2	S	BI	Μ	U	TU	A	. F	U	ND	1
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APPLICATION NO.

A FARINER FUR LIFE						S-3004/16
				<u> </u>	se fill in BLOCK Letters)	1
ARN & Name of Distributor	Branch Code (only for SBG)	Sub-Broker ARN	Code Sub-Broke	r Code	EUIN* (Employee Unique Identification Number)	Reference No.
Declaration for "execution-only" transaction * I/We hereby confirm that the EUIN box has been	I (only where EUIN box is intentionally left blank by me/us	left blank) (Refer Instru as this is an "execution-or	ction 1 (p)) Ily" transaction without any ir	nteraction or ad	vice by the employee/relationship manager/s	ales person of the above
distributor or notwithstanding the advice of in-appro	opriateness, if any, provided by	the employee/relationship	manager/sales person of the	e distributor and	the distributor has not charged any advisory	fees on this transaction.
SIGNATURE(S)						
Upfront commission shall be paid directly by	ian / Authorised Signato	· · · · · ·	ant / Authorised Signa sed on the investors' ass		3rd Applicant / Authorised arious factors including the service rend	
TRANSACTION CHARGES FOR	APPLICATIONS TH	ROUGH DISTRIB	JTORS/AGENTS O	NLY (SEE	NOTE 16)	
In case the subscription amount is Rs. 10 investor other than first time mutual fund						
1. PARTICULARS OF FIRST AP	•		uniouni una pula lo ini			NOTE 1)
I confirm that I am a First time inv		ds	I confi	rm that I am	an existing investor in Mutual Fund	,
EXISTING FOLIO NO.			(For Exisiting un	itholders: Pl	ease mention your Folio number, N	ame and PAN
			details and then	proceed to	Investment and Payment details- 8))
Mame (Mr./Ms./M/s.)						
Gender Male Female	Other (Third Gender)	Date of Birth		(Y Y	′ Y	
						1 1 1 1
Father's Name						
Spouse's Name						
Name of Guardian / Name of Contact						
(in case of Minor) (in case of Insti Relationship of Guardian in case of Minor	tutional Investor)	e document evidencina the	relationship of Minor with G	uardian (See N	ote 1 h)] Father Mother	Legal Guardian
(In case of Minor, please fill the following	• •					
Email ID	· · · · ·					
Mobile No. County Code						
Please register your E-mail address & Mobile number	to get alerts & communication via	a E-mail & SMS.				
Telephone (O)						
County Code				andatory En	closures PAN Proof KYC	Acknowledgement
Telephone (R)						
County Code				_	_	
Type of address given at KRA	Residential		Business	۲ L	Registered Office	
Address of tax residence would be taken a	as available in KRA databas	se. In case of any chang			changes. KRN for Micro investments)	
PAN			•	•	ument given at KRA	
					0	
AADHAAR No			Document Issu	ing Countr	У	
	siness Governme	ent Service 🗌 Privat	e Sector Service	Public Sec	tor Service	
(Please (✓)) □ Retired Hot	usewife Student	Forex	Dealer	Doctor	Others [Please s	pecify]
Gross Annual Income in Rs. (Please	tick (1): Below 1 L	ac 1-5 Lacs	5-10 Lacs	10-25 Lacs	25 Lacs - 1 Cr. > 1 C	r. OR
Notworth in Po			as of (date)	DMI	MYYYYY	
Networth in Rs			as of (date)	U IVI	IVI T T T T	
Politically Exposed Person [PEP] :	Yes No	Related to PEP				
For Non-individuals : Is the entity invo	olved / providing any of th	e following services	Yes No			
- For Foreign Exchange / Money Chang			ng / Gambling / Lottery	Services (e	.g. Casinos, Betting Syndicates)	Yes No
- Money Lending / Pawning	Yes	No No				
NOTE: Non-individual applicants should		I alongwith this form.				
2. PARTICULARS OF SECOND	APPLICANT				(SEE	NOTE 1 & 2)
Name Mr./Ms./M/s.						
Gender Male Female	Other (Third Gender)	Date of Birth				
Father's Name						
Spouse's Name						
Type of address given at KRA	Residential		Business		Registered Office	
Address of tax residence would be taken a		, ,		,		
Investors subscribing to t	he scheme through SIP	must complete Regi		form comp	ulsorily alongwith application form	
SBI MUTUAL FUND Sponsor : State Ba	ank of India				~p	
A DADINED FOR LIFE INVESTMENT Manag	ger : SBI Funds Management tween SBI & AMUNDI)		WLEDGEMENT S		PPLICATION NO.	
(To be filled in by the First applicant/Au				1 1		Signature
Received from :						Signature, Date &
Scheme Name Plan		ividend Facility(✔) einvestment □ Payout	Cheque/ DD Amount (Rs.) Bank	and Branch Cheque / DD No. &	Date Stamp
		ansfer				
Attachments			All p	urchases are	subject to realisation of cheque / deman	d draft
	Tents An purchased are outport to realization of one que / domaine area.					

AADHAAR No	PAN Exempt KYC Ref no (PEKRN for Micro in Type of Identification Document given a Identification Document No.	at KRA
Occupation Professional Business Government Service Private Se	Document Issuing Country	Agriculturist
(Please (<)) Retired Housewife Student Forex Dea		Others [Please specify]
Gross Annual Income in Rs. (Please tick (✔)): □ Below 1 Lac □ 1-5 Lacs □	5-10 Lacs 🔲 10-25 Lacs 🗌 25 Lacs	- 1 Cr. > 1 Cr. OR
Networth in Rs	as of (date)	YY
Politically Exposed Person [PEP]: Yes No Related to PEP		
3. PARTICULARS OF THIRD APPLICANT		(SEE NOTE 1 & 2)
Name Mr./Ms./M/s.		
Gender Male Female Other (Third Gender) Date of Birth	D M M Y Y Y	
Father's Name		
Spouse's Name		
Type of address given at KRA Residential	ness Registered O	ffice
Address of tax residence would be taken as available in KRA database. In case of any change, pl	ase approach KRA & notify the changes.	
PAN		KYC Acknowledgement
	PAN Exempt KYC Ref no (PEKRN for Micro i Type of Identification Document given a	
	Identification Document No	
Occupation Professional Business Government Service Private Se	Document Issuing Country tor Service Public Sector Service	Agriculturist
(Please (~)) Retired Housewife Student Forex Dea		Others [Please specify]
Gross Annual Income in Rs. (Please tick (✔)): Below 1 Lac 1-5 Lacs	5-10 Lacs 🔲 10-25 Lacs 📃 25 Lacs	- 1 Cr. > 1 Cr. OR
	s of (date) D D M M Y Y	v I v I
Networth in Rs Politically Exposed Person [PEP] : Yes No Related to PEP		
4. FATCA & CRS RELATED INFORMATION (Only for Individuals/Proprie	tor)	
DETAILS OF FIRST APPLICANT		
Country of Birth	Place of Birth	
Nationality		
Are you a tax resident of any country other than India? Ves No		
If Yes, please indicate all countries in which you are resident for tax purposes and the		
	associated Tax Identification Numbers below:	
Country /(ies) (also include USA, where the individual is a citizen/ green card holder of USA)	Tax Payer Identification Numbers below:	IdentificationType * (TIN or Other, please specify)
Country /(ies) (also include USA, where the individual is a citizen/ green card holder of USA)		Identification Type * (TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA)	Tax Payer Identification Number *	(TIN or Other, please specify)
	Tax Payer Identification Number *	(TIN or Other, please specify)
 (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which application and attach the statement of the sta	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT	Tax Payer Identification Number *	(TIN or Other, please specify)
 (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which application and attach the statement of the sta	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Bith	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies)	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies)	Tax Payer Identification Number *	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies) (also include USA, where the individual is a citizen/ green card holder of USA)	Tax Payer Identification Number * Image: Constraint of the second seco	(TIN or Other, please specify) (TIN or Other, please specify) (Identification Type* (TIN or Other, please specify) (TIN or Other, please specify)
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(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies) (also include USA, where the individual is a citizen/ green card holder of USA) t is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica	Tax Payer Identification Number * Image: State of the sta	(TIN or Other, please specify)
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies) (also include USA, where the individual is a citizen/ green card holder of USA) t is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica	Tax Payer Identification Number *	(TIN or Other, please specify) s yet available or has not yet been issued, IdentificationType* (TIN or Other, please specify) s yet available or has not yet been issued,
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes If Yes, please indicate all countries in which you are resident for tax purposes and the Country/(ies) (also include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which application and attach this to the form.	Tax Payer Identification Number *	(TIN or Other, please specify) s yet available or has not yet been issued, IdentificationType* (TIN or Other, please specify) s yet available or has not yet been issued,
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(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies) (also include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica Any communication in connection with this application should be addressed to Investment Manager : SBI Funds Management Pvt. Ltd. (A Joint Venture between SBI & AMUNDI) 9th Floor, Crescenzo, C-38 & 39,	Tax Payer Identification Number *	(TIN or Other, please specify) (TIN or Other, please specify) (Identification Type* (TIN or Other, please specify) (TIN or O
(also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality 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 Country/(ies) (also include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica It is mandatory to supply a TIN or functional equivalent if the country in which applica <td< td=""><td>Tax Payer Identification Number * ax resident issues such identifiers. If no TIN is ax resident issues such identifiers. If no TIN is Place of Birth </td><td>(TIN or Other, please specify) (TIN or Other, please specify) (Identification Type* (TIN or Other, please specify) (TIN or O</td></td<>	Tax Payer Identification Number * ax resident issues such identifiers. If no TIN is ax resident issues such identifiers. If no TIN is Place of Birth	(TIN or Other, please specify) (TIN or Other, please specify) (Identification Type* (TIN or Other, please specify) (TIN or O

Email: customer.delight@sbimf.com

	20001101700
Email: er	nq_L@camsonline.com
Website:	www.camsonline.com

DETAILS OF	THIRD) AP	PLIC	ANT																							
Country of Birth	ountry of Birth Place of Birth																										
Nationality	Nationality																										
If Yes, pleas	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 Reference Numbers below: Country/(ies) Tax Payer Identification Number* Identification Type* (also include USA, where the individual is a citizen/ green card holder of USA) Tax Payer Identification Number* Identification Type*																										
	include	- 03A	wilei	eulei		uaris		sn/ yn	een ca	unoi		034												ei, pie	ase sp	eeny)	<u> </u>
please provi	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. (Please attach additional sheets if necessary and mention all countries in which applicant is a tax resident & provide relevant details) . GENERAL INFORMATION – Please () wherever applicable (SEE NOTE 1 m & n)																										
						-														,			(SE	EE NO	DTE 1	m &	& n)
						Status																		Mode			
Resident Indi	ividual					Sol	le-Pro	prieto	r			Π	Goverr	nmen	t Body	/			NGO					Sin	ale		
Resident Min	or (thr	ough (Guard	ian)		-		•	Compa	iny			Society	/					LLP					_	-		
NRI (Repatria	able)					Pri	vate L	imited	d Comp	any			Trust											Joi	nt		
NRI (Non-Re		,				Bo	dy Co	rporat	e				NPS TI						PIO						one o	or	
NRI– Minor (I	-	-	hla)			-	rtnersl	hip Fii	m				Fund o						NPO	[]	Please	specif	fv1	Su	vivor		
NRI – Minor (Pension and		-				-	/ FPI						Gratuit AOP	y ⊢un	Id				Others				.,,,				
Financial Ins			unu			HUI Roi							BOI						Other		Please	specify	iv1				
6. CONTACT		-																10000	opeon		EE NO		1				
Local			1	l.		1	1	1	1		1	1	I	1	1	1	1	1	1	1	1		(01)	1 1
Address of																											
1st Applicant											1							1									
0.1				1			I					1	1		1	1	1	1	1	1	1			1	I		
City																					Pin						
State																											
	Addre	ss for (Corres	ponde	nce for	NRI A	oplicar	nts onl	v (Plea	se (🗸)) India	n by D	efault	7		For	reign										
Foreign Address	1			1						,	1	1			1	1			1	1	1	I I		1	1		1 1
(Mandatory for NRI / FII)				<u> </u>							<u> </u>	<u> </u>	<u> </u>		<u> </u>		<u> </u>	<u> </u>		<u> </u>	<u> </u>			<u> </u>	<u> </u>		<u> </u>
City																											
Country													1		1			Zip		1				1			
7. BANK PAR		LAR	S (As	per S	EBI Re	qulati	ons it	is ma	ndator	v for l	nvest	ors to	provid	e the	ir ban	k acco	unt de	tails)		1	!	<u> </u>	(SI	EE N	OTE :	8)	
	1		1	1	1		1	1	1	1	1	1	1	1	1		1	1								- / ·	
Name of Bank																											
Branch Name																											
and Address		i		i	i				i		1	1	i		1	1	1	1	1	i	1	 I I		i	i		1 1
		I		<u> </u>	I		 		<u> </u>		<u> </u>	<u> </u>				<u> </u>	<u> </u>	<u> </u>		1	I			<u> </u>	I		<u> </u>
City																					Pin						
Account No.																			_								
										(Thie	s is 9 dia	nit num	ber next	to the c	heque	number	Please	 nrovi	de a		1	count		· ·	,		
9 digit MICR Code	•												D cheque		neque	number.	1 10030	. 610 41		Savi	ngs	NRC			NR		
IFS Code	1			1							1								L	Curr	ent	NRE		Ot	hers_		
8. INVESTMEN						11 9 -		would	l liko ta	invo	et in t	ho fo	lowing	Scho		FORIN	Autua	Eup	d					(SEE	NOT	E 5)	
			A I IVII														nutua	i i uli	u						NOT	L 3)	
One time I	nvestr	nent			Sy	PD		ivest	ment F	'lan (SIP) (IT Yes	, pleas	е тіск	any o	one)											
					L			of SIF	throug	gh Po	st Dat	ed Cl	neques	(PD0	C) it is	mand	atory	to su	bmit Tr	ansact	tion SI	ip ment	tionir	ng PD0	C deta	ils)	
							rect De													. –		• -	_			_	
						(In	case	OT SIF	rnrou	jn Dir	ect De	DIT/IN		is ma	ndato	ry to si	iomit :	SIPE	nrolme	nt Forr	n and	One II	me L		landati	e Forr	<u>n)</u>
Scheme Name																											
Plan (Please ✓)				Reg	ular				Direct					In	case o	of Divide	end Tra	ansfer	facility,	please	mentio	n target	sche	me alo	ng with	plan/c	option.
Option (Please ✓)				Grov	wth				Divider	d																	
Dividend Facility	(Pleas	se 🗸)		Beir	vestm	ent			Payout		Г	Tr	ansfer	Sc	cheme	e / Plar	n / Opt	tion_									
				_									wn on l		and P	Ironal						Chequ			0 ° P	ate	
	uneq	ue/D	JAM	iount (ns.)							Dra	wii Off I	Jailk		manich				+		Unequ	ue / D	.D. N	υ. α D	ale	
Inve	stmen	t Amo	ount (Rs. in	Figur	es)									In	vestm	ent Ar	nour	ıt (Rs.	in Wor	ds)						
For third party c	heque	s plea	ise se	e Not	e 3 vii																						

9. STP ENROLL	MENT	DETA	ILS	0	pted	for S	STP:		Yes		N	0	(lf	Yes,	it is	mand	atory	to sub	omit S1	P Enro	ollmer	nt Form/Transaction slip)
10. DEMAT ACC																						
If you wish to ho	old units	s in De	emat	mod f nam	le, ple	ease	provi	i de b ed in	elow	deta annli	ails a	nd er	nclos	e the	e late	estC	lient	Mas	ter / l	Dema	t Aco	count Statement (Mandatory). th the Depository Participant.
Nationa		-								аррп												Limited (CDSL)
Depository											De	posite	orv								,	
Participant Name -											– Pa	Irticipa	ant Na	ıme								
DP ID No.		I	Ν								Та	rget ID) No.									
Beneficiary Account	it No.																					
							,												,			ther allotment of units (through their Depository Participant only.
11A. NOMINATIO	N : I wis	h to no	omina	ate the	e follo	wing	perso	n/s to	recei	ve th	e proc	eeds	in the	e evei	nt of r	ny de	ath.	(With	effect	from 0	1/04/2	2011, for (SEE NOTE 10)
individual investors Name of the Nomin		with si	ingle l	holdin	ng, Nor	minat	ion is I	mand	atory.	How	ever, i	n case	e you (do no	ot wish	to no	omina	te ple	ase sig	jn poin	it 11 B	.) (SEE NOTE 10)
Name of the Guard															-	-		_				-
Percentage Relationship											Date	of Di	rth*	_	-					N		
Address of Nomine	e/										Date		run	D	D	M	IVI	Y	Y	Y	Y	│ ⊗ Signature of Nominee/Guardian
Guardian																						(*Mandatory in case of Minor nominee)
Name of the Nomin	iee																					
Name of the Guard	ian																					
Percentage																						
Relationship											Date	of Bi	rth*	D	D	M	M	Y	Y	Y	Y	
Address of Nomine Guardian	e/																					Signature of Nominee/Guardian (*Mandatory in case of Minor nominee)
Name of the Nomin	nee																					
Name of the Guard	lian																	+				-
Percentage																						
Relationship											Date	of Bi	rth*	D	D	М	M	V	V	V	V	
Address of Nomine	e/										2410			U	U	IVI	IVI		1		1	│ ⊗ Signature of Nominee/Guardian
Guardian			1.1.													- 1						(*Mandatory in case of Minor nominee)
11B. NOMINATIO		J HOL V	WISH		minal	le an	y pers	5011 6		ume		aking	Jule	inve	sine	nii.						
Signature																						
12. DECLARATIC	ON (SEE	NOTE	E 11)):	l/We c	onfir	m tha	t the	inforr	natic	on pro	ovide	d in tl	nis fo	orm is	s true	8 ac	curat	e. I/W	e have	e read	d and understood the contents
																						any rebate or gifts, directly or the Fund ") is derived through
legitimate sources	and is	not he	ld or	desig	gned f	for the	e pur	pose	of co	ntrav	ventio	n óf a	any a	ct, ru	iles, r	egula	ations	s or a	ny sta	tute o	or leģi	slation or any other applicable
																						d by me in the schemes of the in the definition of the term 'US
Person' under the	US Sec	urities	laws	s) / res	sident	t of C	anada	a are	not el	ligibl	e for	inves	tmen	ts wi	ith th	e Fur	id an	d I/W	e am/	are no	ot a U	.S. person/resident of Canada;
																						her for the different competing Memorandum and Articles of
																						am/are authorised to enter into
																						hat funds for the subscriptions Account; (viii) *** I/We do not
hold a Permanent	Accoun	t Num	ber a	ind ho	old on	ıly a s	ingle	PAN	Exem	ipt K	YC Re	ferer	nce N	o. (Pl	EKRN	l) issı	led b	y KY	C Regi	stratio	on Ag	ency and also confirm that the
																						upees Fifty Thousand); (ix) all le and belief and I/We shall be
liable in case any	of the s	pecifie	d info	ormat	tion is	foun	d to l	oe fal	lse or	untr	ue or	misle	adin	gor	misre	pres	entin	g; (x)	that v	we aut	thoriz	e you to disclose, share, remit
																						as and when provided by me/ horities/agencies including but
not limited to SE	BI, the F	inanci	ial In	tellige	ence	Unit-l	ndia,	the	tax/re	venu	ie aut	horit	ies in	Indi	ia or	outs	ide Ir	ndia v	where	ver it	is leg	gally required and other such
																						the same; (xi) I/We shall keep s may be required by you from
																						o seek additional personal, tax
																						n 30 days should there be any n me) the Fund may be obliged
to share informati	on on m	iy acco	ount v	with r	eleva	nt tax	auth	oritie	s; (c)	l/We	am a	ware	that	the F	und r	may a	also k	be rec	quired	to pro	ovide	information to any institutions
																						eto; (d) as may be required by ar account or close or suspend
																						esidency; (f) I have understood
																						rovided by me/us on this Form A Terms and Conditions below
and hereby accep				and	51 13 []	46,6	51166	., and		Piere				andt		- 1 - 1 - 1	a unc	. anu	5, 5100	a 118		
* Applicable to ot	her than	Indivi	iduals	s / HL	JF; **	Арр	licable	e to N	NRIs;	*** /	Applic	able	to "N	licro	inve	stme	nts"					
SIGNATURE(S)																						
(ALL Applicants																						
must sign)																						
	\otimes								8)									\otimes			

2nd Applicant / Authorised Signatory

Place

3rd Applicant / Authorised Signatory

Date
Duio

1st Applicant / Guardian / Authorised Signatory