Prese etc be te influctions with effing the Application form. Tot										\T I										_	_																		Į	Ś	sel	IN F	/U	ITI NC	JA)
157:26 E28:647 Processes Determined of the lation of the latin of the lation of the latin of the lation of the lation of the la	F	Plea	ise	refe	_	_	_	_	ons	while	e fill	ling f	the	Арр	_	_	_	_	_	_	_	_	_	_	_	_	ole.		0110		(50	000			000	-				_					
The second of t																					= / AGI	ENI	COD	E																					
	*1/		-	-	-	that	the [-1 1161	hov	haa h		intoni	tional		fthle	unic h					on "		ution	ook"	trans	antin	e with	out on	intore	otion		duine	by the			o/rol	otion	ahin							
EXAMPLECION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENE SOLVA (Filters lick sup our de the bown in contemport of the book of the application of the applicat	dis	strib	utor	or no	twith	stand	ing t	he ac	lvice	of in-a	appro	opriat	tenes	ily ie 3S, if	any,	prov	video	by t	the e	mplo	yee/	relat	ionsh	ip ma	nage	er/sale	es per	son of t	he dist	tribute	or an	d the	distrib	utor	has r	not c	harge	ed a	ny ad	visc	bry fe	es o	n this	s trans	sact
EXAMPLECION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENE SOLVA (Filters lick sup our de the bown in contemport of the book of the application of the applicat																																													
Control metal and an an Exception Mukaal Parado Exception Paradox as transpace deep controls of a metal of exception paradox paradox deep controls of a metal of exception paradox paradox deep controls of a metal of exception paradox paradox deep controls of exception paradox paradox deep controls of exception paradox deep controls deep controls of excepti	_	_									_	-																									/Autho	orised	d Sign	ator	y/PO/	A Hol	lder		
Without in the observation strength to impact the instance of the strength of the instance of the strength of the instance of the strength of the instance of the instan	ŀ	RA																000	GH	DIS	TR	IBL	στ	RS//	AGE												LEur	do							
particles Note: The Context of the Section of the				(Rs.	150/-	will be	ded	ucted	as tra	ansacti	on cl	harge	es for t	trans	sactio	n of l	Rs. 1										Rs. 10	0/- will b	e dedu	icted a	as tra	nsact	on cha	irges	for tra	ansa	ction o	of Rs							
Unit Holding Options Demat Node Projucal Node Projucal Node <	In pu	cas urcha	e the ase/s	purc ubsc	nase/ iptior	subso amo	unt a	on an Ind p	ayabl	is Rs. e to th	10,0 e dis	oo/- c	or mo tor, U	ore an Inits	nd yo will b	e iss	MF1 sued	Regi agai	istere nst ti	ed Dis ne ba	lance	tor h e am	as ch ount i	osen ' nveste	opt ir d.(re	n' opt efer G	on of eneral	Informa	ation P	oint N	n Cha Io. 11	arges I)	to the	rinve	estor,	the	same	are	dedu	Stibl	e as i	appli	icable	e from	Ine
	_							INF	OR	MA	ΓΙΟ	_					ting	foli	_						6,9,	11,1	2 and	17)																	
	Ľ	Jun		lair	ig U	ptic	ns					De	ema	it M	ode	9				Phys	Sica	al M	lode								Foli	io N	umb	er											
	D	EM	AT	AC	col	UNT	DE	ТА	ILS	(Ple	ase	ensu	re tha	at the	e seq	ueno	ce of	nam	nes a	s mei	ntion	ed ir	n the a	applic	ation	form	matcl	nes with	that, o	of the	acco	ount h	ield in	depo	ositor	у ра	rticip	ant.	Dema	it Ac	cour	it dei	tails	are	
COS: DP ID Number Beneficially Accurate Number Beneficial			-											natn	lioue	15 0	preu	abo	ve.)																										
Benefaliary Account Number Transaction Cum Holding Stitement EVM INVESTOR INPORMATION (foo billing in Block Lathers, prove laws of the Xole Name Norward) Made OF FIRSTSOLA APPLICANT M. M. M. M. M. M. MAR OF FIRSTSOLA APPLICANT M. M. M. M. MAR OF FIRSTSOLA APPLICANT M. M. M. M. MARE OF FIRSTSOLA APPLICANT M. M. M. M. MARE OF FIRSTSOLA APPLICANT M. M. M. M. M. M. MARE OF FIRSTSOLA APPLICANT M. M. M. M. MARE OF FIRSTSOLA APPLICANT M. M. M. M. MARE OF FIRSTSOLA APPLICANT MARE OF FIRSTSOLA M			-					•					Г		_										7							laste	r List					De	liver	v Ir	nstru	ctior	n Sli	a	
EW INVESTOR INFORMATION (fo be filled in Block Ledge, please large one box bink bidivecent vources) IAME OF FIRSTSOLE APPLICANT M Ms. MN PERN # Bale of Birth/Date of Incorporation O M M Y ANN PERN # Bale of Birth/Date of Incorporation O M M Y ArXer Link Weight and the assessment of the assessment				DOL								har	-		-	-		-	_		+	_		-	-											01-								F	
IAME OF FIRSTISOLE APPLICANT Mr. Ms. Ms. ANAPCEN # Mr. Ms. Ms. Ms. Attach Status Ms. Ms. Ms. Ms. Ms. Ms. Ms. Ms. Ms. Ms. Ms. Ms. Ms.													llod	in D	laak	Lot	ara	nlar		0.01/		0 h 0	v blo	nk ho	huo			de)		Ira	nsad	ction	Cum	Hold	aing	Sta	teme	ent						_	
NAVEENN #											<u>`</u>	be iii	lieu i	пы	IOCK	Leu	lers,	piea	1		1.1		x DIa			entw	/0 w0	us)																	
XYC Id											Τ														Τ															Τ		Γ			
XYC Id	γA	N/F	PERI	N #	+		-	+			+		-	+		-			+				κv	C Pro	of #		r)ate of	Birth	/Dat	e of	Inco	nors!	tion			+	P	-	$^{+}$	М	+	М	Y	+
adhar No By stang the Adhaser runnee: provide my content for stanling / dictioning of my Adhaser runneer is my / car bioling met adhaser runneer runneer is my / car bioling met adhaser runneer runneerunneer runneer runneer runneer runneer runneer runneer	_				+		-	+		-	+			+		-	-		+		-	Η	N1			_			Birti	Dut		moo	poru							<u> </u>					
Industry Benergenergenergenergenergenergenergener	_			Jo	-		-	+			+	_	-	+		-	_		+			+		By	shar	ina th	ne A ar	haar ni	ımher	Inro	vide	mv c	nseni	for	sharii	na /	discle	nsing	n of m	nv Δ	adha	ar ni	umb	er(s)	
ather's Name/Name of Guardian (in case of Minor) / Contact Person (in case of non individual applicant) M, M, Ms. Ms. ANJPERN #																								incl	udin	g der	nogra	phic inf	ormati	on wi	th th	e ass	et ma	nage	ment	t cor	npan	ies c	of SEE	BI re	egiste	ered	muti		nd a
XYC Id	а	the	er's	Nar	ne/N	lam	e of	f Gu	ard	ian (in c	ase	of N	Mino	or) /	Co	onta	ct F	Pers	son	(in	cas	e of			-			-						, ap	action	ig the	, our			,				
XYC Id											Τ			Τ		Γ									Τ															Τ					Τ
addhaar No By sharing the Aadhear number () provide my consent for sharing / disclosing of my Aadhear number () halling Address of First/Sole Applicant (PO Box address is not sufficient) By sharing the Aadhear number () provide my consent for sharing / disclosing of my Aadhear number () halling Address of First/Sole Applicant (PO Box address is not sufficient) By sharing the Aadhear number () provide my consent for sharing / disclosing of my Aadhear number () halling Address of First/Sole Applicant (PO Box address is not sufficient) By sharing the Aadhear number () hall monor dividual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individual/slegal entity)* Pin Code hall monor dividual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individual/slegal entity)* Country Presess Address Mode of Holding Single Joint elephone Mode of Holding Single Joint Anyone or Survivor (s)/bitaut option in case d more than ore Applicant) Country Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable (NRO) Others itabus Resident Individual Sole Proprietorship Society/Club Company NRI Non-Repartriable (NRO) Others itabus Resident Individual Sole Proprietorship Society/Club Company	'n	N/F	PERI	N #							+			+								Ē	KY	C Pro	of #			Rela	tionsh	nip w	rith N	/inor	/Desi	gna	tion					٨N	ND/		RY		
Initialing Address of First/Sole Applicant (PO Box address is not sufficient) their Registrar and Transfer Apent (RTA) for the purpose of updating the same in my / our folios. Iting Address of First/Sole Applicant (PO Box address is not sufficient) their Registrar and Transfer Apent (RTA) for the purpose of updating the same in my / our folios. Iting Address of Marking LPO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) All Non Individual Investors have to manatomity III FATCACRS Declaration form (for non-individuals/legal entity)* Diverseas Address Marking Address of Participation form (for non-individuals/legal entity)* Country IRST/SOLE APPLICANT OTHER DETAILS Country Individual Individual Individuals (Sigue I on in - Individual Sigue I on Individual Sigue I on Individual Sigue I on Individual Sigue I on Individual I on Individual Sigue I on Individual I on Indin I on Individual I on Individual I on Ind	ĸ	۲C	ld					+			+			+					+			Τ			Т																				
failing Address of First/Sole Applicant (PO Box address is not sufficient) heir Register and Transfer Agent (RTA) for the purpose of updating the same in my /our folios. bity State Country Pin Code in a state bity Bity Bity Country Country IRST/SOLE APPLICANT OTHER DETAILS Country Country Country Bity Mode of Holding Single <t< td=""><td>۱a</td><td>adha</td><td>ar N</td><td>١o</td><td>-</td><td></td><td></td><td>+</td><td></td><td></td><td>+</td><td>_</td><td>-</td><td>+</td><td></td><td>-</td><td></td><td></td><td>+</td><td></td><td></td><td>+</td><td></td><td>Ву</td><td>shar</td><td>ing th</td><td>ne Aac</td><td>l haar ni</td><td>umber</td><td>l pro</td><td>vide</td><td>my c</td><td>onsent</td><td>t for s</td><td>sharii</td><td>ng /</td><td>disclo</td><td>osing</td><td>g of m</td><td>1у А</td><td>adha</td><td>ar ni</td><td>umb</td><td>er(s)</td><td></td></t<>	۱a	adha	ar N	١o	-			+			+	_	-	+		-			+			+		Ву	shar	ing th	ne Aac	l haar ni	umber	l pro	vide	my c	onsent	t for s	sharii	ng /	disclo	osing	g of m	1у А	adha	ar ni	umb	er(s)	
Mainting Audress of Thescole repriction (CODA durids is to distribution) Princode Sity State Country Pin Code Verseas Address Mandatoriy fill FATCACRS Declaration form (for non-individuals/legal entity)* Country Verseas Address Mobile Country Country Verseas Address Mobile Country Country Verseas Address Professional Mode of Holding Single Joint Anyone or Survivor (s)(Default option n case of more tran one Applicant) Dephation Mode of Holding Single Joint Anyone or Survivor (s)(Default option n case of more tran one Applicant) Country Resident Individual Sole Proprietorship Sole Company NRI Repartiable Trust HUF Of Instabod Applicant) On Deal of Minor	۸.	بنالنه		١dd		of	Fire	+/9/		\ nnli	loar	nt i			× 20	Idro	2000	ie n		uffic	lion	+)		incl	udin	g der	nogra	phic inf	ormati	on wi	th th	e ass	et ma	nage	ment	t cor	npan	ies c	of SEE	BI re	egiste	ered	mutu		nd a
Decreases Address (Mandatory in case of NRUFILPO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) Diverseas Address	Ла	ann	ng A	400	ress	5 01	FILE	50/30	Jie A	чррп	icai	.n. ((PU	В0.	xac		355	is n		unic	Jen	()				3					,									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) Diverseas Address Overseas Address (Mandatory in caser fram Net Net Net Net Net Net Net Net Net	_	+		-	-			+			+	_	-	+		-	_		+			+			+	_				-	-		-	-	_		+			+		-	_		+
Deverses Address (Mandatory in case of NRUFILPO Box address is not sufficient. Investors residing overseas and with PO Box address please provide your Indian address) Diverseas Address Dioion Diver		.												4	C 4										^		4					D:						_		+		4			
All Non Individual Investors have to mandatorily fill FATCA/CRS Declaration form (for non-individualis/legal entity)* Decrease Address Process Address Intervention Interventi	_	-		A		() ()															4 1-						-			David											>				
Image: Strigger S																													n PO	BUX	auu	ress	pieas	se pi		ie y	ourn	nuia	in au	ure	:55)				
IRST/SOLE APPLICANT OTHER DETAILS elephone Mobile timal Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one Applicant) Decupation Business Professional House Wife Agriculture Service Student Retired Others Itatus Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable Trust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable ITrust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable ITrust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable ITrust MM Y Politically Exacs 1 - 25 Lacs 10 cacs 25 Lacs 10 crose Single </td <td>D١</td> <td>ver</td> <td>sea</td> <td>s Ao</td> <td>ldre</td> <td>ss</td> <td></td>	D١	ver	sea	s Ao	ldre	ss																																							
IRST/SOLE APPLICANT OTHER DETAILS elephone Mobile timal Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one Applicant) Decupation Business Professional House Wife Agriculture Service Student Retired Others Itatus Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable Trust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable ITrust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable ITrust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable ITrust MM Y Politically Exacs 1 - 25 Lacs 10 cacs 25 Lacs 10 crose Single </td <td></td>																																													
elephone Mobile imail Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one Applicant) Decupation Business Professional House Wife Agriculture Service Student Retired Others iffustiole Applicant) Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HUF of firstloole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable Trust HUF of firstloole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others strass Annual Income Below 1 Lac 5 - 10 Lacs > 25 Lacs - 1 Crore Networth M Y Politically Exposed Person (PEP) Status (Mote applicable deprivationes/ fromoters/ Karta/Trustee/ Whole time Directors) I am PEP I am Related to PEP Not Applicable kon - Individual Investors involved/ providing any of the mentioned services Foreign Exchange / Money Changer Services None of the Above Please attach proof. Refer instructions page point XII - PAN/PERN and KYC Exchange / Money Changer Services																																	Co	unti	ry										
imail Mode of Holding Single Joint Anyone or Survivor (s)(Default option in case of more than one Applicant) Cocupation Business Professional House Wife Agriculture Service Student Retired Others Iterationa Applicant) Business Professional House Wife Agriculture Service Student Retired Others Iterationa Applicant) Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HUF of firstsole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable NRO Others Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth MM MM MM Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Formoters/ Karla/ 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 Case attach proof. Refer instructions page point XII - PAN/PERN and KYC Exchanger / Casino Services No	I	RS	r/so	OLE	AP	PLI(CAN	NT C	DTH	ER D	DET	AIL	s																																
Cocupation If tratbole Applicant) Business Professional House Wife Agriculture Service Student Retired Others Agriculture Service Student Retired Others Trust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others Stross Annual Income Below 1 Lac 5 - 10 Lacs > 25 Lacs 1 Crore Networth (Mendetry for Non-Individual) Rs as On (Not obser than 1 year) O M M Y Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Katra/Trustee/Whole time Directors) I am PEP I am Related to PEP Not Applicable Non-y Applicable Service Gaming / Gambling / Lottery / Casino Services None of the Above Please attach proof. Refer instructions page point XII - PAN/PERN and KYC cknowledgement Slip (To be filled in by the investor) tecevived from Mr./Ms./M/s. n application for Scheme: Plan: Option: theque/DD No.: Dated: Amount (Rs.) traven on Bank and Branch: lease note: All Purchases are subject to realisation of Cheques/DD.	e	lep	hor	ne																									Мо	bile															
#firstNote Applicant) Business Professional House Wife Agriculture Service Student Retired Others istatus Resident Individual Sole Proprietorship Society/Club Company NRI Repartriable Trust HUF of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable NRO Others aross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth as on (Net older than 1 year) M M Y 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 Garming / Gambling / Lottery / Casino Services None of the Above Please attach proof. Refer instructions page point XII - PAN/PERN and KYC Status Collection Centre's Stamp & Receip Angplication for Scheme: Dated : Amount (Rs.) Date and Time Date and Time Iracknowledgement Silip (To be filled in by the investor)	In	nai	I																	Mod	e of	Hol	ding			Sir	gle	Jo	int	Any	one	or S	urviv	or (s)(Def	ault	option	in ca	ase of	mor	re tha	n on	e App	olicant)
Intersteed room Mr./Ms./M/s. Incknowledgement Slip (To be filled in by the investor)									Bus	iness	5	Г	P	rofe	essic	onal			Ηοι	use \	Wife	•		Aq	ricu	Iture	• 🗆	Servio	e		Stud	lent			Ret	tired	1	С	ther	s					
of first/sole Applicant) Partnership Firm On Behalf of Minor Bank/Financial Institution NRI Non-Repartriable (NRO) Others aross Annual Income Below 1 Lac 5 - 10 Lacs >25 Lacs - 1 Crore Net-worth a 1 - 5 Lacs 10 - 25 Lacs >1 Crore (Mandatory for Non-Individuale) Rsas on (Net older than 1 year) D M M Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/Trustee/ Whole time Directors) 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 Bease attach proof. Refer instructions page point XII - PAN/PERN and KYC acknowledgement Slip (To be filled in by the investor) teceived from Mr./Ms./M/s an application for Scheme: Plan: Option: theque/DD No. : Dated : Amount (Rs.) transmont Rate are subject to realisation of Cheques/DD.				piloarii	,		+		Res	iden	t Ind	divid	Jual	Ε	s	ole	Pro	prie	etors	ship		Sc	ciet	y/Clu	bС	Com	pany		NRI			Re	partr	iabl	е				Tr	ust		HUF	F		
District Action of the Ladia in Section of Cheques/DD. District Action of the Ladia in Section of Cheques/DD. 1.5 Ladia in Section of the Ladia in Section of Cheques/DD. In Cheques/DD. As On (Net older than 1 year) D M				e App	olicar	nt)														•									NRI				•												
Image: Contract in the image: Contrac	Gr	oss	Anr	nual	Inco	me	T		Belo	w 1	Lac	: 🗆 ह	5 - 1	0 L;	acs																						_								
Ion - 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 KYC cknowledgement Slip (To be filled in by the investor) Image: Collection Centre's Stamp & Receip Date and Time eceived from Mr./Ms./M/s. Plan: Option: n application for Scheme: Dated : Amount (Rs.) rawn on Bank and Branch : Image: Collection of Cheques/DD. Image: Collection of Cheques/DD.									1 - 5	i Lac	s	1	10 -	25	Lac	s	>1	Cro	ore				(Mand	atory fo	r Non-	-Indivio	luals) F	s				as	on (N	lot old	er thar	n 1 ye	ar)			<u>ט</u>			IVI	Y	
Gaming / Gambling / Lottery / Casino Services None of the Above Please attach proof. Refer instructions page point XII - PAN/PERN and KYC Image: Collection Centre's Stamp & Receiped and Time in application for Scheme: Plan: Option: Cheque/DD No. : Dated : Amount (Rs.) In application of Bank and Branch : Image: Collection of Cheques/DD. Image: Collection of Cheques/DD.	-							•										-			noters	s/ Ka																				• •		le	
Please attach proof. Refer instructions page point XII - PAN/PERN and KYC icknowledgement Slip (To be filled in by the investor) icknowledgement Slip (To be filled in	10	on -	Indi	vidu	al In	vesto	ors II	nvolv	/ed/	provi	ding	j any	/ of t	he r	nen	tion	ed s	ervi	ices							-		•				-								•		vnin	ng		
Incknowledgement Slip (To be filled in by the investor) Incknowledgement Slip (To be filled in by the investor) Interestive of from Mr./Ms./M/s. Collection Centre's Stamp & Receip Date and Time In application for Scheme: Plan: Option: Interpreter Dated : Amount (Rs.) Interpreter Dated : Amount (Rs.) Interpreter Date and Branch : Interpreter Date Interpreter Date and Branch : Interpreter Date Interpreter Date Option: Interpreter Date and Branch : Interpreter Date Interpreter Date Interpreter Date	P	leas	se at	tach	pro	of. R	efer	inst	ructio	ons n	age	poir	nt XI	ll - F	۹N/	PEF	RN #	and	KYC	;			L			ıy /	Jaii	ung /	LULLE	/ yı:	Jas	5110	Jeiv	0005		110	ne C	/i (1)	e Aŭ	-070	J				
Iterceived from Mr./Ms./M/s. Collection Centre's Stamp & Receip Date and Time In application for Scheme: Plan: Option: Cheque/DD No. : Dated : Amount (Rs.) Cheque/DD No. : Dated : Amount (Rs.) In application on Bank and Branch : Iteration of Cheques/DD. Iteration of Cheques/DD.	-										-																																		
In application for Scheme: Plan: Option: Date and Time Cheque/DD No. : Dated : Amount (Rs.) Date and Time Irrawn on Bank and Branch : Image: Cheques/DD. Image: Cheques/DD. Idease note : All Purchases are subject to realisation of Cheques/DD. Image: Cheques/DD. Image: Cheques/DD.	c	kn	owle	edg	eme	nt S	lip	(To l	be fi	lled i	n by	y the	e inv	est	or)																										ł	sse	I F		D
In application for Scheme: Plan: Option: Date and Time Cheque/DD No. : Dated : Amount (Rs.) Date and Time Irrawn on Bank and Branch : Image: Cheques/DD. Image: Cheques/DD. Idease note : All Purchases are subject to realisation of Cheques/DD. Image: Cheques/DD. Image: Cheques/DD.	P	Cei	Ved	fror	n Mr	·/Me	/\/	/s																												Col	lecti	ion	Cent	tre'	s St	amr	0 &	Rece	eipt
Cheque/DD No. : Dated : Amount (Rs.) Drawn on Bank and Branch :								_											D	lar.								Intion						-		50									pr
Prawn on Bank and Branch :														0								Pr	`				_ '	JPuON	·																
Please note : All Purchases are subject to realisation of Cheques/DD.													Date	eu :	·				_ A	11101	unt (rtS.)											-											
																• ·			-															-											
Website: www.esselfinance.com	le	eas	e no	ote :	ali F	urcl	nase	es a	re s	ubjec	ct to	, rea	ilisat	tion	of C	Che	que	es/D		.	_			• • •																					

COMMON APPLICATION FORM

		TAILS																						
NAME OF SECO	OND APPLI	CANT	E	Mr.	M	S.																		
PAN/PERN #										KYC	Proof #		Date of Bir	th/Date	of Incorp	oration		D	D	М	M	Υ		
CKYC Id																								
Aadhaar No											demographic	informa		asset m	anagemen	t compar	nies of SEE	I regis	tered i	mutual t	ar number(s) incluc al fund and their			
Gross Annual Inc	come	Below 1	Lac 🗌	5 - 10	Lacs	>2	5 Lacs	- 1 Cror	e Po	olitically	-		(PEP) Status				I am P	-	,					
] 1 - 5 Lao	CS	10 - 2	5 Lacs	>1	Crore		(Al	so applica	ole for authorised	signatories	s/ Promoters/ Karta	a/ Trustee/	Whole time D	irectors)	I am R	elated	to Pl	EP	Not A	oplica		
Father's Name																								
Occupation (of first/sole Applicant	t)		Busines	S	Pro	fessio	onal	- Ho	use W	'ife	Agric	ulture	Service	•	Student	. [Retire	d	Oth	ners				
NAME OF THIR	D APPLICA	NT			Mr.		Ms.																	
						_							D ((D)											
PAN/PERN #						_	_			KYC	Proof #		Date of Bi	rtn/Date	e of Incor	poration		D	D	M	M	Υ		
CKYC Id																								
Aadhaar No	demographic information with the asset management companies of SEBI registered mutual fund and																							
	Registrar and Transfer Agent (RTA) for the purpose of updating the same in my / our folios.															uieii								
Gross Annual Inc		Below 1 1 - 5 Lao			Lacs 5 Lacs			- 1 Cror	I am PEP															
Father's Name																								
Occupation															~									
Instruction Applicant) Business Professional House Wife Agriculture Service Student Retired Others ower of Attorney (POA)																								
NAME OF POA				Mr.	M	S.	M/s	•																
			N/PERN # Date of Birth D M																					
PAN/PERN #					# Date of Birth D M IFORMATION/ FOREIGN TAX LAWS (For Individual including Sole Proprietor) (For Non-individual, mandatory to fill up FATCA CRS form) (Refer instruction)															D	MN	1		
	RMATIO	N/ FORE	EIGN T	AX L		For Inc	dividua					Non-inc	dividual, mai	ndatory	to fill up									
*FATCA INFC		N/ FORE	EIGN T.	AX L	AWS (For Inc		al includi	ng Sol	e Prop		Non-ind	dividual, mai	ndatory	to fill up							1		
*FATCA INFC Place of Birth				AX L	AWS (For Inc	Co	al includi untry of	ng Sol Birtl	e Prop 1	rietor) (For I			ndatory		FATCA	CRS form			structio	on)			
*FATCA INFC Place of Birth Nationality	India	ın 🗌	EIGN T. U.S.	AX L	AWS (For Inc	Co	al includi untry of x Reside	ng Sol Birtl ence /	e Prop 1	rietor) (For I	Addre		ndatory			CRS form			structio				
*FATCA INFO Place of Birth Nationality Others (Ple	India lndia ease speci	ın 🗌 fy)	U.S.				Cou Tax	al includi untry of Reside Others	ng Sol Birtl ence /	e Prop 1 Addres	rietor) (For I ss (for KYC	Addre		ndatory		FATCA	CRS form			structio	on)			
*FATCA INFC Place of Birth Nationality	India ase speci resident (i proceed fo e fill for Al	fy) .e. are yo r the sig L countr	U.S. ou asse	essed	for Tax) in ar	Cou Tax ny oth	al includi untry of k Reside Others er coun	ng Sol F Birth ence /	e Prop n Addres	rietor) (For I ss (for KYC Busir ndia? Ye	Addre ness	ess) No	[Res	FATCA	CRS form	ו) (Re	efer in	structio	on) gistere	d		
*FATCA INFO Place of Birth Nationality Others (Ple Are you a tax If 'No' please If 'YES', pleas in the respect Applicant	India ase speci resident (i proceed fo e fill for Al	fy) .e. are yo or the sig L countr es	U.S. ou asse	essed of dec lier tha	for Tax laratior In India) in ar	Cou Tax ny oth	al includi untry of x Residu Others er coun you are Tax	ng Sol F Birth ence / try ou Resic	e Prop n Addres itside I lent fo fication	rietor) (For I ss (for KYC Busir ndia? Ye	Addre ness s ses i.e	No Ce., where you	Du are	Res	FATCA idential	CRS form dent / Gi	reen (is no	efer in	struction Re Re Holde	on) gistere	ed Res tick [
*FATCA INFO Place of Birth Nationality Others (Ple Are you a tax If 'No' please If 'YES', pleas	India ase speci resident (i proceed fo e fill for Al	fy) .e. are yo or the sig L countr es	U.S. ou asse nature o ies (oth	essed of dec lier tha	for Tax laratior In India) in ar	Cou Tax ny oth	al includi untry of x Residu Others er coun you are Tax	ng Sol F Birth ence / try ou Resic	e Prop n Addres itside I lent fo fication	rietor) (For I ss (for KYC Busir ndia? Ye r tax purpo	Addre ness s ses i.e	No Ce., where you	Du are	Res a citizer	FATCA idential	CRS form dent / Gi	reen is no n A, E	efer in Card t avai 3 or C	struction Re Re Holde	on) gistere er / Tax please	d Res tick D		
*FATCA INFO Place of Birth Nationality Others (Ple Are you a tax If 'No' please If 'YES', pleas in the respect Applicant Details	India ase speci resident (i proceed fo e fill for Al	fy) .e. are yo or the sig L countr es	U.S. ou asse nature o ies (oth	essed of dec lier tha	for Tax laratior In India) in ar	Cou Tax ny oth	al includi untry of x Residu Others er coun you are Tax	ng Sol F Birth ence / try ou Resic	e Prop n Addres itside I lent fo fication	rietor) (For I ss (for KYC Busir ndia? Ye r tax purpo	Addre ness s ses i.e	No Ce., where you	Du are	Res a citizer	FATCA idential	CRS form dent / Gi lf TIN reaso	reen (is no n A, E son A	efer in Card t avai 3 or C	Holde	on) gistere er / Tax please efined I	d Res tick E pelow		
*FATCA INFO Place of Birth Nationality Others (Ple Are you a tax If 'No' please If 'YES', pleas in the respect Applicant Details Applicant 1	India ase speci resident (i proceed fo e fill for Al	fy) .e. are yo or the sig L countr es	U.S. ou asse nature o ies (oth	essed of dec lier tha	for Tax laratior In India) in ar	Cou Tax ny oth	al includi untry of x Residu Others er coun you are Tax	ng Sol F Birth ence / try ou Resic	e Prop n Addres itside I lent fo fication	rietor) (For I ss (for KYC Busir ndia? Ye r tax purpo	Addre ness s ses i.e	No Ce., where you	Du are	Res a citizer	FATCA idential	CRS form dent / Gi lf TIN reaso * Rea	is no n A, E son A	efer in	Holde able,	on) gistere er / Tax please efined I	d Res tick E pelow		
*FATCA INFO Place of Birth Nationality Others (Ple Are you a tax If 'No' please If 'YES', please If YES', please in the respect Applicant Details Applicant 1 Applicant 2	India ease speci resident (i proceed for e fill for Al ive countri ve countri	In fy) .e. are your the signed the signed to the signed t	U.S. ou asse nature o ies (oth y of Tax	essed of dec er tha Resid Holder	for Tax laration n India ency) in ar 1 a) in w	Cou Ta: ny oth hich y	al includi untry of x Residu Others er coun you are Tax I	ng Sol F Birth ence / try ou Resic Identi Functi	e Prop n Addres tside I lent fo fication onal Ed	rietor) (For I	/ Addre ness s s ses i.e	No contraction in the second s	ou are ntificat	a citizer	FATCA idential n / Resi cify)	CRS form dent / Gi if TIN reaso * Rea	is no n A, E son A	efer in	struction Re Holde lable, (as du B B	on) gistere er / Tax please efined I	d Res tick E below		
FATCA INFO Place of Birth Nationality Others (Ple Are you a tax If 'No' please If 'YES', please in the respect Applicant Details Applicant 1 Applicant 2 Applicant 3 * Reason A Th * Reason B No	India case speci resident (i proceed for the fill for Al ive countri ve country w o TIN requir ners; please n that the in mitted abov any change	In fy) .e. are your the signature of th	U.S. Du asse nature o ries (oth y of Tax Account t this reason provideo onfirm th cation to	essed of dec eer tha Resid Holder ason C thereo d herei at I ha the at	for Tax laration in India ency : is liabli- nly if th f. nabove vie reaco ove infi) in ar n n) in w i) in w e to pa e auth is true t and u	Cou Taz ny oth which y ay tax (orities e, correction on in fi	al includi untry of Residu Others er coun you are Tax f does not of the co	ng Sol F Birtl ence / try ou Resic Identi Functi issue suntry omple FATC.	e Prop n Addres Itside I Ient fo fication onal E	rietor) (For I	r umberer not record	No No e., where you (Tin or of (Tin or of the the TIN wdge and be itions below	ents.	Res a citizer ion Type lease spe collected	FATCA idential n / Resi cify)	CRS form dent / Gi if TIN reaso * Rea * Rea * Rea olely liable same. 1 als	reen (is no n A, E son A son C	cert in Card	Re Holde lable, a da d B B B B	gistere er / Tax please efined I c c c (c (for the eep you	rd Res tick E below C		

Communication in Iber 31 & 32, Tower B, S



COMMON APPLICATION FORM

		1SSEI FUND
10	10 *BANK ACCOUNT DETAILS (Please attach copy of cancelled cheque) For registering	Multiple Bank Accounts please fill up "Registration of Multiple Bank Account" Form
	Name of the Bank :	Branch:
	Account Type (Please 🗹) SB Current NRO NRE FCNR A	Account Number :
	Branch Address :	City: Pin:
	IFSC Code :	
	AMC reserves the right to use any mode of payment deemed appropriate. I/We understand that AMC shall not be respo	MICR Code :
11		-
		Plan Regular Direct
	Option Growth Dividend S	Sub-Option Dividend Payout Dividend Reinvestment (default)
	In case of any ambiguity / incomplete information, the default plan / option / sub-option will be a Statement of Additional Information. Please see the Plan, Option and Dividend policy details in	applicable as per the scheme's Key Information Memorandum, Scheme Information Document & the SID/KIM before filling in the above details.
	Dividend Frequency	···· ···· · · · · · · · · · · · · · ·
12	· · ·	
12		ransfer Others Please specify
	Cheque/DD No.	Date D D M M Y Y Y Y
	Gross Amount (Rs) DD Charges (Rs)	Net Amount (Rs)
	Drawn on Bank & Branch	Account Type SB Current NRO NRE FCNR
13	13 SYSTEMATIC INVESTMENT PLAN (SIP) PAYMENT TYPES (Please select a	ny one option)
	SIP through Post Dated Cheques (Please fill & submit with this attached form)	through Auto Debit (ECS) (Please fill up enclosed SIP Auto Debit (ECS) Form & submit with this form)
14	14 NOMINATION DETAILS (Please refer to Instructions page point no VII) in case of a	isting investor, nomination details mentioned in the below table will replace the existing details registered in the folio
		sung investor, noniniation details mentioned in the below table will replace the existing details registered in the follo
	Relationship Date of Birth C	uardian Name Allocation Sign of Sign of Sign of
	Nominee Name with Nominee of Minor (in case	e Nominee is Minor) (%) Guardian Nominee Applicants
		1st App.
		2nd App.
		3rd App.
	Please note that if you do not furnish any nomination details, it is deemed to be ass	umed that you do not wish to nominate anyone
15	-	
19	I/We wish to receive the following documents via email in lieu of physical document (s) I/We wish to receive the Account Statement in (any one)
	Annual Reports Account Statement Other Statutory Informati	, , , , , , , , , , , , , , , , , , ,
16		
16		
	Resolution/Authorisation to invest	Specimen Signatures Memorandum & Articles of Association
	Trust Deed Bye-laws Partnership Deed	Overseas Auditor Certificate Notarised POA Copy of cancelled cheque
	Copy of PAN Card KYC PIO Card Foreign Inwar	d Remittance Certificate Special Product Form (SIP / STP / SWP / AEP)
17	17 *DECLARATION AND SIGNATURES	
		ument of the Scheme (s). I/We hereby apply for units of the scheme as indicated above and agree to abide by the terms and y Laundering Act, 2002 and such other regulations as may be applicable from time to time. I/We confirm to have understood the
	investment objective, investment pattern and risk factors applicable to Plan/Option under the Scheme (s). I/We agree	that in case of mylour investment in the scheme is equal to or more than 25% of the corpus of the scheme, then Essel Finance ig mylour investment below 25%. I/We have not received nor been induced by any rebate or gifts, directly or indirectly in making
	this investments. I/We undertake that these investments are on my/our own account and in event Know Your Custome	er process is not completed by me/us to the satisfaction of the Mutual Fund, I/We hereby authorise the Mutual Fund to redeem ption and undertake such other action with such funds that may be required by the law. I/We declare that the amount invested in
	the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any	Act, Regulations orany other applicable law enacted by the Government of India or any Statutory Authority. I/We hereby declare redemption amount to my bank details given above. The ARN holder has disclosed to me/us all the commission (in the form of
	trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds fron Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad throu	n amongst which the Scheme is being recommended to me/us. For NRIs : I/We confirm that I am/We are Non-resident of Indian gh approved banking channels or from my/our Non-resident External/Ordinary Account/FCNFI/NRSR Account.
		lecting, storing and usage (ii) validating/authenticating and (iii) updating my/our Aadhaar number(s) in accordance with Aadhaar
		gement companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the
	Sole/1st applicant/Guardian/Authorised Signatory/POA Holder 2nd Applicant	/Authorised Signatory/POA Holder 3rd Applicant/Authorised Signatory//POA Holder
	All fields marked with * are mandatory	
	CHECKLIST (Please submit the following documents with application wherever applicable). All documents si	nould be original/true copies certified by a Director/Trustee/Company Secretary/Authorised Signatory/Notary Public.

MUTUAL

Documents	Individual	Companies	Societies	Partnership Firm	Investment through POA	Trust	NRI	Flls
Resolution/Authorisation to invest		\checkmark	\checkmark	\checkmark		\checkmark		\sim
List of Authorised Signatories with Specimen Signatures		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\sim
Memorandum & Articles of Association		\checkmark						
Trust Deed						\checkmark		
Bye-laws			\checkmark					
Partnership Deed				\checkmark				
Notarised POA					\checkmark			
PAN/PERN Proof	\checkmark	√	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
KYC in case of Investment of any Amount	1	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	
Foreign Inward Remittance Certificate							\checkmark	\checkmark
Copy of Cancelled Cheque	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
FATCA & CRS Declaration		\checkmark	\checkmark	√	\checkmark	\checkmark		\checkmark