

Common Application Form

(For Lumpsum / Systematic Investments)

Please read product labeling details available on cover page and the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required.

BARODA PIONEER MUTUAL FUND



DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Baroda Pioneer Mutual Fund)

Distributor / Broker ARN	Sub-Broker Code	Sub-Broker ARN	EUIN	LG Code	Bar Code
9992					For Office use only

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

☐ I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Please refer Instructions 8)

☐ I confirm that I am a first time investor across Mutual Funds.
(₹ 150 deductible as Transaction Charge and payable to the Distributor)

☐ I confirm that I am an existing investor across Mutual Funds.
(₹ 100 deductible as Transaction Charge and payable to the Distributor)

In case the subscription amount is ₹10,000/- or more and your distributor has opted to receive Transaction Charges, they are deductible, as applicable, from the purchase / subscription amount and payable to the distributor. Units will be issued against the balance amount.

[illegible]

MODE OF HOLDING ☐ Single OR ☐ Joint OR ☐ Anyone or Survivor Default Option: Joint (Please refer Instructions 2)

SOLE / FIRST APPLICANT'S PERSONAL DETAILS (Please fill in ALPHABETS and use one box for one alphabet, leaving one box blank between two words, as it appears in your Aadhaar Card)

[illegible]

*Wherever email ID is registered, an electronic Statement of Account (e-SOA) will be shared with the investor. In case you want to receive a physical statement, please request for the same separately.

[illegible]

Name of the Guardian (in case First / Sole Applicant is minor) / Contact Person - Designation / PoA Holder (In case of Non-Individual Investors)

Status of the First Applicant (Mandatory, please ✓) ☐ Resident Individual ☐ Minor through guardian ☐ Foreign National Resident in India ☐ NRI - Non Repatriation ☐ NRI-Repatriation ☐ Body Corporate

☐ Society / Club ☐ BOI ☐ LLP ☐ HUF ☐ Trust ☐ FPIs ☐ Company ☐ QFI ☐ PIO ☐ OCI ☐ AOP ☐ Partnership ☐ NGO ☐ Sole Proprietorship ☐ Others

Overseas Address (Mandatory in case of NRI/ FPIs applicant, in addition to mailing address)									
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[illegible]

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Received from Mr. / Ms. / M/s.																										
PAN										an Application for scheme																
Option (please ✓)		<input type="checkbox"/> Growth <input type="checkbox"/> Dividend				Sub-option (please ✓)				<input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment				Signature, Stamp & Date												
along with Cheque / DD No. / UTR No.													Dated						D	D	M	M	Y	Y	Y	Y
Drawn on (Bank)																			Amount ₹							

Information (*Mandatory)	First Applicant**	Second Applicant	Third Applicant
Date of Birth	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
PAN/PEKRN [†]			
Aadhaar			
KIN No (CKYC)			
**Incase Minor / POA			
	Guardian (In case of Minor)	POA Holder	
Name			
Relationship			
Date of Birth of Minor	D D M M Y Y Y Y		
PAN/PEKRN			
Aadhaar			
KIN Nos. (CKYC)			
Information to Investor's	<p>The purpose of collection/usage of Aadhaar number including demographic information is to comply with applicable laws/rules/regulations and provision of the said data is mandatory as per applicable laws/rules/regulations.</p> <p>Post obtaining the Aadhaar number, we shall authenticate the same in accordance with the Aadhaar Act, 2016.</p> <p>We shall receive your demographic information which shall be used only to comply with applicable laws / rules / regulations.</p>		
Consent	<p>I/We hereby provide my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA.</p> <p>I/We hereby provide my/our consent for sharing/disclosing my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual funds and their Registrar and Transfer Agents (RTA) for the purpose of updating the same in my/our folios.</p>		
Signature			
Politically Exposed Person (PEP)	<input type="checkbox"/> Self <input type="checkbox"/> Related <input type="checkbox"/> Non Applicable	<input type="checkbox"/> Self <input type="checkbox"/> Related <input type="checkbox"/> Non Applicable	<input type="checkbox"/> Self <input type="checkbox"/> Related <input type="checkbox"/> Non Applicable
Occupation of the Applicant	<input type="checkbox"/> Student <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Builder <input type="checkbox"/> Sports <input type="checkbox"/> Defence <input type="checkbox"/> Public Co.(Listed) <input type="checkbox"/> Public Co.(Unlisted) <input type="checkbox"/> Agriculture <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Gov. Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Pvt. Sector Service <input type="checkbox"/> Entertainment <input type="checkbox"/> Other	<input type="checkbox"/> Student <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Builder <input type="checkbox"/> Sports <input type="checkbox"/> Defence <input type="checkbox"/> Public Co.(Listed) <input type="checkbox"/> Public Co.(Unlisted) <input type="checkbox"/> Agriculture <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Gov. Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Pvt. Sector Service <input type="checkbox"/> Entertainment <input type="checkbox"/> Other	<input type="checkbox"/> Student <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Builder <input type="checkbox"/> Sports <input type="checkbox"/> Defence <input type="checkbox"/> Public Co.(Listed) <input type="checkbox"/> Public Co.(Unlisted) <input type="checkbox"/> Agriculture <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Gov. Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Pvt. Sector Service <input type="checkbox"/> Entertainment <input type="checkbox"/> Other
Gross Annual Income	<input type="checkbox"/> <1L <input type="checkbox"/> <1- 5 L <input type="checkbox"/> 5-25 L <input type="checkbox"/> 25 L-1 Cr <input type="checkbox"/> 1 Cr-5 Cr <input type="checkbox"/> >5 Cr	<input type="checkbox"/> <1L <input type="checkbox"/> <1- 5 L <input type="checkbox"/> 5-25 L <input type="checkbox"/> 25 L-1 Cr <input type="checkbox"/> 1 Cr-5 Cr <input type="checkbox"/> >5 Cr	<input type="checkbox"/> <1L <input type="checkbox"/> <1- 5 L <input type="checkbox"/> 5-25 L <input type="checkbox"/> 25 L-1 Cr <input type="checkbox"/> 1 Cr-5 Cr <input type="checkbox"/> >5 Cr
OR			
Net-worth* in ₹ (Lacs) *Should not be older than one year (Mandatory for Non-Individual)			
Networth as of date	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
Non-Individuals	<p>Is the entity involved in any of the following services:</p> <p>• Foreign Exchange/ Money Changer <input type="checkbox"/> Yes <input type="checkbox"/> No • Gaming/ Gambling/ Lottery (casinos, betting syndicates) <input type="checkbox"/> Yes <input type="checkbox"/> No • Money Lending/ Pawning <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		

(Refer Instruction IV)* Please attach PAN proof.

Add convenience to your life with our value added service



Simply send **SMS to 9212 132763 to avail the below facilities	
Balance	SMS BAL <space> last 6 digits of Folio No.
NAV	SMS NAV <space> last 6 digits of Folio No.
Statement thru Email	SMS ESOA <space> last 6 digits of Folio No.
Last 3 Transactions	SMS Transaction <space> last 6 digits of Folio No.

**SMS charges as per service provider applicable.



Investor can avail below facilities
1. NAV
2. Account Balance
3. Account Statement
4. Last 5 Transactions

For more details call :
1800-2670-189 (Toll Free)
 9 am to 6 pm - Monday to
 Saturday on all Business Days
 9 am to 2 pm on 2nd & 4th
 Saturdays of the Month
www.barodapioneer.in

<input type="checkbox"/> FATCA & CRS INFORMATION [Please tick (✓)] For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA detail form			
The below information is required for all applicant(s)/ guardian Address Type: <input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office (for address mentioned in form/existing address appearing in Folio) Is the applicant(s) Country of Birth / Nationality / Tax Residency other than India?			
First Applicant (including Minor) <input type="checkbox"/> Yes <input type="checkbox"/> No	Second Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Third Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	
If "Yes", please provide the following information (Mandatory) Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.			
Category	First Applicant (including Minor)	Second Applicant/ Guardian	Third Applicant
Name of Applicant			
Place/ City of Birth			
Country of Birth			
Country of Tax Residency [#]			
Tax Payer Ref. ID No [^]			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 3			
Tax Payer Ref. ID No.3			
Identification Type [TIN or other, please specify]			

FIRST HOLDER'S BANK ACCOUNT DETAILS (Mandatory) Refer Instruction III.										All communication / payments will be made to the first applicant, or to the Karta in case of HUF. Bank account details of first applicant are required, without which the application is liable to be rejected.									
Name of the Bank										Branch									
Account No. (in figures)										Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> Others									
Account no. (in words)																			
Bank Address																			
Pincode										State									
										City									
MICR Code (9 digits)										Example for filling the Account No.									
*IFSC Code for NEFT / RTGS										Ac. No. 1 3 5 7									
										In words One Three Five Seven									
Virtual Payment Address (VPA) (of the Sole / First Holder / Guardian) (for Payment through UPI)																			

REDEMPTION / DIVIDEND / REFUND PAYOUTS (Refer Instruction X for details)			
SCHEME DETAILS (Please choose the Option and Sub-option for Investment, please read product labeling details available on Cover Page and Instruction before filling this section)			
Scheme Name		Plan (please ✓) <input type="checkbox"/> Plan A <input type="checkbox"/> Plan B (Direct) <input type="checkbox"/> Zero Balance folio	
Option (please ✓) <input type="checkbox"/> Growth <input type="checkbox"/> Dividend		Sub-option (please ✓) <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	

INVESTMENT DETAILS (Strike off whichever is not applicable)																																									
GROSS AMOUNT (A) ₹												DD CHARGES (IF ANY) (B)												NET AMOUNT (CHEQUE / DD AMOUNT) ₹												A minus B					
MODE OF PAYMENT						<input type="checkbox"/> Cheque						<input type="checkbox"/> NEFT / RTGS						<input type="checkbox"/> DD [(Bank Certificate / Third Party / DD Declaration Enclosed) (for Third Party Payment Refer Instruction VI(9))]						<input type="checkbox"/> UPI																	
Cheque / DD Details		A/c No.																A/c Type																							
		Cheque / DD No.																Date	D	D	M	M	Y	Y	Y	Y	Drawn on Bank														
In case of NEFT / RTGS payment						UTR No.																																			

DEMAT ACCOUNT DETAILS										<input type="checkbox"/> National Securities Depository Limited										<input type="checkbox"/> Central Depository Services (India) Limited									
Depository Participant Name										Mr / Ms / M/s																			
DP ID No.																				Client ID No.									

NOMINATION DETAILS (To be filled in by individuals singly or jointly. Mandatory only for Investors who opt to hold units in Non-Demat Form) Refer Instruction VII.

Name and Address of the Nominee(s)	Relationship between Nominee & Investor	Date of Birth	Name & Address of Guardian (to be furnished in case the nominee is minor)	Signature of Guardian / Nominee	Proportion (%) by which the units will be shared by each nominee (% to aggregate to 100%)
Nominee 1		DDMMYYYY			
Nominee 2		DDMMYYYY			
Nominee 3		DDMMYYYY			

DECLARATION AND SIGNATURES

I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the Scheme. I/We hereby declare that I/We am/are authorized to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any act, rule, regulation, notification or direction or any other applicable laws issued by the Government of India or any regulatory or statutory authority. I/We have understood the details of the Scheme and in the event "Know Your Customer" process is not completed by me/us to the satisfaction of the AMC, I/We hereby authorize the AMC to redeem the funds invested in the Scheme, in favour of the first applicant at the applicable NAV prevailing on the date of such redemption and to undertake such other action with such funds as may be required by law. I/We hereby authorise Baroda Pioneer Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/Baroda Pioneer Mutual Fund' bank(s) and/or Distributor/Broker/Investment Adviser.

The ARN holder has disclosed to me/us all the commission (in the form of trail commission or any other mode), payable to him/it for the different competing schemes of various mutual funds from amongst which the Scheme is being recommended to me/us. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct, complete and truly stated. If I/We have not ticked for not appointing a nominee, then the Application Form shall be processed as without nomination.

Applicable for "Execution Only" transaction : I/We, the undersigned, hereby acknowledge and confirm that the above transaction is "Execution Only" as explained vide SEBI circular no. CIR /IMD/DF/13/2011 dated 22 August 2011. This investment is being made notwithstanding the advice of the appropriateness/inappropriateness of the same and the distributor has not charged any advisory fees on this transaction.

Applicable for NRIs : I/We confirm that I am/we are Non-Residents of Indian nationality/origin but not residents of the United States and Canada and I/we hereby confirm that I/we have remitted funds from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines.

Applicable for FATCA & CRS :

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

1st Applicant Signature / Guardian Signature / POA Signature / Thumb Impression	2nd Applicant Signature / POA Signature / Thumb Impression	3rd Applicant Signature / POA Signature / Thumb Impression
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Application Form STP / SWP / DSO

BARODA PIONEER MUTUAL FUND



Please read product labelling details available on cover page and the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required. Please refer the STP / SWP / DSO : Terms & Conditions while filling up the Form. Tick (✓) whichever is applicable, strike out whichever is not required.

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of the schemes of Baroda Pioneer Mutual Fund)						
Distributor / Broker ARN	Sub-Broker Code	Sub-Broker ARN	EUIN	LG Code	I H No. (K Bolt)	Date & Time Stamp
9992					For Office use only	For Office use only

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

I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Please refer Instructions for filling up the Application Form - VIII)	
<input type="checkbox"/> I confirm that I am a First time investor across Mutual Funds. (₹ 150 deductible as Transaction Charge and payable to the Distributor)	<input type="checkbox"/> I confirm that I am an existing investor across Mutual Funds. (₹ 100 deductible as Transaction Charge and payable to the Distributor)

In case the subscription amount is ₹10,000/- or more and your distributor has opted to receive Transaction Charges, they are deductible, as applicable, from the purchase / subscription amount and payable to the distributor. Units will be issued against the balance amount.

Please note that the applicant details and mode of holding are as per the existing Folio Number	
Folio No.	Name of Sole / First Unit Holder

SYSTEMATIC TRANSFER PLAN (STP)		
<input type="checkbox"/> No. of units	<input type="checkbox"/> Capital Appreciation	<input type="checkbox"/> Fixed Amount (Please tick one option only).
Folio No.	PAN	Enclosed (please ✓) <input type="checkbox"/> PAN copy <input type="checkbox"/> KYC
Mobile No.	Email ID	
Amount ₹ (in figures)	₹ (in words)	OR
Units		
STP Frequency	<input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Calendar Quarter	STP Period
STP Date	<input type="checkbox"/> 1st <input type="checkbox"/> 10th (Default) <input type="checkbox"/> 15th <input type="checkbox"/> 25th <input type="checkbox"/> All dates	Start From
FROM	Scheme	Option
TO	Scheme	Option

SYSTEMATIC WITHDRAWAL PLAN (SWP)		<input type="checkbox"/> Fixed Amount <input type="checkbox"/> Capital Appreciation	(Please tick one option only)
Folio No.	PAN	Enclosed (please ✓) <input type="checkbox"/> PAN copy <input type="checkbox"/> KYC	
Mobile No.	Email ID		
Amount ₹ (in figures)	₹ (in words)	OR	
Units			
SWP Frequency	<input type="checkbox"/> Monthly (Default) <input type="checkbox"/> Calendar Quarter	SWP Period	
SWP Date	<input type="checkbox"/> 1st <input type="checkbox"/> 10th (Default) <input type="checkbox"/> 15th <input type="checkbox"/> 25th <input type="checkbox"/> All dates	Start From	
FROM	Scheme	Option	
		Sub-Option	

DIVIDEND SWEEP OPTION (DSO) - ENROLMENT DETAILS		(Allow 7 days to register, please mention complete Scheme, Plan & Option)
Source Scheme (From where Dividend is to be transferred)	Baroda Pioneer	
Target Scheme (To where Dividend is to be transferred)	Baroda Pioneer	

DECLARATION AND SIGNATURES	
I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the Scheme. I/We hereby declare that I/We am/are authorized to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any act, rule, regulation, notification or direction or any other applicable laws issued by the Government of India or any regulatory or statutory authority. The ARN holder has disclosed to me/us all the commission (in the form of trail commission or any other mode), payable to him/it for the different competing schemes of various mutual funds from amongst which the Scheme is being recommended to me/us. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct, complete and truly stated. Applicable for NRIs : I/We confirm that I am/we are Non-Residents of Indian nationality/origin but not residents of the United States and Canada and I/we hereby confirm that I/we have remitted funds from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines.	

Signature / Thumb Impression of Sole / 1st Applicant / POA Holder / Guardian	Signature / Thumb Impression of 2nd Applicant / POA Holder / Guardian	Signature / Thumb Impression of 3rd Applicant / POA Holder / Guardian
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INSTRUCTION	
1. An STP will be treated like an SWP from the outgoing scheme and an SIP into the incoming scheme. 2. Exit Load, as applicable from time to time, will be levied on STP/SWP. 3. In the case of STP/SWP/DSO, the request to start the STP/SWP must reach the ISC at least 7 working days prior to the first STP/SWP. 4. For SWP - in case the payout date is not mentioned, the payroll will continue till the balance units are reduced to zero.	For STP - in case the period or end date is not given, STP units / amounts will get switched out till it meets the minimum investment amount in switched in scheme. All Dates - there will be four STP transactions processed in a month i.e 1st, 10th, 15th and 25th. In case the from date is not mentioned, it will be treated as the 1st day of the following month. For DSO - Please refer to website for list of Source Scheme, Target Schemes and detailed terms and conditions. The Minimum amount of dividend eligible for transfer under Dividend Transfer Plan is Rs. 200/-.

ACKNOWLEDGMENT SLIP (To be filled in by the Applicant)	
Investor Name	
Folio No.	Dated
<input type="checkbox"/> STP / <input type="checkbox"/> SWP <input type="checkbox"/> DSO	
Scheme / Plan / Option / Sub-Option	To (for STP Only)
Amount ₹	Signature, Stamp & Date

This Page has been intentionally left blank.

Declaration: This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/ Corporate to debit my account, based on the instruction as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / Corporate of the bank where I have authorized the debit.

Systematic Investment Plan (SIP) : Terms & Conditions

1. In case of new applications, kindly attach duly filled in application form along with registration cum NACH (National Automated Clearing House) mandate form. Any other format of request will be rejected.
2. Completed application form, SIP auto debit/NACH form & first cheque should be submitted at Baroda Pioneer Asset Management Company Ltd. (AMC) offices or KARVY ISC's atleast 30 days prior to first SIP cycle date.
3. New investor in to the Fund should mandatorily give a cheque for the first transaction drawn on the same bank account which is to be debited under NACH/Auto Debit. In case the 1st cheque is issued from an A/c which is different from NACH /auto debit A/c, then a copy of cheque from NACH/ auto debit A/c as mentioned on the application form should be submitted.
4. The bank mentioned in NACH request must participate in local MICR clearing. MICR code starting and/or ending with "000" are not valid for NACH.
5. The AMC, the Registrar and other service providers shall not be responsible and liable for any financial loss that may be incurred by the investor with regard to SIP registration process, including any issue relating to NACH or auto debit registration.
6. Should the investor wish to cancel the SIP registration, the cancellation request shall be submitted 21 working days prior to the next SIP cycle date.
7. Should the investor wish to change the Bank Mandate any time during the currency of SIP, he / she should tick the appropriate box in the Mandate Form, fill in the revised bank details and submit the same to AMC or its Registrar and Transfer Agent. Such revised form must be submitted 30 days prior to the next SIP Cycle date.
8. Existing investors who wish to restart their SIPs, are required to submit NACH form duly signed by the bank account holder(s), indicating the existing Folio No. & investment details in the Form & submit the same along with the copy of a cancelled cheque / photocopy of the cheque, drawn on the same bank account registered in the SIP form.
9. Should an investor opt for a monthly SIP, the minimum number of months for which the investment will have to be made (SIP Period) shall be 6 months and the minimum investment amount (SIP Amount) shall be ₹ 1,000/- per month. Should the investor opt for a quarterly SIP, the SIP Period shall be 4 quarters and the SIP Amount shall be ₹ 1,500/- per quarter. Investors should note that the first SIP cheque and subsequent SIP installments should be of the same amount.
10. The Registrar will reject a Micro SIP application where it is found that the registration of the application will result in the aggregate of Micro SIP installments in a financial year exceeding Rs.50,000 or where there is any deficiency in the application form or any supporting document. In case the first Micro SIP installment is processed (as the cheque may be banked), and the application / supporting document is found to be defective, the Micro SIP will be ceased for future installments. No refunds shall be made for the units already allotted. Investor, can however, redeem the units if so desired.
11. The investor(s) agrees to discharge the responsibility expected of him/them as a participant/s under NACH and hereby confirm adherence to the terms of the mandate. The investor(s) has/have authorized use of their contact details mentioned on the form/NACH mandate for the purpose of processing the mandate instruction and further authorize the bank(s) to debit the investor's account for any charges towards mandate verification, registration, transactions, etc. as may be applicable.

Instructions to fill in SIP NACH Mandate

Following fields need to be filled mandatorily.

1. Date: In format DD/MM/YYYY.
2. Select the appropriate checkbox to create, modify or cancel the mandate.
3. Sponsor Bank Code and Utility Code to be left blank.
4. Bank A/c Type: Tick the relevant box.
5. Fill Bank Account Number.
6. Fill name of Destination Bank.
7. IFSC / MICR code: Fill respective code.
8. Mention amount of mandate.
9. Select frequency of mandate.
10. Mention Folio Number.
11. Mention Scheme Name.
12. Telephone Number.
13. Email ID (Optional).
14. Period: Starting and Ending dates of NACH registration (in format DD/MM/YYYY). For perpetual SIP, please leave the end date blank and select "until cancelled".
15. Signature as per bank account.
16. Mention Holder Name as per Bank Record.
17. Auto Debit/NACH Mandate is applicable for both Individual and Non-Individual.
18. Auto Debit/NACH Mandate request is liable to be rejected only if the "Bank" mentioned in the request form is listed in the NACH banks list.
19. Baroda Pioneer will initiate debit instructions to the investor bank account only on receipt of valid investment instruction from the investor.

BARODA PIONEER MUTUAL FUND


बैंक ऑफ बड़ौदा
Bank of Baroda**FIRST / SOLE APPLICANT / GUARDIAN**[illegible]

Gender ☐ Male ☐ Female ☐ Others PAN

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 Occupation Type ☐ Service ☐ Business ☐ Others

[illegible][illegible]

Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes

Type of address given at KRA ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

Permissible documents are ☐ Passport ☐ Election ID Card ☐ PAN Card ☐ Govt. ID Card ☐ Driving License ☐ UIDAI Card ☐ NREGA Job Card ☐ Others

[illegible]

Country of Birth	Nationality
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Are you a tax resident of any country other than India? ☐ Yes ☐ No (If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.)

Country#	Tax Identification Number %	Identification Type (TIN or Other, please specify)

[#]To also include USA, where the individual is a citizen / green card holder of The USA [%]In case Tax Identification Number is not available, kindly provide its functional equivalent ^{\$}

SECOND APPLICANT[illegible]

Gender ☐ Male ☐ Female ☐ Others PAN Occupation Type ☐ Service ☐ Business ☐ Others

[illegible][illegible]

Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes

Type of address given at KRA ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

Permissible documents are ☐ Passport ☐ Election ID Card ☐ PAN Card ☐ Govt. ID Card ☐ Driving License ☐ UIDAI Card ☐ NREGA Job Card ☐ Others

[illegible][illegible]

Are you a tax resident of any country other than India? ☐ Yes ☐ No (If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.)

Country#	Tax Identification Number %	Identification Type (TIN or Other, please specify)

[#]To also include USA, where the individual is a citizen / green card holder of The USA [%]In case Tax Identification Number is not available, kindly provide its functional equivalent^s

THIRD APPLICANT

[illegible]Gender ☐ Male ☐ Female ☐ Others PAN Occupation Type ☐ Service ☐ Business ☐ Others[illegible][illegible]

Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes

Type of address given at KRA ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

Permissible documents are ☐ Passport ☐ Election ID Card ☐ PAN Card ☐ Govt. ID Card ☐ Driving License ☐ UIDAI Card ☐ NREGA Job Card ☐ Others

[illegible][illegible]

Are you a tax resident of any country other than India? ☐ Yes ☐ No (If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.)

Country#	Tax Identification Number %	Identification Type (TIN or Other, please specify)

[#]To also include USA, where the individual is a citizen / green card holder of The USA [%]In case Tax Identification Number is not available, kindly provide its functional equivalent^s

CERTIFICATION

I/We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same

SIGNATURES

[illegible]

FATCA & CRS TERMS & CONDITIONS

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian financial institutions such as Investment Entities to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with Baroda Pioneer Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS INSTRUCTIONS

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.

[§]It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	<ol style="list-style-type: none"> Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality". or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth.
Residence/mailling address in a country other than India	<ol style="list-style-type: none"> Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below).
Telephone number in a country other than India	<p>If no Indian telephone number is provided</p> <ol style="list-style-type: none"> Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below). <p>If Indian telephone number is provided along with a foreign country telephone number</p> <ol style="list-style-type: none"> Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR Documentary evidence (refer list below).
Telephone number in a country other than India	<ol style="list-style-type: none"> Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below).

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

- Certificate of residence issued by an authorized government body*.
- Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.).

* Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

AMC CONTACT ADDRESS

Baroda Pioneer Asset Management Company Limited CIN : U65991MH1992PLC069414 501, Titanium, 5th Floor, Western Express Highway, Goregaon (E), Mumbai - 400063. Tel. No.: 91 22 3074 1000	Baroda Pioneer Asset Management Company Limited Flat No. 103 & 104, First Floor, Prakash Deep Building, 7 Tolstoy Marg, New Delhi - 110001. Phone: 011-43514662 Fax: +91 11 4592117	Baroda Pioneer Asset Management Company Limited HP Complex, Flat No.12, 3rd Floor, Door No. 124/1, 2 & 3 New No. 14, G. N. Chetty Road,T. Nagar, Chennai - 600 017. Phone: 044 - 2834 3530, Fax: 044 - 2834 3539
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Visit us at : www.barodapioneer.in • Email:info@barodapioneer.in

Call Center Details & Toll Free No. :

Toll Free Number No. : 1800 2670 189

9 am to 6 pm - Monday to Saturday on all Business Days
9 am to 2 pm on 2nd & 4th Saturdays of the Month