Common Application Form - Lumpsum Cum SIP Application Form (Form 1)



Application No.

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	In case of the Monthly Option if no date is selected in the form, the default date is 10th of every month.														
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	Registration for this facility is subject to the investor's bankers accepting the mandate for SIP Top-up registration. 5. UNIT HOLDING OPTION (Switch not allowed for Demat holdings. Redemption through Stock Exchange Platforms/ DPs only)														
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For Financial Transactions Toll free 1-800-2-666688 Available between 8.00 am to 7.00 pm on business days only. For Non Financial Queries/Requests Toll free 1-800-300-66688 Available between 8.00 am to 7.00 pm on business days only.

Please note our investor service email id investormf@idfc.com

www.idfcmf.com

Form for Additional KYC, FATCA & CRS Annexure for



Individual Accounts (Form 1A) (Including Sole Proprietor) (Refer to instructions) (Please consult your professional tax advisor for further guidance on your tax residency) (Fields marked with * are mandatory for all and ® are mandatory for PAN exempt cases)

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Additional KYC Information*	First Applicant (Including Minor)	Second Applicant	Third Applicant	Guardian/POA/Proprieto										
Gross Annual Income (Rs.) - Categories *	Gross annual Income (Rs.)	Gross annual Income (Rs.)	Gross annual Income (Rs.)	Gross annual Income (Rs.)										
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Net-worth (Mandatory for Non-Individuals) (Rs.)	Older than 1 year)	(Not older than 1 year)	(Not older than 1 year)	O D M M Y Y Y Y (Not older than 1 year)										
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Occupation - Categories* Private Sector Service, Public Sector Service, Government Service, Business, Professional, Agriculturist, Retired, Housewife, Student, Forex Dealer & Others	Please write from options given	Please write from options given	Please write from options given	Please write from options given										
In case of business / profession, indicate the details (Including nature of goods/ services dealt in)														
Politically Exposed Person (PEP) Status*	I am PEP	I am PEP	I am PEP	I am PEP										
(Also applicable for authorised signatories/Promoters/Karta/Trustee /Whole time Directors)	I am a relative / associate of PEP	I am a relative / associate of PEP	I am a relative / associate of PEP	I am a relative / associate of PEP										
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Any other KYC related information which you wish to provide														
Note: Politically Exposed Persons (PEP) are defined politicians, senior government/judicial/military officer *Under Rule 9 of PMLA Rules, 2005, investments in MF DECLARATION I/We hereby acknowledge and confirm that the in information is found to be false or untrue or m changes/modification to the above information in share, remit in any form, mode or manner, all / any cits Sponsor, Asset Management Company, Trustee judicial authorities / agencies, the tax /revenue auth CERTIFICATION I/We have understood the information requireme on this Form is true, correct, and complete. I/We al	s, senior executives of state-owned consciences of upto Rs. 50,000/- per invitro provided above is/are traisleading or misrepresenting, I/we future and also undertake to provide the information provided by me/es, their employees, agents / service and other investigation agents of this Form (read along with the	proprations, important political party cestor per Mutual Fund per Financial yeue, correct and complete to the bees shall be liable for it. I/We also leany other additional information us, including all changes, updates to be providers, other SEBI registered incies without any obligation of adviruse FATCA, Additional KYC & CRS Insections of the services of the serv	officials, etc. aar shall be exempted from requirement est of my/our knowledge and belief undertake to keep you informed as may be required at your end. I/W o such information as and when pro- intermediaries or any Indian or fo sing me/us of the same.	int of Additional KYC information. In case any of the above specifier immediately in writing about any was the hereby authorise you to disclose vided by me/ us to the Mutual Function governmental or statutory of the information provided by me/us.										
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