investors residing overseas and with PO Box address please provide your Indian address) Overseas Address Overseas Address Telephone Mode of Holding Single Joint Anyone or Sunvivor (s)(Delatal option in case of more than one A Coccupation Business Professional House Wife Agriculture Service Student Retired Others Status Orccupation Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HU (Institute Service) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others Gross Annual Income Bellow 1 Lac 5 - 10 Lacs > 25 Lacs - 1 Crore (Industry for Non-Individual Institution) NRI Non-Repartriable (NRO) Others Politically Exposed Person (PEP) Status (Aloa applicable for authorised signatoriese Promoters/ Karlar Trustee Whole time Directors) I am PEP I am Related to PEP Not Application No. Collection Centre's Stamp & Rece Delate and Time Overlease attach proof. Referinstructions page point XII-PAN/PERN and KYG																									
Aachaar No Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) State Country Pin Code Country Pin	Father's Name/	Name of	Guardia	an (in d	case (of Mind	or) / C	onta	ct Pers	on (i	n case	e of no	n indi	vidual	applica	ant)	N	1r.	М	s.					
Aghlara No Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) State Country Pin Code Overseas Address (Mandatory in case of NRI/FII.PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individuals/legal entity) Overseas Address Telephone Email Mode of Holding Single Joint Anyone or Survivor (S)(Detaut option in case of more than one A Occupation Or Individual Provided Applicant) Partnership Firm On Behalf of Minor Bellow 1 Lac 5 - 10 Lacs > 25 Lacs - 1 Crore Politically Exposed Person (PEP) Status (Aso applicate for authorised signational Promoters/ Kartar/Trusteel/Whole time Directors) Politically Exposed Person (PEP) Status (Aso applicate for authorised signational Promoters/ Kartar/Trusteel/Whole time Directors) Politically Exposed Person (PEP) Status (Aso applicate for authorised signational Promoters/ Kartar/Trusteel/Whole time Directors) Politically Exposed Person (PEP) Status (Aso applicate for authorised signational Promoters/ Kartar/Trusteel/Whole time Directors) Application No. Collection Centre's Stamp & Recondert Stamp & Recondert Stamp & Recondert Stamp & Collection Centre's Stamp & Colle				T																					
Aachaar No Malling Address of First/Sole Applicant (PO Box address is not sufficient) Malling Address of First/Sole Applicant (PO Box address is not sufficient) State Country Pin Code Country Raficulture Sudent Sarial Analysis Sarial Analysis Sarial An	PAN/PERN#											KYC Pı	roof #		Relati	onship	with Mi	inor/D	esigna	tion		IV	AND A	TORY	1
Aadhaar No Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Mailing Address of First/Sole Applicant (PO Box address is not sufficient) Moverseas Address (Mandatory in case of NRI/FII PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) "All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individuals legal entity)" Overseas Address Telephone Email Mode of Holding Single Joint Anyone or Survivor (s) Defaut option in case of more than one A Occupant of the Company of the Mobile Status (Abo address) Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable (NRO) Others Status (Abo applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others Status (Abo applicant) Below 1 La 5 - 10 Lacs 25 Lacs - 1 Crore (Medically Non-Individual Investors involved/ providing any of the mentioned services Samily (Above Providing Application) Non - Individual Investors involved/ providing any of the mentioned services Gaming / Gambling / Lottery / Casino Services None of the Above Politically Exposed Person (PEP) Status (Abo application of the Above Politically Exposed Person (PEP) Status (Abo application of the Mobile Samily Person of the Above Politically Exposed Person (PEP) Status (Abo application of the Mobile Samily Person of the Above Politically Exposed Person (PEP) Status (Abo application of the Mobile Samily Person of the Above Person (PEP) Status (Abo application of the Mobile Samily Person of the Above Person (PEP) Status (Abo application of the Mobile Samily Person of the Above Person (PEP) Status (Abo application			_																						
Mailing Address of First/Sole Applicant (PO Box address is not sufficient. Investors residing overseas and transfer Agent (RTA) for the purpose of updating the same in miy / our folic Overseas Address (Mandatory in case of NRI/FII.PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) Address (Mandatory in case of NRI/FII.PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) Overseas Address	Aadhaar No												By sha	aring the	L	number	I provid	e my c	onsent t	or shari	ng / disc	closing	of my Aa	dhaar nu	mber(s)
City State Country Pin Code Overseas Address (Mandatory in case of NRI/FII.PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) "All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individuals/legal entity)" Overseas Address Country		of First	/Sole Ar	pplica	nt (P() Box	addre	ess is	not sut	fficien	it)		Includ	ıng aemi	grapnic	шоппа	ION WILL	me as	set mar	agemer	it compa	anies oi	OEDI 16	gisterea	mutuai
Overseas Address (Mandatory in case of NRI/FII.PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) "All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individuals/legal entity)" Overseas Address Country			·	T				T	T		Ť.	T	T				J	, -	I	1	1	Ţ	T		
Overseas Address (Mandatory in case of NRI/FILPO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) "All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individuals/legal entity)" Overseas Address Country																									
Overseas Address (Mandatory in case of NRI/FII.PO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) "All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individuals/legal entity)" Overseas Address Country	City						Sta	ate						Com	ntrv				Pin (ode:					
"All Non Individual Investors have to mandatority fill FATCA/CRS Declaration form (for non-individuals/legal entity)" Overseas Address Telephone Mobile Mobile Email	-	Mandator	v in case	of NRI/	FII.PO	Box ad	-		sufficien	t. Inve	stors n	esidina	overse		-) Box a	ddress	pleas			r Indiar	addre	ss)		
FIRST/SOLE APPLICANT OTHER DETAILS Telephone Mobile																		p. 0 0.0		,			,		
Telephone Email Occupation Of Institution Application Of Institution On Behalf of Minor Below 1 Lac 1 - 5 - 10 Lacs 2 5 Lacs - 1 Crore Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Truste/ Whole time Directors) Please attach proof. Refer instructions page point XII - PAN/PERN and KYG Inowledgement Slip (To be filled in by the investor) Application No. Mobile Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone of Survivor (s)(Default option in case of more than one A Gross Anyone of the Above House in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone of the Above House in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A gross Anyone or Survivor (s)(Default option in case of more than one A gross Anyone or Survivor (s)(Default option in case of more than one A gross Anyone or Survivor (s)(Default option in case of more than one Application No.	Overseas Addre	ess																							
Telephone Email Occupation Of Institution Application Of Institution On Behalf of Minor Below 1 Lac 1 - 5 - 10 Lacs 2 5 Lacs - 1 Crore Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Truste/ Whole time Directors) Please attach proof. Refer instructions page point XII - PAN/PERN and KYG Inowledgement Slip (To be filled in by the investor) Application No. Mobile Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone of Survivor (s)(Default option in case of more than one A Gross Anyone of the Above House in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A Gross Anyone of the Above House in case of more than one A Gross Anyone or Survivor (s)(Default option in case of more than one A gross Anyone or Survivor (s)(Default option in case of more than one A gross Anyone or Survivor (s)(Default option in case of more than one A gross Anyone or Survivor (s)(Default option in case of more than one Application No.																									
Telephone Email Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one A Occupation (of Institution Applicant) Business Professional House Wife Agriculture Service Student Retired Others Status Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HU Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others Gross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Truste/ Whole time Directors) I am PEP I am Related to PEP Not Applicate Politically Investors involved/ providing any of the mentioned services Foreign Exchange / Money Changer Services Money Lending / Pawning Gaming / Gambling / Lottery / Casino Services None of the Above Please-attach proof. Refer instructions-page point XII - PAN/PERN and KYG **Please-attach proof. Refer instructions-page point XII - PAN/PERN and KYG **Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Truste/ Whole time Directors) I am PEP I am Related to PEP Not Applicate **Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Truste/ Whole time Directors) I am PEP I am Related to PEP Not Applicate **Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Truste/ Whole time Directors) I am PEP I am Related to PEP Not Applicate **Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Truste/ Whole time Directors) I am PEP I am Related to PEP Not Applicate **Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Truste/ Whole time Directors) I am PEP I am Related to PEP Not Applicate **Polit																		Cour	itry						
Email Mode of Holding Single Joint Anyone or Survivor (s) (Default option in case of more than one A Occupation Business Professional House Wife Agriculture Service Student Retired Others	FIRST/SOLE AP	PLICANT	OTHE	R DET	AILS																				
Occupation (of first/sole Applicant) Status (of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others Gross Annual Income Below 1 Lac 5 - 10 Lacs > 25 Lacs - 1 Crore (Mendatory for Non-Individuals) RS	Telephone														Mobi	le									
Status (of first/sole Applicant) Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HU Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Oth Gross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth 1 - 5 Lacs 10 - 25 Lacs >1 Crore (Mendatory for Non-Individuals) Rs. as On (Not older than 1 year) Applicate Non - Individual Investors involved/ providing any of the mentioned services Foreign Exchange / Money Changer Services Money Lending / Pawning Gaming / Gambling / Lottery / Casino Services None of the Above Please attach proof. Refer instructions page point XII - PAN/PERN and KYG mowledgement Slip (To be filled in by the investor) Application No. Collection Centre's Stamp & Receivated Form Mr./Ms./M/s.	Email									Mode	of Ho	lding	s	ingle	Joint		Anyone	or Su	ırvivor	(s)(Defa	ult optic	n in cas	e of more	e than on	e Applic
Status (of first/sole Applicant) Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HU Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Oth Gross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth 1 - 5 Lacs 10 - 25 Lacs >1 Crore (Mendatory for Non-Individuals) Rs. as On (Not older than 1 year) Applicate Non - Individual Investors involved/ providing any of the mentioned services Foreign Exchange / Money Changer Services Money Lending / Pawning Gaming / Gambling / Lottery / Casino Services None of the Above Please attach proof. Refer instructions page point XII - PAN/PERN and KYG mowledgement Slip (To be filled in by the investor) Application No. Collection Centre's Stamp & Receivated Form Mr./Ms./M/s.	Occupation		Busine	ess	T _P	rofessi	ional		louse V	/ife	A	aricultu	ıre	Se	rvice		Stuc	lent		Ret	ired		Othe	ers	
Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Other Gross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth 1 - 5 Lacs 10 - 25 Lacs >1 Crore (Mandatory for Non-Individuals) Rs. as On (Not older than 1 year) D M M M M Mandatory for Non-Individuals) Rs. as On (Not older than 1 year) D M M M M M M M M M M M M M M M M M M			1													NI NI			Danar			Т			11.15
Gross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore (Mendatory for Non-Individuals) Rs. as On (Not older than 1 year)		t)	1					•						•	•								rust		
Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) I am PEP I am Related to PEP Not Applicable Non - Individual Investors involved/ providing any of the mentioned services Foreign Exchange / Money Changer Services Money Lending / Pawning Gaming / Gambling / Lottery / Casino Services None of the Above # Please attach proof. Refer instructions page point XII - PAN/PERN and KYG mowledgement Slip (To be filled in by the investor) Application No. Collection Centre's Stamp & Receivated from Mr./Ms./M/s.														I Institu	tion	N	RI		Non-R	epartr	able (I	NRO)		(Others
Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Trustee/ Whole time Directors)	Gross Annual Incor	ne _								- 1 Ci	ore				Do			20	on au						
Non - Individual Investors involved/ providing any of the mentioned services Foreign Exchange / Money Changer Services Money Lending / Pawning		_ -															n=-					D	D M	IVI	Υ
Gaming / Gambling / Lottery / Casino Services None of the Above Please attach proof. Refer instructions page point XII-PAN/PERN and KYG nowledgement Slip (To be filled in by the investor) Application No. Collection Centre's Stamp & Receivated from Mr./Ms./M/s.		· · ·								noters/	Karta/T				-	-									able
Application No. Collection Centre's Stamp & Receipted from Mr./Ms./M/s. Date and Time	Non - Individual Inv	estors invo	ived/ pro	viding a	ny of th	ne mer	ntioned	servic	es			_	•			•	•				-		-	wning	
Application No. Collection Centre's Stamp & Rece Date and Time							/PERN	l and K	YC																
Date and Time	owledgement \$	Slip (To be	e filled in	by the	inves	itor)								A	plicati	on No	ı								
	ived from Mr./Ms.,	M/s																		Colle					eceipt
	nlication for Saha	me:						_Plan	:				Op	otion:											
que/DD No.: Dated :Amount (Rs.)	plication for Scrie				Dated	l:				Ar	nount	(Rs.)													
vn on Bank and Branch :	•																								
se note : All Purchases are subject to realisation of Cheques/DD.	ue/DD No. :	anch :																							

Website: navimutualfund.com Toll free: 1800 103 8999 Non Toll Free: +91 81475 44555



7	JOINT APPLIC	CANT	DET/	ILS																								
ı	NAME OF SEC	OND AI	PLIC	ANT		Mr.	M	s.																				
	PAN/PERN#												KYC P	roof #		Da	ate of Bi	th/Date	of Inc	orpora	tion	D	D	IVI	IVI	Υ)	
	CKYC Id																											
	Aadhaar No	dhaar No By sharing the Aadhaar number I provide my consent for sharing / disclosing of my Aadhaar nu including demographic information with the asset management companies or אוני בייט אווייט אוני מייט אוני בייט איני בייט אוני בייט אוני בייט איני בייט אוני בייט איני בייט אוני בייט איני בייט איני בייט אוני בייט איני בייט אי																										
		including demographic information with the asset management companies of SEB registered mutu and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my / our folios															uai tui s.											
	Gross Annual Ind	icome		Below 1 - 5 La			10 Lacs - 25 Lac		>25 L >1 Cı	acs - 1 (cally Exposicable for			,) Status iters/Karta/Tr	ustee/Whole	time Dire	ctors)	[l am		d to PEI	• 🔲	Not App	licabl	
	Father's Name																											
	Occupation (of first/sole Applica	ant)		Busin	ess	F	Profess	sional		House	Wife		Agric	culture		S	ervice		Stud	ent		Reti	red		Other	s		
	NAME OF THIR	D APP	LICAN	Т		Mr.	M	s.																				
	PAN/PERN#												KYC P	roof #			Date of	Birth/D	ate of	Incorp	oratior	n D	D	IVI	M	Υ		
	CKYC Id																											
	Aadhaar No By sharing the Aadhaar number I provide my consent for sharing / disclosing of my including demographic information with the asset management companies of SEB and their Registrar and Transfer Agent (RTA) for the purpose of updating the same															l registe	red mut	ual fu										
	Gross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lac										and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my / our folios. cs - 1 Crore Politically Exposed Person (PEP) Status																	
	Cross / timadi ini	1001110		1 - 5 La			- 25 Lac		>1 Cı		Ciore		, ,			,	ters/Karta/Tr	ustee/Whole	time Dire	ctors)		I am Related to PEP Not Applica					licabl	
	Father's Name																											
													-			+					1 -	-						
	Occupation	ant)		Busin	ess	F	rofes	sional		House	Wife		Agric	culture		S	ervice		Stud	ent		Reti	red		Other	s		
ij	Power of Atto	orney	(POA)																									
	NAME OF POA					Mr	. 🔲	Ms.	M/s.																			
	PAN/ PERN#										KYC Pr	oof #								Date	of Birt	h D	D	IVI	M	Υ		
	*FATCA INFO	ORMA	TION/	FORE	IGN T	AX L	AWS				ATCA CRS form) (Refer instruction)																	
	Place of Birt	Place of Birth								Country of Birth																		
	Nationality Others (F										Tax Residence Address (for KYC Address) Residential Registered Others Business																	
		thers (Please specify) Unders Business ou a tax resident (i.e. are you assessed for Tax) in any other country outside India? Yes No																										
	If 'No' please	No' please proceed for the signature of declaration YES', please fill for ALL countries (other than India) in which you are Resident for tax purposes i.e., where you are a citizen / Resident / Green Card Holder / Ta																										
	Applicant	Resident in the respective countries Applicant Country of Tax Residency									Tax Identification Number or						Identification Type					If TIN is not available, please tick ☑ th						
	Details Applicant 1	,								Functional Equivalent											reason A, B or C (as defined below) Reason A B C							
	Applicant 2																					ason E		В				
	- ' '																											
	Applicant 3	country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents.																										
	* Reason B No		-																lected)	١								
	* Reason C other			•			•	o adult		00	January Of	an I	23146110	.5 u 0 II	or roqu	U		. 50 001	.50.60	,								
	I hereby confirm submitted abov about any chan any intermediar # Please attach	e. I als iges / m ry or by	o confi nodifica domes	m that tion to t tic or ov	l have r he abov erseas	ead ar e infor regula	d unde mation tors / ta	erstood in futu ax auth	the FA re with orities.	TCA & in 30 da	CRS Te	rms a	and Co	ndition	s belov	v and	d hereby	accept	the sa	ame. I	also u	ndertak	e to ke	ер уо	ı inform	ned in v	writin	

Website: navimutualfund.com

Toll free: 1800 103 8999 Non Toll Free: +91 81475 44555

mf@navi.com

(



10	*BANK ACCOUNT DETAILS (Please attach copy of	cancelled chequ	e) For registeri	ng Multiple Bar	nk Accounts pleas	e fill up "Registration of M	/lultiple Bank Ac	count" Form	
	Name of the Bank :					Brand	:h:		
			7						
	Account Type (Please ☑) ☐ SB ☐ Current ☐ NRC	NRE _	FCNR	ACC	count Number :				
	Branch Address :				City:		<u></u>	Pin:	
	IFSC Code :					MICR C			
	AMC reserves the right to use any mode of payment deemed appropriate. In	We understand that	AMC shall not be re	esponsible if transa	ction through DC/RTG	S/NEFT could not be carried ou	t because of incomp	lete or incorrect infor	rmation.
11	*INVESTMENT DETAILS I/We would like to invest	t in the followir	ng scheme of	f Navi Mutua	l Fund Scheme				
	Scheme : Navi			Plan	Red	ular	Direct		
	Option Growth Dividend			Sub-Opt		dend Payout	Dividend Rei	nvestment (defa	ult)
	In case of any ambiguity / incomplete information, the defa	ult plan / option /	sub-ontion will					,	
	Statement of Additional Information. Please see the Plan, C						, , , , , , , , , , , , , , , , , , , ,		
	Dividend Frequency								
12	*PAYMENT DETAILS (In case of DD, please provi	de us specific	declaration)						
	Mode of Payment Cheque DD	Fund Transfer	Other	rs		Please spec	ify		
	Cheque/DD No.					Date D D	M M	YY	YY
	Gross Amount (Rs)		DD Charges	(Rs)		Net Amount	(Rs)		
	Drawn on Bank & Branch					Account Type SB	Current	NRO N	RE FCNR
42						nocount type cs			
13	SYSTEMATIC INVESTMENT PLAN (SIP) PAYME	ENT TYPES (F	Please select	any one opti	on)				
	SIP through Post Dated Cheques (Please fill & submit with	th this form)	SIP through Aut	o Debit (ECS) (Please fill up enclos	sed SIP Auto Debit (ECS)	Form & submit w	rith this form)	
14	NOMINATION DETAILS (Please refer to Instructions	page, point ne	O VII) In case of	existing investor	nomination details m	entioned in the below table v	vill replace the exis	ting details registe	red in the folio
	Nomination Required YES NO Nominee Name	Relationship	Date of E	Rirth Gu	ıardian Name	Allocation Sign	of S	Sign of	Sign of
	11000000000000000000000000000000000000	with Nominee			Nominee is Minor)	(%) Guard		ominee	Applicants
									1st App.
									2nd App.
									3rd App.
	Please note that if you do not furnish any nomination details, it is o	deemed to be assu	imed that you do	not wish to nom	inate anyone.				
15	HOW DO YOU WISH TO RECEIVE THE DOCUM	ENT(S) (Plea	se ☑)						
	I/W e wish to "Opt In" for receiving the following in Physical					receive the Account Sta			
	Annual Reports/Abridged Summary Accoun	t Statement			English	(Default option)	Bengali	Mal	ayalam
16	DOCUMENTS ENCLOSED (Please ☑)								
	Resolution/Authorisation to invest List of	of Authorized Sig	natories with S	Specimen Signa	atures	Memorandum	& Articles of As	sociation	
	Trust Deed Bye-laws Partr	nership Deed	Overse	eas Auditor Cer	tificate	Notarised PO	A Cop	y of cancelled ch	neque
	Copy of PAN Card KYC PIO	Card	Foreigr	n Inward Remit	tance Certificate	Special Produ	ct Form (SIP / S	TP / SWP / AEP)
17	*DECLARATION AND SIGNATURES								
	I/We have read and understood the contents of the Statement of Additional Inf								
	and regulations of the Scheme and to other statutory requirements of SEBI.AMF pattern and risk factors applicable to Plan/Option under the Scheme (s). I/We a	agree that in case of r	ny/our investment in	n the scheme is equ	al to or more than 25%	of the corpus of the scheme, the	n Navi Mutual Fund h	as full right to refund	the excess to me/us
	to bring my/our investment below 25%. I/We have not received nor been induce is not completed by me/us to the satisfaction of the Mutual Fund, I/We hereby	d by any rebate or gif authorise the Mutual F	ts, directly or indirect und to redeem the	tly in making this in funds invested in the	vestments. I/We undertal e scheme, in favour of th	ce that these investments are on e applicant at the applicable NAV	my/our own account a / prevailing on the da	and in event Know You te of such redemption	ur Customer process and undertake such
	other action with such funds that may be required by the law. I/We declare that law enacted by the Government of India or any Statutory Authority. I/We hereb								
	The ARN holder has disclosed to me/us all the commission (in the form of trail	commission or any of	ther mode), payable	to him for the differ	ent competing Schemes	of various Mutual Funds from ar	nongst which the Sch	eme is being recomm	ended to me/us. For
	NRIs: I/We confirm that I am/We are Non-resident of Indian Nationality/Orig Account/FCNFI/ NRSR Account. I/We hereby provide my/our consent in account.								
	accordance with Aadhaar Act, 2016 (and regulations made thereunder) a I/We hereby provide my/our consent of my Aadhaar number(s) including dem-		with the asset mana	agement companies	of SEBI registered mutu	al fund and their Registrar and	Transfer Agent (RTA	for the purpose of u	ndating the same in
	my/our folios.	-5						, , ,	
		er	2nd Applicant/A	uthorised Signa	tory/POA Holder	3rd Ap	plicant/Authorised	Signatory//POA H	Holder
	Sole/1st applicant/Guardian/Authorised Signatory/POA Holde			•					
	Sole/1st applicant/Guardian/Authorised Signatory/POA Holde All fields marked with * are mandatory								
18	All fields marked with * are mandatory	ion whore-			_		_		
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicate		Companies	Societies	Partnershin Firm	Investment through POA	Trust	NRI	
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest	ion whereve Individual	Companies	Societies	Partnership Firm	Investment through POA	Trust	NRI	FIIs
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures		✓ ✓		Partnership Firm	Investment through POA	Trust	NRI	
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest		~	4	√		Trust ✓	NRI	
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures Memorandum & Articles of Association Trust Deed Bye-laws		✓ ✓	✓	V		V	NRI	
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures Memorandum & Articles of Association Trust Deed		✓ ✓	4	√		V	NRI	
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures Memorandum & Articles of Association Trust Deed Bye-laws Partnership Deed Notarised POA PAN/PERN Proof	Individual	· · · · · · · · · · · · · · · · · · ·	✓ ✓	<i>Y</i>	✓ ✓	✓ ✓	V	Fils
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures Memorandum & Articles of Association Trust Deed Bye-laws Partnership Deed Notarised POA PANPERN Proof KYC in case of Investment of any Amount	Individual	∀	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	V	V	<i>,</i>		Flis
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures Memorandum & Articles of Association Trust Deed Bye-laws Partnership Deed Notarised POA PAN/PERN Proof	Individual	· · · · · · · · · · · · · · · · · · ·	\(\frac{1}{2} \)	· · · · · · · · · · · · · · · · · · ·	V V V V	\(\frac{1}{2} \)	<i>,</i>	Fils V V
18	All fields marked with * are mandatory CHECKLIST (Please submit the following documents with applicat Documents Resolution/Authorisation to invest List of Authorised Signatories with Specimen Signatures Memorandum & Articles of Association Trust Deed Bye-laws Partnership Deed Notarised POA PAN/PERN Proof KYC in case of Investment of any Amount Foreign Inward Remittance Certificate	Individual ✓	* * * * * * * * * * * * * * * * * * *	<i>y y y y y y</i>	· · · · · · · · · · · · · · · · · · ·	V V V	<i>y y y y y</i>	<i>,</i>	Fils

Website: navimutualfund.com

(Toll free : 1800 103 8999 Non Toll Free: +91 81475 44555

mf@navi.com