

For Resident Indians and NRIs/FIIs/FPIs



Application No.

Collection Centre /
BSLAMC Stamp & Signature

2. GO GREEN (Please tick (✓)) (Refer Instruction No. 10)

☐ SMS Transact ☐ Online Access **Mobile No.** +91 I/ We would like to register for my/our SMS Transact and/ or Online Access

| Email Id |
|----------|
|----------|

Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: (Please tick (✓)) ☐ Account Statement ☐ Annual Report ☐ Other Statutory Information

| Facebook Id | Twitter Id |
|-------------|------------|
|-------------|------------|

3. BANK ACCOUNT DETAILS (Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details) Refer Instruction No. 3(A)

[illegible][illegible][illegible][illegible]

Account Type (Please tick (✓)) ☐ SAVINGS ☐ CURRENT ☐ NRE ☐ NRO ☐ FCNR ☐ OTHERS (please specify) _____

| | | | | | | | | | | | | | | | | | | | | |
|--------------------|--|--|--|--|--|--|--|--|--|--|-------------------|--|--|--|--|--|--|--|--|--|
| 11 Digit IFSC Code | | | | | | | | | | | 9 Digit MICR Code | | | | | | | | | |
|--------------------|--|--|--|--|--|--|--|--|--|--|-------------------|--|--|--|--|--|--|--|--|--|

4. INVESTMENT DETAILS [Please tick (✓)] (Refer Instruction No. 5, 9 & 14) (If this section is left blank, only folio will be created)

Seperate cheque/ demand draft must be issued for each investment drawn in favour of respective scheme name and the instrument should be crossed "A/c Payee Only".

Please write appropriate scheme name as well as the Plan/Option/Sub Option

| S. No. | *Cheque / DD Favouring Scheme Name (refer Instruction 5) | Plan / Option | Sweep to (applicable only for Dividend option) | Cheque Date | Amount Invested (₹) | ^DD Charges | Net Amount Paid (₹) | Cheque/DD No./UTR No. (in case of NEFT/RTGS) | Bank and Branch and Account Number |
|--------|--|---------------|--|-------------|---------------------|-------------|---------------------|--|------------------------------------|
| 1. | BSL | | Scheme Name | | | | | | |
| | | | Plan / Option | | | | | | |
| 2. | BSL | | Scheme Name | | | | | | |
| | | | Plan / Option | | | | | | |
| 3. | BSL | | Scheme Name | | | | | | |
| | | | Plan / Option | | | | | | |

(Type of Account : Saving / Current / NRE / NRO / FCNR / NRSR) *All purchases are subject to realization of funds ^Refer to Instruction No. 5 (vi)

KYC DETAILS (Mandatory)

OCCUPATION (Please tick (✓))

| | |
|------------------------|---|
| FIRST APPLICANT | <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife |
| | <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others (please specify) |

| | |
|-------------------------|---|
| SECOND APPLICANT | <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife |
| | <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others (please specify) |

| | |
|------------------------|---|
| THIRD APPLICANT | <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife |
| | <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others (please specify) |

GROSS ANNUAL INCOME (Please tick (✓))

| | | | | | | | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|--|--|--|---|---|---|---|---|---|---|
| FIRST APPLICANT | <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore | | | | | | | | | | | | | | | | |
| | Net worth (Mandatory for Non - Individuals Rs. _____ as on <table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> [Not older than 1 year] | | | | | | | | | | D | D | M | M | Y | Y | Y |
| D | D | M | M | Y | Y | Y | Y | | | | | | | | | | |

SECOND APPLICANT ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ > 25 Lacs - 1 Crore ☐ > 1 Crore OR Net Worth _____

THIRD APPLICANT ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ > 25 Lacs - 1 Crore ☐ > 1 Crore OR Net Worth _____

| For Individuals | For Non-Individual Investors (Companies, Trust, Partnership etc.) |
|-----------------|---|
|-----------------|---|

For Non-Individual Investors (Companies, Trust, Partnership etc.)

| | | | |
|---|--|------------------------------|-----------------------------|
| <input type="checkbox"/> I am Politically Exposed Person | Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (If No, please attach mandatory UBO Declaration) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> I am Related to Politically Exposed Person | Foreign Exchange / Money Charger Services | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> Not Applicable | Gaming / Gambling / Lottery / Casino Services | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Money Lending / Pawning | <input type="checkbox"/> Yes | <input type="checkbox"/> No |



| S. No. | Scheme Name | Plan / Option | Net Amount Paid (₹) | Payment Details | |
|--------|-------------|---------------|---------------------|---|-----------------|
| | | | | Cheque/DD No./UTR No. (in case of NEFT/RTGS) | Bank and Branch |
| 1. | BSL | | | | |

5. **DEMAT ACCOUNT DETAILS (OPTIONAL)** (Please ensure that the sequence of names as mentioned in the application form matches with that of the A/c. held with the depository participant.) Refer Instruction No. 3(B)

NSDL: Depository Participant Name: _____

DPID No.:

I

N

Beneficiary A/c No.

CDSL: Depository Participant Name: _____

Beneficiary A/c No.

Enclosed: ☐ Client Master ☐ Transaction/ Statement Copy/ DIS Copy

6. **NOMINATION DETAILS (Mandatory)** (Refer Instruction No. 7)

☐ I/We wish to nominate ☐ I/We DO NOT wish to nominate and sign here 1st Applicant Signature (Mandatory)

| | Nominee Name and Address | Guardian Name (in case of Minor) | Allocation % | Nominee/ Guardian Signature |
|-----------|--------------------------|----------------------------------|--------------|-----------------------------|
| Nominee 1 | | | | |
| Nominee 2 | | | | |
| Nominee 3 | | | | |

To register multiple nominee please fill separate Multiple nomination Form.

7. **FATCA & CRS INFORMATION [Please tick (✓)] For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA detail form**

The below information is required for all applicant(s)/ guardian

Address Type: ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office (for address mentioned in form/existing address appearing in Folio)

Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? ☐ Yes ☐ No

If Yes, please provide the following information [mandatory]

Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

| Category | First Applicant (including Minor) | Second Applicant/ Guardian | Third Applicant |
|---|-----------------------------------|----------------------------|-----------------|
| Name of Applicant | | | |
| Place/ City of Birth | | | |
| Country of Birth | | | |
| Country of Tax Residency# | | | |
| Tax Payer Ref. ID No^ | | | |
| Identification Type [TIN or other, please specify] | | | |
| Country of Tax Residency 2 | | | |
| Tax Payer Ref. ID No. 2 | | | |
| Identification Type [TIN or other, please specify] | | | |
| Country of Tax Residency 3 | | | |
| Tax Payer Ref. ID No. 3 | | | |
| Identification Type [TIN or other, please specify] | | | |

#To also include USA, where the individual is a citizen/ green card holder of USA. ^In case Tax Identification Number is not available, kindly provide its functional equivalent.

8. **DECLARATION(S) & SIGNATURE(S)** (Refer Instruction No. 1)

To,
The Trustee,
Birla Sun Life Mutual Fund

Date

D

D

M

M

Y

Y

Y

Y

Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.

For Non-Individual Investors: I/We hereby confirm that the object clause of the constitution document of the entity (viz. MOA / AOA / Trust Deed, etc.), allows us to apply for investment in this scheme of Birla Sun Life Mutual fund and the application is being made within the limits for the same. I/We are complying with all requirements / conditions of the entity while applying for the investments and I/We, including the entity, if the case may arise so, hereby agree to indemnify BSLAMC / BSLMF in case of any dispute regarding the eligibility, validity and authorization of the entity and/or the applicants who have applied on behalf of the entity.

For NRIs only: I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External /Non-Resident Ordinary /FCNR account. (Refer Inst. No. 6)

I/We confirm that details provided by me/us are true and correct.

****I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Birla Sun Life Asset Management Company Ltd. (Investment Manager of Birla Sun Life Mutual Fund) and confirm of having read, understood and agree to abide the terms and conditions for availing of the internet facility more particularly mentioned on the website www.birlasunlife.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.**

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

FATCA & CRS Declaration: I/ We have understood the information requirements of this Form (read along with FATCA & CRS Instructions) and hereby confirm that the information provided by me/ us on this Form is true, correct, and complete. I/ We also confirm that I/ We have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same. (Refer Inst. No. 14)

Signature of First Applicant / Authorised Signatory

Signature of Second Applicant

Signature of Third Applicant