

## TATA MUTUAL FUND

Mafatlal Centre 9th Floor Nariman Point Mumbai - 400 021



Cheque Details Overleaf / Subject to realisation.

## **Common Application Form For Tata Mutual Fund**

I. Advisor / I	Distributor Information		Refer Sec.			
Details of the » advisor empanelled	Broker / ARN Code	Sub-Broker ARN Code	Sub-Broker / Bank Branch Code			
with Tata Mutual Fund who has guided you for this investment.	EUIN Code	OR Declaration for "execution-only" transaction – I/We hereby confirm that the EUIN box has bee intentionally left blank by me/us as this is an "execution-only" transaction without any interaction of 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 tess on this transaction.				
	the distributor and the distributor has not charged any advisory fees on this transaction.  In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive transaction charges, ₹ 150/- (for First time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested. 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.					
	Sole / 1st Applicant Signature / Thumb Impression	2 <sup>nd</sup> Applicant Signature / Thumb Impression	3 <sup>rd</sup> Applicant Signature / Thumb Impression			
. Applicant's	Information		Refer Sec. A, C &			
St Applicant's Do	Any applicants should not be a resident of Canada or a pother entities organised under the laws of the U.S. For Inc. BY CVLMF", additionally 'KYC Change Details Form' is	person who falls within the definition of the term "U.S. Pers	olders. No joint holders allowed with 1st applicant as a minor on" under the US Securities Act of 1933 and corporations or lary 01, 2012 i.e. the KYC status reflects as "MF · VERIFIED lally "KYC-Individual Form" is required.			
st Applicant's Det						
The first applicant > will be the primary holder and all	Mr. Ms. Ms. M/s. Name	PAN / PEKRN				
correspondence will be sent to him/her.						
Only the first holder can be a minor.	Date of Birth (DOB)	In case of Minor: Proof of DOB: Birth certificate School leaving certificate Passport Others				
ower Of Attorne	v (POA) / Proprietor Details / C	Uardian details in case of mind	or applicant			
POA / Proprietor /						
Guardian Details		PAN / PEKRN				
	Name					
To be filled by »	Relationship with the Minor Applicant	Proof of Relationship				
Guardian	$\square$ Mother $\square$ Father $\square$ Legal Guardian	$\square$ Birth certificate $\square$ School leaving certifi	cate Passport Others			
ax Status						
	NRI-Repatriation Hindu NRI-Non-Repatriation Partne Minor - Resident Individual Comp Minor - NRI Trust	ership	<ul><li>☐ Foreign Portfolio Investor</li><li>☐ Foreign Institutional Investor</li></ul>			
3. Contact De	tails		Refer Sec.			
Mailing address			·			
This is required >	>					
communication, we will overwrite this						
address with the 1st Applicants address			City			
as per the KRA			,			
records	PIN	State	Country			
	Residence Phone (prefix STD Code)	Office Phone (prefix STD Code)	F. thu			
	Mobile	Email Extn				
TATA MUTUAL HUND		Acknowledgement Slip	Sr. No.:			

Received from Mr./Ms./M/s.

for purchase in \_\_\_\_

Overseas address						
Mandatory for Non-Resident Individuals and Overseas Investors in addition to the mailing address.						
			City			
	State	ZIP Code	Country			
4. Investment	Instrument Details	'	Refer Sec. I			
The name of the » first applicant should be available on the investment Cheque.	Gross Amount (₹) (A)  Account Number	DD Charges (₹) (if any) (B)  A/c Type	Net Amount (₹) (Cheque / DD Amount) (A - B)			
Cheque/ DD to be drawn in favour of 'Name of the Scheme'	Drawn on Bank	Dated    D   D   /   M   M   /   Y   Y   Y   Y    Cheque / DD No.				
	Branch		Branch City			
5. Investment	Scheme Details		Refer Sec. F & Product Label			
Scheme Name »						
Plan (select any one) »	Regular Direct					
Option »						
Sub Option »						
<b>Div. Payout Option</b> (select any one)	☐ Dividend Reinvestment ☐ Dividend Payout					
6. Bank Accou	ınt Details		Refer Sec. (			
	The bank account details provided below will be hel payouts (if applicable).	d on record and considered as default bank mand	late to pay redemption proceeds and dividend			
This must be an Indian account. The 1st applicant should be a holder in this account.	Bank Name	Branch				
	Account number	A/C type Savings Current NRO				
	MICR	IFSC for RTGS	IFSC for NEFT			
	Address					
	City	PIN	State			
Cheque Details		knowledgement Slip				
Chagua /DD No	datad	A/c No	Pank			

 $Subject\ to\ realisation.$ 

Call 1800 209 0101 (On all days between 9 am and 9.30 pm)

	as on	on DD / M M / Y Y Y Y	as on			
	(not older than 1 year)	(not older than 1 year)	(not older than 1 year)			
Others »	<ul><li>□ Not Applicable</li><li>□ Politically Exposed Person</li><li>□ Related to Politically Exposed Person</li></ul>	<ul><li>Not Applicable</li><li>Politically Exposed Person</li><li>Related to Politically Exposed Person</li></ul>	☐ Not Applicable ☐ Politically Exposed Person ☐ Related to Politically Exposed Perso			
Additional KYC Details for Non - Individuals						
For Non Individuals >> Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company:						
Trust, Partnership etc.)  Non Individual investors involved/providing any of the mentioned services  Gaming / Gambling / Lottery / Casino Services  Money Lending / Pawning  None of the above						

>25 Lacs-1 crore

Networth in

 $\square$  >1 crore

Networth in

## 9. Foreign Account Tax Compliance Act (FATCA) Details

Networth in (Mandatory for Non-individual)

>1 crore

Refer Sec. K

 $\square$  >1 crore

## **FATCA Related Details for Individuals**

□ >25 Lacs-1 crore

CATEGORIES	FIRST APPLICANT /	GUARDIAN	SECOND APPLICANT		THIRD APPLICANT	
Country of Birth »						
Place of Birth »						
Nationality »						
Type of address given » at KRA	Residential or Business Registered Office	Residential Business	Residential or Business	Residential Business	Residential or Business	Residential Business
Ava vav alaa a s			<u> </u>		<del> </del>	
Are you also a >> resident in any other country(ies) for tax purposes?	No  If yes, complete section be	elow.	│	Yes		☐ Yes
Country of Tax Residency 1 >>						
Tax Identification Number 1 >>						
Identification Type 1 »						
Country of Tax Residency 2 »						
Tax Identification Number 2 »						
Identification Type 2 »						

Supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet been issued, please provide an explanation and attach this to the form

FATCA Related Details for Non Individuals: Please submit Form W8 BEN-E / Specified declaration (Enclosed)

				,	
Mandatory for Individual(s) applying singly or jointly.				tunate event of death of all unit holders. All payments eipt thereof, shall be a valid discharge by the AMC/	
Select any one >					
,	Nominee Name		<u>-                                      </u>		
	Nominee's relationship wit	h 1st holder	Date of Birth	Proof of DOB (in case of minor)  Birth Certificate School Leaving Certificate Passport Others	
	Address				
				City	
	Charles		DIN	,	
	State		PIN	Country	
If the nominee is a > minor to be filled by Guardian	Name of the Guardian				
	Address of the Guardian				
				City	
	State		PIN	Country	
	Guardian's Relationship wi	th the Nominee	Proof of relationship  Birth Certificate  School Leaving Certificate  Others		
	1 <sup>st</sup> Applicant Thumb Im		2 <sup>nd</sup> Applicant Signature / Thumb Impression	3 <sup>rd</sup> Applicant Signature / Thumb Impression	
11. Demat Ac	count Details			Refer Sec. M	
Engura that the	Fill these details only if yo	u wish to have your uni	ts in Demat mode.		
Ensure that the sequence of names as mentioned in the	Depository participant Name				
application form matches with that of the	Central Depository Securities Limited			National Securities Depository Limited	
account held with the	Target ID No.			DP ID No.	
Depository Participant. In case the details are					
found to be incorrect,				Beneficiary Account No.	
Units will be allotted in physical mode.					
12. Declaration	on and Signatur	es		Refer Sec. N	
I/We am/are not prohib	nited from accessing canital	markets under any order	/ruling/judgment etc. of any r	regulation, including SEBI. I/We confirm that my	
application is in complia (1) I / We have read, u Units of the Schem	ance with applicable Indian a understood and hereby agree ne(s) of Tata Mutual Fund ('Fu	nd foreign laws. I / We he to comply with the term ind') indicated in this app	reby confirm and declare as ur is and conditions of the schem dication form.	nder:- le related documents and apply for allotment of	
Scheme(s) is throu	ole Investor(s) as per the sch igh legitimate sources only a by any regulatory authority in	nd is not for the purpose	and am/are authorised to mak of contravention and/or evasion	e this investment. The amount invested in the on of any act, rules, regulations, notifications or	
(3) The information gi required by the Ta	iven in / with this application	form is true and correct a d (TAML)/ Fund and unde		h other further/additional information as may be d/Registrars and Transfer Agent (RTA) in writing	
			I to be false/ untrue/misleading	g, I/We will be liable for the consequences arising	
updates that may be service providers,	be provided by me/us to the M SEBI registered intermediarion	Mutual Fund, its Sponsor/ es for single updation/ s	s, Trustees, Asset Management ubmission, any Indian or forei	n and/or any part of it including the changes/ Company, its employees, agents and third party gn statutory, regulatory, judicial, quasi-judicial	
(6) I/We will indemnify my/our transaction	y the Fund, AMC, Trustee, R1 ns.	A and other intermediari	es in case of any dispute regar	any intimation/advice to me/us.  ding the eligibility, validity and authorization of	
to him/them for th	ne different competing Schem m that I/We have not been off	nes of various Mutual Fun	ds from amongst which the Sch	of trail commission or any other mode), payable neme is being recommended to me/us. r indicative yield by the Fund/AMC/its distributor	
be fully liable for a	als Resident in India only: I/W all consequences (including to	exation) arising out of the	cire investment/s before I/We ch e failure to redeem on account oce with applicable Indian and F	Foreign laws.	
	I		I	Date:	
1 <sup>st</sup> Applica	int Signature /		nt Signature /		