

Application No.:

Distributor/RIA name and ARN/Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
127182			E206630	

I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.
Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

☐ I am a First Time Investor in Mutual Fund Industry. ☐ I am an Existing Investor in Mutual Fund Industry.

Sole / First Applicant's Signature Mandatory

1. FIRST APPLICANT'S DETAILS

Name of First Applicant (Should match with PAN Card)		PAN (1st Applicant / Guardian)	<input type="checkbox"/> KYC
Existing Folio Number		Name of Guardian (if minor)/POA/Contact Person	PAN (POA)
On behalf of Minor		Date of Birth	Guardian named is :
Date of Birth		Proof attached *	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed

2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS (As per KYC records)

Email ID (in capital)	Tel (STD Code)		Address Type (Mandatory) <input type="checkbox"/> a. Residential & Business <input type="checkbox"/> b. Residential <input type="checkbox"/> c. Business <input type="checkbox"/> d. Registered Office
Mobile +91			
Address			
Landmark			
City	Pin Code (Mandatory)	State	

3. KYC DETAILS (Mandatory)

3a. Status of Sole/1st Applicant (Please tick ✓) ☐ Indian Resident Individual ☐ Minor (Resident) ☐ Minor (Repatriable) ☐ Minor (Non Repatriable)
☐ NRI (Repatriable) ☐ NRI (Non-Repatriable) ☐ PIO ☐ Sole Proprietorship ☐ HUF - Indian ☐ HUF - NRI ☐ Partnership Firm ☐ Limited Partnership (LLP) ☐ Public Ltd. Co.
☐ Private Ltd. Co. ☐ Body Corporate ☐ Bank ☐ Fls ☐ Insurance Companies ☐ Government Body ☐ AOP/BOI ☐ Trust ☐ Society ☐ Provident Fund
☐ Superannuation / Pension Fund ☐ Gratuity Fund ☐ Mutual Fund ☐ FII ☐ FPI-Category I/II/III ☐ FCRA ☐ GDN ☐ Defence Establishment ☐ NPS Trust
☐ Others _____ (Please specify)

☒ Are you a Non-Profit Organization [NPO] or Company u/s 25 (Companies Act 1956) or u/s 8 of Companies, Act, 2013: ☐ Yes ☐ No

3b. Occupation Details (Please tick ✓) ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others _____ (Please specify)

3c. Gross Annual Income (Please tick ✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore
 Net-worth in (Mandatory for Non-Individuals) ₹ _____ as on ____/____/____ (Not older than 1 year)

3d. For Individuals (Please tick ✓)
☐ Not Applicable ☐ I am Politically Exposed Person ☐ I am Related to Politically Exposed Person

4. JOINT APPLICANTS (IF ANY) DETAILS

☒ Mode of Holding (Please tick ✓) ☐ Joint (Default) ☐ Anyone or Survivor

2nd Applicant Name (Should match with PAN Card)		PAN (2nd Applicant)	<input type="checkbox"/> KYC
a. Occupation Details (Please tick ✓) <input type="radio"/> Private Sector Service <input type="radio"/> Public Sector Service <input type="radio"/> Government Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Forex Dealer <input type="radio"/> Others _____ (Please specify)			
b. Gross Annual Income (Please tick ✓) <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore			
c. Others (Please tick ✓) <input type="radio"/> Not Applicable <input type="radio"/> Politically Exposed Person (PEP) <input type="radio"/> Related to a Politically Exposed Person (PEP)			
3rd Applicant Name (Should match with PAN Card)		PAN (3rd Applicant)	<input type="checkbox"/> KYC
a. Occupation Details (Please tick ✓) <input type="radio"/> Private Sector Service <input type="radio"/> Public Sector Service <input type="radio"/> Government Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Forex Dealer <input type="radio"/> Others _____ (Please specify)			
b. Gross Annual Income (Please tick ✓) <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore			
c. Others (Please tick ✓) <input type="radio"/> Not Applicable <input type="radio"/> Politically Exposed Person (PEP) <input type="radio"/> Related to a Politically Exposed Person (PEP)			


ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

DSP BLACKROCK MUTUAL FUND

Received, subject to realisation and verification an application for purchase of Units as mentioned in the application form.
From _____

Application No.

Scheme	Cheque no.	Amount
DSPBR		

Quick Checklist 	<input type="checkbox"/> Name, Address are correctly mentioned	<input type="checkbox"/> Full scheme name, plan, option is mentioned	<input type="checkbox"/> Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used.
	<input type="checkbox"/> Email ID / Mobile number are mentioned	<input type="checkbox"/> Pay-In bank details and supportings are attached	<input type="checkbox"/> Non Individual investors should attach
	<input type="checkbox"/> KYC information provided for each applicant	<input type="checkbox"/> Nomination facility opted	<input type="checkbox"/> FATCA Details and Declaration Form
	<input type="checkbox"/> FATCA/CRS details provided for each applicant	<input type="checkbox"/> Form is signed by all applicants	<input type="checkbox"/> UBO Declaration Form