

Name & ARN Code	Sub Distributor ARN	Internal code for sub Agent / Branch Code	EUIIN®	Bank Serial No. / Bank Stamp / Receipt Date
<p>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. In case purchase/subscription amount is Rs. 10,000/- or more and the investor's Distributor has opted to receive "Transaction Charges" the same are deductible as applicable from the purchase/subscription amount and payable to the distributor. Units will issued against the balance amount invested.</p> <p>@ <input type="checkbox"/> I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.</p>				
Signatures		First / Sole Applicant / Guardian	Second Applicant	Third Applicant
<b>1. EXISTING UNIT HOLDER INFORMATION</b> Folio No. _____ [Please fill in Folio No. & name of 1 <sup>st</sup> unit holder and proceed to Investment Details]				
<b>2. APPLICANT'S PERSONAL DETAILS (MANDATORY)</b>				
Mode of holding (Please ✓) <input type="checkbox"/> Anyone or Survivor <input type="checkbox"/> Single <input type="checkbox"/> Joint (Default option is Anyone or Survivor for Joint holding)				
<b>Name of First/Sole Applicant/Minor*</b> (as appearing in ID proof) _____ Gender (Please ✓) <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other _____ Date of Birth _____ D D M M Y Y Y Y				
PAN (Attach Proof) _____ Nationality _____				
Place/City of Birth _____				
Country of Birth _____				
Father's Name _____ KYC (Please ✓) <input type="checkbox"/> Proof Attached				
<b>Status (Please ✓)</b> <input type="checkbox"/> Individual <input type="checkbox"/> Non-Individual [Please attach mandatory "Ultimate Beneficial Ownership (UBO) including additional FATCA & CRS information" Form] <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI / PIO <input type="checkbox"/> Trust <input type="checkbox"/> HUF <input type="checkbox"/> Bank / Fls <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Minor <input type="checkbox"/> Company/Body Corporate <input type="checkbox"/> FIs <input type="checkbox"/> Partnership Firm <input type="checkbox"/> AOP / BOI <input type="checkbox"/> Society <input type="checkbox"/> Other _____ (Please Specify)				
<b>Type of address given at KRA</b> <input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office (In case of any change please approach KRA and notify changes.)				
<b>Permissible documents are</b> <input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Other _____ (Please Specify)				
Identification Number _____				
<b>Occupation (Please ✓)</b> <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <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"/> Other _____ (Please Specify)				
<b>Gross Annual Income Details (Please ✓)</b> <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"/> >25-1 Crore <input type="checkbox"/> >1 Crore Net-worth in ₹ _____ as on (date) _____ D D / M M / Y Y Y Y (Not older than 1 year)				
<b>Politically Exposed Person (PEP) Status</b> (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors) <input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable				
<b>Non-Individual Investors involved / providing any of the mentioned services</b> <input type="checkbox"/> Foreign Exchange/Money Changer Services <input type="checkbox"/> Money Lending/Pawning <input type="checkbox"/> Gaming/Gambling/Lottery/Casino Services <input type="checkbox"/> None of the above				
<b>Correspondence Address (Please provide full Address)</b>			<b>Overseas Address (Mandatory for NRI / FII Applicants)</b>	
HOUSE FLAT NO. _____			HOUSE FLAT NO. _____	
STREET ADDRESS _____			STREET ADDRESS _____	
CITY/TOWN _____ STATE _____			CITY/TOWN _____ STATE _____	
COUNTRY _____ PINuCODE _____			COUNTRY _____ PINCODE _____	
Tel. (Off.) _____			Tel. (Res.) _____	
E-Mail: _____			Mobile _____	
<b>Name of the Guardian#/contact person for non-individual</b> PAN (Attach proof) _____ Nationality _____ KYC (Please ✓) <input type="checkbox"/> Proof Attached Relationship with Minor Please (✓) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian				
* If the first/sole applicant is a Minor, then please provide details of Natural / Legal Guardian. # In case first applicant is a minor				
<b>Name of Second Applicant</b> (as appearing in ID proof) _____ Gender (Please ✓) <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other _____ Date of Birth _____ D D M M Y Y Y Y				
PAN (Attach Proof) _____ Nationality _____				
Place/City of Birth _____				
Country of Birth _____				
Father's Name _____ KYC (Please ✓) <input type="checkbox"/> Proof Attached				
<b>Status (Please ✓)</b> <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI / PIO				
<b>Type of address given at KRA</b> <input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office				
<b>Permissible documents are</b> <input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Other _____ (Please Specify)				
<b>Occupation (Please ✓)</b> <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <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"/> Other _____ (Please Specify)				
<b>Gross Annual Income Details (Please ✓)</b> <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"/> >25-1 Crore <input type="checkbox"/> >1 Crore				
<b>Politically Exposed Person (PEP) Status</b> <input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable				
<b>Name of Third Applicant</b> (as appearing in ID proof) _____ Gender (Please ✓) <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other _____ Date of Birth _____ D D M M Y Y Y Y				
PAN (Attach Proof) _____ Nationality _____				
Place/City of Birth _____				
Country of Birth _____				
Father's Name _____ KYC (Please ✓) <input type="checkbox"/> Proof Attached				
<b>Status (Please ✓)</b> <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI / PIO				
<b>Type of address given at KRA</b> <input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office				
<b>Permissible documents are</b> <input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Other _____ (Please Specify)				
<b>Occupation (Please ✓)</b> <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <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"/> Other _____ (Please Specify)				
<b>Gross Annual Income Details (Please ✓)</b> <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"/> >25-1 Crore <input type="checkbox"/> >1 Crore				
<b>Politically Exposed Person (PEP) Status</b> <input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable				

<b>Acknowledgement slip</b>	Scheme Name : _____ Option: _____ Sub Option: _____	Stamp, Signature & Date
	Received from Mr. / Ms. /M/s. _____	
	Cheque / DD No. : _____ Date : _____ Amount Rs.: _____	

