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| Email ID & I<br>** Please mention F<br>3 KYC Details<br>Status Partne<br>Artifici<br>Body<br>Occupation Pvt.<br>Gross Annual<br>Income OR<br>Net-worth*<br>in ₹<br>*Not older<br>than one year<br>Politically Exposed<br>Legal Entity Identifi<br>*With reference to t<br>January 2021 it is j<br>and above undertak  | AN/PEKRN<br>(Mandatory)<br>rship Firm<br>al Juridical<br>Corporate<br>Sector Ser<br><pre> </pre> </td <td>(PAN Exe<br/>Person<br/>intervice   F<br/>ist   5-11<br/>networth<br/>PEP) Stat<br/>nber  <br/>Jar "Intro<br/>to provide<br/>es (non-in</td> <td>mpted UF [ UF [ Dublic: UB UB</td> <td>KYC F Pr<br/>Pr Re<br/>Sector<br/>0-25L<br/>er info</td> <td>Refer</td> <td>ence Ni<br/>Limite<br/>Indivi<br/>FI<br/>Gov. Se<br/>5L-1CR<br/>D<br/>C<br/>on<br/>or author<br/>Entity Id<br/>for all p</td> <td>um<br/>d C<br/>idua<br/>rvic</td> <td>ber) a comparative comparative</td> <td>any<br/>Gov<br/>Hou<br/>torie</td> <td>is man</td> <td>Publid<br/>prietor<br/>(N<br/>(N<br/>(N<br/>(N<br/>(N))<br/>(N))<br/>(N))<br/>(N))<br/>(N))<br/>(</td> <td>y<br/>ic Li<br/>r<br/>)efei<br/> &lt;1L<br/>letw</td> <td>imite imite imite</td> <td>d Coo<br/>Bank<br/>Pr<br/>1-5L<br/>net<br/>is m<br/>ee/Wh</td> <td>mp<br/>Min<br/>rofe</td> <td>Market State State</td> <td>List</td> <td>FII/<br/>fence<br/>Retire<br/>0-25L<br/>a<br/>on-in<br/>inform</td> <td>FPI<br/>e Est<br/>ed<br/>2s<br/>on[<br/>divide<br/>mation<br/><br/>t Syst</td> <td>D Nablish<br/>Busir<br/>Busir<br/>Jals)<br/>I am<br/>ems"</td> <td>RI<br/>Imen<br/>Iess<br/>I I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I<br/>I</td> <td>ts<br/>Ag<br/>&gt;1CR<br/>M<br/>M<br/>LE<br/>RBI/2</td> <td>PI<br/>ricult<br/>Y</td> <td>0<br/>ure [<br/>1<br/>2<br/>3<br/>Relat<br/>iry Da<br/>21/8</td> <td>VPO<br/>Sthe<br/>Sthe<br/>Gam<br/>(casing<br/>B Mon<br/>ted to<br/>ate [<br/>2 DPS</td> <td>Lim<br/>udent<br/>entity<br/>ign Exc<br/>ing / G<br/>ss, betting<br/>ey Len<br/>PEP<br/>D<br/>SS.CO</td> <td>t F<br/>invol<br/>change<br/>amblin<br/>syndicate<br/>ding/ F<br/>No<br/>D</td> <td>Trust<br/>Liabili<br/>Othe<br/>Forex<br/>Ived in<br/>solution<br/>Pawnin<br/>Dot Appl</td> <td>ity Pa<br/>ers<br/>Deale<br/>n any<br/>ey Cha<br/>ttery<br/>g<br/>licable<br/>M Y<br/>1/06.:</td> <td>er<br/>of the<br/>anger<br/>24.00</td> <td>ship<br/>Spe<br/>Othe<br/>e follo</td> <td>cify<br/>rs<br/>owing<br/><br/><br/><br/><br/><br/><br/></td> <td>pecif<br/>es<br/>es<br/>es<br/>dated</td>  | (PAN Exe<br>Person<br>intervice   F<br>ist   5-11<br>networth<br>PEP) Stat<br>nber  <br>Jar "Intro<br>to provide<br>es (non-in   | mpted UF [ UF [ Dublic: UB  | KYC F Pr<br>Pr Re<br>Sector<br>0-25L<br>er info   | Refer   | ence Ni<br>Limite<br>Indivi<br>FI<br>Gov. Se<br>5L-1CR<br>D<br>C<br>on<br>or author<br>Entity Id<br>for all p  | um<br>d C<br>idua<br>rvic  | ber) a comparative | any<br>Gov<br>Hou<br>torie  | is man   | Publid<br>prietor<br>(N<br>(N<br>(N<br>(N<br>(N))<br>(N))<br>(N))<br>(N))<br>(N))<br>(   | y<br>ic Li<br>r<br>)efei<br> <1L<br>letw   | imite | d Coo<br>Bank<br>Pr<br>1-5L<br>net<br>is m<br>ee/Wh                                    | mp<br>Min<br>rofe                        | Market State  | List  | FII/<br>fence<br>Retire<br>0-25L<br>a<br>on-in<br>inform   | FPI<br>e Est<br>ed<br>2s<br>on[<br>divide<br>mation<br><br>t Syst  | D Nablish<br>Busir<br>Busir<br>Jals)<br>I am<br>ems"  | RI<br>Imen<br>Iess<br>I I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I | ts<br>Ag<br>>1CR<br>M<br>M<br>LE<br>RBI/2                   | PI<br>ricult<br>Y   | 0<br>ure [<br>1<br>2<br>3<br>Relat<br>iry Da<br>21/8   | VPO<br>Sthe<br>Sthe<br>Gam<br>(casing<br>B Mon<br>ted to<br>ate [<br>2 DPS   | Lim<br>udent<br>entity<br>ign Exc<br>ing / G<br>ss, betting<br>ey Len<br>PEP<br>D<br>SS.CO | t F<br>invol<br>change<br>amblin<br>syndicate<br>ding/ F<br>No<br>D | Trust<br>Liabili<br>Othe<br>Forex<br>Ived in<br>solution<br>Pawnin<br>Dot Appl                       | ity Pa<br>ers<br>Deale<br>n any<br>ey Cha<br>ttery<br>g<br>licable<br>M Y<br>1/06.:             | er<br>of the<br>anger<br>24.00 | ship<br>Spe<br>Othe<br>e follo   | cify<br>rs<br>owing<br><br><br><br><br><br><br>                                    | pecif<br>es<br>es<br>es<br>dated     |
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| Email ID & I<br>** Please mention F<br>3 KYC Details<br>Status Partne<br>Body<br>Occupation Pvt.<br>Gross Annual<br>Income OR<br>Net-worth*<br>in ₹<br>*Not older<br>than one year<br>Politically Exposed<br>Legal Entity Identifi<br>*With reference to t<br>January 2021 it is<br>and above undertal<br>4 JOINT APPI<br>SECOND AF<br>Mode of Holding<br>Name F I<br>Father's Name F<br>Email ID & Mobile No. ar<br>KIN (KYC identificati<br>Date of Birth D<br>Occupation Pvt.  | AN/PEKRN<br>(Mandatory)<br>rship Firm<br>al Juridical<br>Corporate<br>Sector Ser<br><pre> Sector Ser</pre> <pre> Sector Ser</pre> <pre> Corporate<br/>Sector Ser</pre> <pre> Sector Ser</pre> <pre> PLICANT Doint Corporate Sector Ser</pre> <pre> D M M Sector Ser</pre>  | (PAN Exe<br>Person<br>L 5-11<br>networth<br>PEP) Stat<br>nber<br>Jar "Intro<br>to provide<br>es (non-in<br>DETAILS<br>S DETA<br>S DETA<br>S DETA<br>S T<br>enable us t<br>)<br>( Y Y Y   | mpted UF [ ] NGC Public: 1 I I I I I I I I I I I I I I I I I I  | KYC F<br>Pr<br>Re<br>Sector<br>0-25L<br>0-25L<br>0-25L<br>0 applic<br>0 | Refer           rivate           essider           as or           ormati           cable f           egal E           ation 1           hroug           or (De           pr           e bette           Place           r           or   | ence N Limite Limite I Indivi FI Gov. 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| ** Please mention F     XYC Details     Status     Partne     Artifici     Body     Occupation     Pvt.     Gross Annual     Income OR     Net-worth*     in ₹     *Not older     than one year     Politically Exposed     Legal Entity Identifi     *Uith reference to t     January 2021 it is     and above undertak     JOINT APPI     SECOND AF Mode of Holding     Name     F     I     Father's Name     F     PAN /PEKRN**     Email ID & Mobile No. ar KIN (KYC identificati Date of Birth     Occupation     Pvt.     Gross Annual     Income OR     Net-     worth* in ₹     *Not older than  | AN/PEKRN<br>(Mandatory)<br>rship Firm<br>al Juridical<br>Corporate<br>Sector Ser<br><pre> Sector Ser</pre> <pre> Sector Ser</pre> <pre> Corporate<br/>Sector Ser</pre> <pre> Sector Ser</pre> <pre> PLICANT Doint Corporate Sector Ser</pre> <pre> D M M Sector Ser</pre>  | (PAN Exe<br>Person<br>L 5-11<br>networth<br>PEP) Stat<br>nber<br>Jar "Intro<br>to provide<br>es (non-in<br>DETAILS<br>S DETA<br>S DETA<br>S DETA<br>S T<br>enable us t<br>)<br>( Y Y Y   | mpted UF [ ] NGC Public: 1 I I I I I I I I I I I I I I I I I I  | KYC F<br>Pr<br>Re<br>Sector<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25  | Refer           rivate           esider           - | ence N  Limite th Indivi FI Gov. 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| Email ID & I<br>** Please mention F<br>3 KYC Details<br>Status Partne<br>Body<br>Occupation Pvt.<br>Gross Annual<br>Income OR<br>Net-worth*<br>in ₹<br>*Not older<br>than one year<br>Politically Exposed<br>Legal Entity Identifi<br>*With reference to t<br>January 2021 it is i<br>and above undertak<br>4 JOINT APPI<br>SECOND AF<br>Mode of Holding<br>Name F I<br>Father's Name F<br>PAN /PEKRN**<br>Email ID & Mobile No. ar<br>KIN (KYC identification<br>Date of Birth □<br>Occupation Pvt.<br>Gross Annual<br>Income OR Net-<br>worth* in ₹<br>*Not older than<br>one year  | AN/PEKRN<br>(Mandatory)<br>rship Firm<br>al Juridical<br>Corporate<br>Sector Ser<br><pre> Sector Ser</pre> <pre> Sector Ser</pre> <pre> Corporate<br/>Sector Ser</pre> <pre> Sector Ser</pre> <pre> PLICANT Doint Corporate Sector Ser</pre> <pre> D M M Sector Ser</pre>  | (PAN Exe<br>Person<br>il 05-11<br>networth<br>PEP) Stat<br>nber<br>ular "Intro<br>to provide<br>es (non-ii<br>DETAILS<br>'S DETA<br>Anyon<br>r<br>S T<br>enable us t<br>)<br>(Y Y<br>vice P<br>01-5L   | mpted UF [ ] NGC Public: 1 I I I I I I I I I I I I I I I I I I  | KYC F<br>Pr<br>Re<br>Sector<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25L<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25<br>0-25  | Refer           rivate           esider           - | ence N Limite t Indivi FI Gov. 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Are you a tax resident (i. If 'No' please proceed fo If 'YES', please fill for ALI	or the signat	ure of dec	laration			,			rnose			No 🗌	a Citiz	en / F	Resid	ent / G	reen	Caro	d Hol	der /	Tax	Resid	dent	in the	e res	spec	tive c	ountr	ies <sup>#</sup>	

	Country of Tax Residency	Tax Identification Number or Functional Equivalent	<b>Identification Type</b> (TIN or other, please specify)	If TIN is not available, please tick ( $\checkmark$ ) the reason A, B, & C (as defired below)
First Applicant				Reason A B C
Second Applicant				Reason A B C
Third Applicant				Reason A B C

Reason A: The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents. Reason B: No TIN required. (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected). Reason C: Others; please state the reason thereof.

### 11 DECLARATION/CONSENT AND SIGNATURE

Having read and understood the contents of the Scheme Information Document of the Scheme(s), I/We hereby apply for the units of the scheme(s) and agree to abide by the terms, conditions, rules and regulation governing the scheme(s). I/We hereby declare that the amount invested in the scheme(s) 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 (s) & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme (s), legally belong to me/us. In the event " Know Your Customer" process is not completed by me/us to the satisfaction of the Mutual Fund, I/we hereby authorize the Mutual Fund, to redeem the funds invested in the Scheme(s), in Favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such other action with such funds that may be required by the law.

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 Scheme of various Mutual Funds from amongst which the Scheme is being recommended to me/us. 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. I/We confirm that the details provided by me/us are true and correct. I declare that the information is to the best of my Knowledge, belief, accurate and complete. I agree to notify MOMF/AMC immediately in the event of information changes.

#### FATCA / CRS Certification:

Declaration for Individual: I hereby confirm that the information provided hereinabove is true, correct, and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required any intermediary or by domestic or overseas regulators/ tax authorities

Declaration for Non-Individual: I / We have understood the information requirements of this Form (read along with the 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.

First / Sole Applicant / Guardian/POA	Second Applicant	Third Applicant
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# Motilal Oswal Declaration Form For Opting Out of Nomination



DDMMYYYY

Folio Number / Application Number	
Sole / First Holder Name	
Second Holder Name	
Third Holder Name	

## **DECLARATION & SIGNATURE**

I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

NAME AND SIGNATURE OF UNITH	IOLDER(S)	
Unitholder (1) Signature	Unitholder (2) Signature	Unitholder (3) Signature

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

MOTILAL OSWAL OTM I	)ebit Ma	indate form NACH	/ ECS/ Di	rect De	bit/SIP F	Application No. Form -2	
Distributor ARN / RIA#		Distributor Name	Sub	Distributor	ARN	Internal Sub-Broker/ Employee Code	EUIN
ARN/RIA-			ARN-				
#By mentioning RIA code, I/We authorize you to share with the SEBI Regi Investors applying under Direct Plan must mention "D Upfront commission shall be paid directly by the invest I/We hereby confirm that the EUIN box has been intentionally left blank by me by the employee/relationship manager/sales person of the above distributor employee/relationship manager/sales person of the distributor and the distrib	lirect" in ARN tor to the AMF /us as this is an "ex r or notwithstanding	Column I registered distributor based or ecution-only" transaction without any interact the advice of in-appropriateness, if any, pro	on or advice		f various facto	rs including the service ren Second Holder	dered by the distributor. Third Holder
1 UNIT HOLDER INFORMATION						☐ Mr. ☐ Ms. ☐ M/s	
Existing Folio Number		Existing UMRN					
Name F I R S T		MI	D D L	E		L A S	Т
2 SYSTEMATIC INVESTMENT PLAN DETAILS	<b>;</b>						
Scheme name	Plan			Installment Amount	SIP Booster details		Booster SIP Maximum quency SIP limit amount
Motilal Oswal	. 🗌 Regular	<ul> <li>Growth</li> <li>Dividend Payout</li> <li>Dividend Reinvestment</li> </ul>	(₹)		☐ Yes ☐ No		luarterly  alf Yearly (₹) early
SIP Frequency and Date*           Fortnightly         1 <sup>st</sup> -14         *7 <sup>th</sup> -21 <sup>st</sup> 14 <sup>th</sup> -28           Annual SIP         D         M         M         Y         Y         Y	th		SI	P Period	Λ Υ Υ Υ	Y <b>To</b> M M Y Y	Y Y
Any Day/ Date SIP Weekly - Any Day of Transfer Monthly SIP- Any date of the mont Quarterly SIP- Any date of the mont July, October) D D except (29	ith for each qu			or I	Perpetual SIP		
*Incase if no date is selected, 7th would be the default		30					
SIP cheque No. SIP cheque	Date D D	M M Y Y Y Y					
3 DECLARATION AND SIGNATURE (To be signed This is to confirm that the declaration/instruction has been carefull entity or the bank where I have authorized the debit and express r (Debits)/Direct Debits /Standing Instructions. Authorization to Bank: Oswal Mutual Fund shall be made from my/our bank account with your First / Sole Applicant / Guardian / Authorised Sig	r read, understood ny willingness an This is to inform tl ur Bank. I/We autl	d. I/We have understood that I/we are au d authorize to make payments through nat I/We have registered for ECS / NACH	participation in NA Debit Clearing) / Di Mutual Fund carryir	CH/ECS/Direct Dect Dect Dect Dect Dect Dect Dect D	ebit/Standing Instr ing instructions fa	uctions. I/We hereby confirm adh cility and that my/our payment tow d and executed.	erence to the terms of NACH/ECS vards my/our investment in Motilal a cancelled cheque/cheque copy)
(To be signed by all holders if mode of operation of Bank Account is 'Joint')							
MOTILAL OSWAL OTM Debit Mandate	form NACH/		or Lumpsum Ad	ditional Purcha	ases as well as S	SIP Registrations]	
		P I G W Utility Code	N A C H		0 0 0 0		
Tick (✓)     Sponsor Bank Code     C     I     T       Create     ✓     I/We hereby authorize		A Mutual Fund	N A C H To Debit (to ti			0 0 2 2 8 0 6 C SB-NRE SB-NF	
Create     I/we nereby authorize       Modify     Bank a/c number							
Cancel X with Bank	Bank nam	e and branch	FSC			Or MICR	
an amount of Rupees						₹	
FREQUENCY Mthly Qtly	H.Yrly	Y <del>rly</del> 🖌 As & when presented		DEBIT TYP	E Fixed A	Amount 🖌 Maximu	im Amount
Reference 1 Folio No.				Mob. N	0.		
Reference 2 Application No.				Email I	D		
I agree for the debit of mandate processing charges by the bank whom I a	im authorizing to de	bit my account as per latest schedule of cha	rges of the bank.				
Period	firm that the decla e understood that I	record (mandatory) ration has been carefully read, understooc am authorized to cancel/ amend this man	Name as in	bank record (mai am authorizing th y communicating			nk record (mandatory) the instruction as agreed and signed (corporate or the bank where I have \$6
ACKNOWLEDGMENT SLIP (To be filled by the inv	estor) Investor Nam	e	pplication No.	r			
Scheme Name         D         D         M         Y         Y         To         D         D	M M Y	Plan     Y   Perpetual SI	2	Option			Stamp & Signature



### Systematic Transfer Plan / Dividend Transfer Plan / Nav Appreciation Facility / Systematic Withdrawal Plan

Application No. Version: 24.12.2019

Distributor         Distributor         Name         Sub-Distributor         Many Million Subject         EUN           ARX/R1A	Key Partner / Agent Information (Investors applying under Di	rect Plan must mention "Direct" in ARN No. column.)								
Answerding         Sector 2014         The sector 2014 on the sector 2014 particle instance of the sector 2014 particle of the se	Distributor ARN / RIA#	Distributor Name	Sub-Distrib	utor ARN				EUI	N	
<pre>Improvement of the Three Three</pre>	ARN/RIA-		ARN-							$\top$
PMM-PERM mandation	Investors applying under Direct Plan must mention Upfront commission shall be paid directly by the in "1/We hereby confirm that the EUIN box has been intentionally left bla without any interaction or advice by the employee/relationship manage broker or notwithstanding the advice of in appropriateness, if any,	"Direct" in ARN Column vestor to the AMFI registered distributor based nk by me/us as this transaction is executed risales person of the above distributor/sub	on the investor's assessm	nent of various fa		0		er of A	ttorne	
SYSTEMIC TRANSFER FLAN (STP.DTP AND NAV APPRECIATIONS)         Plasse strange for STP with the following options         From Scheme       Plan         Option       Growth /         Dividend - Payout /       Dividend - Payout /         Option       Growth //         STP Frequency:       Dividend - Painwait         STP Frequency:       Dividend - Painwait         STP Frequency:       Dividend Transfer Plan (Minimum 7 1000)         Dividend Transfer Plan (Minimum 7 1000)       Dividend Transfer Plan (Minimum 7 1000)         STP Frequency:       Dividend Transfer Plan (Minimum 7 1000)       Dividend Transfer Plan (Minimum 7 1000)         STP Transfer       Dividend Transfer Plan (Minimum 7 1000)       Dividend Transfer Plan (Minimum 7 1000)         STP Transfer       Dividend Transfer Plan (Minimum 7 1000)       Dividend Plan (Minimum 7 1000)         STP Transfer       Dividend Plan (Minimum 7 1000)       Dividend Plan (Minimum 7 1000)         STP Transfer       Dividend Plan (Minimum 7 1000)       Dividend Plan (M	Folio No	Name of Sole / First Holder				D D	MM	Y Y	Ý	Y
Please arrange for STP with the following options         From Scheme       Plan         Option       Growth /       Dividend-Payout /       Dividend - Relevest         To Scheme       Plan         Option       Growth /       Dividend - Relevest       Dividend Trequency (a case of Dividend of Requency (a case of Dividend of Requency (a case of Dividend Trequency (a c	PAN/PERN (mandatory)	Enclosed	PAN/PEKRN Proof	KYC Complica	ine					
Form Scheme       Plan         Option       Growth /         Dividend - Papout /         Dividend - Reinvest         To Scheme       Plan         Option       Growth /         Dividend - Papout /         Dividend - Reinvest         Plan       Plan         Plan       Plan         Plan       Dividend Fraguency (n case of Dividend Fraguency (n case of Dividend Fraguency (n case of Browth Option         STP Tradit       STP T	SYSTEMATIC TRANSFER PLAN (STP/	DTP AND NAV APPRECIATIONS)								
Option       Growth /       Dividend-Payout /       Dividend - Reinvest         To Scheme       Plan         Option       Growth /       Dividend-Payout /       Dividend - Reinvest         To Scheme       Plan         Option       Growth /       Dividend-Payout /       Dividend - Reinvest       Dividend Frequency (n case of Dividend option)         STP Frequency:       Daily       Weekly       Fortinghty       Dividend Transfer Plan (Minimum < 1000)	Please arrange for STP with the following	options								
To Scheme       Plan         Option       Growth /       Dividend Prequency in case of Dividend option         Flexal Annual (Manuant 1 200 - gairy Weekly, Encurity, Nontrag       Dividend Transfer Plan (Manuant 1 1000)         STP Frequency:       Dividend Transfer Plan (Manuant 1 1000)         STP Frequency:       Montray 1 21 21 21 28         Any Doy of STP Tander       Montray 1 21 21 21 28         STP Dates :       1 1 27 1 14* 21* 28*         STP Pariod:       Start:         Start (Start (Start))       Encort Interview (Start)         Start (Start)       Interview (Start)         Prom Start       Interview (Start)         Plan       Option       Growth         Dividend Transfer Plan (Manuant Start)       Dividend Plan (Start)         Plan       Option       Growth       Interview (Start)         Plan       Option       Growth       Interview (Start)       Interview (Start)         Plan       Option <td< td=""><td>From Scheme</td><td></td><td></td><td></td><td>Plan</td><td></td><td></td><td></td><td></td><td></td></td<>	From Scheme				Plan					
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Proced Amount, Minimum et 2000;       MAV Appreciation (Minimum et 1000)         STP Frequency:       Monthly       Quarterity         STP Frequency:       Monthly       Quarterity         STP Dates ::       1*       ?*       14*       21*       28*         STP Protoct:       Start:       0       Montry to Frequency:       End:       0 <td>To Scheme</td> <td></td> <td></td> <td></td> <td>Plan</td> <td></td> <td></td> <td></td> <td></td> <td></td>	To Scheme				Plan					
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STP Frequency:       Weekly       Fornighty         STP Dates:       1**       7*       14*       21*       28*         Any Date STP Transfer       Mondary Bridden       StP Dates:       1**       7*       14*       21*       28*         STP Dates:       1**       7*       14*       21*       28*       STP Priod:       Start:       Dim M <y< td="">       StP       Start:       Dim M<y< td="">       Start:       Dim M<y< td="">       Start:       Dim M<y< td="">       Start:       Start:       Dim M<y< td="">       Start:       Start:       Dim M<y< td="">       Start:       Start:       Start:       Dim M<y< td="">       Start:       Start:<td>Fixed Amount (Min amount ₹ 500 - (Daily, Wee</td><td>kly, Fortnightly, Monthly) Dividend Transf</td><td>er Plan (Minimum ₹ 1000</td><td>))</td><td></td><td>NAV Appreciatior</td><td>(Minimu</td><td>.m ₹ 1(</td><td>)00)</td><td></td></y<></y<></y<></y<></y<></y<></y<></y<></y<></y<></y<></y<></y<></y<></y<>	Fixed Amount (Min amount ₹ 500 - (Daily, Wee	kly, Fortnightly, Monthly) Dividend Transf	er Plan (Minimum ₹ 1000	))		NAV Appreciatior	(Minimu	.m ₹ 1(	)00)	
STP Amount :       1*	STP Frequency: Daily Week	ly 🗌 Fortnightly	t Daily Dividend			Only in case of	Growth C	)ption		
SIP Period:       Start:       D       M       Y         End:       D       M       Y       End:       D       M       Y         SYSTEMATIC       WITHORNWAL       PLAN (SWP)       Please arrange for SWP without without which, this application form will be considered incomplete and is liable to be rejected.)         Please arrange for SWP with the following options - Fixed Amount       Bs. (in groups)       SWP Frequency:       (Please the particle option)       Rs. (in groups)         SWP Period:       Start:       M       Y       End:       D       M       Y         Please arrange for SWP with the following options - Fixed Amount       Bs. (in words)       SWP Frequency:       Weekly       Fortnightly       Monthly       Quarterly       Annualy       SWP Date:       1 <sup>d</sup> 7 <sup>d</sup> 14 <sup>d</sup> 21 <sup>d</sup> 28 <sup>d</sup> SWP Period:       Start:       M       V       End:       M       V       Y       Plan       Dividend - Reinvest       "Minimum No. of SWP Installments 12. (monthly/weekly/fortnightly)       Minimum No. of SWP Installments 12. (monthly/weekly/fortnightly)	STP Amount :         STP Dates : $1^{st}$ $7^{th}$ $14^{th}$	21 <sup>st</sup> 28 <sup>th</sup> STP Dates : 1 <sup>st</sup> [	7 <sup>th</sup> 14 <sup>th</sup> 21 <sup>st</sup>	28 <sup>th</sup>			14 <sup>th</sup>	2	1 <sup>st</sup>	28**
SYSTEMATIC WITHDRAWAL PLAN (SWP)       (Please mention the PAI/PERN without which, this application form will be considered incomplete and is liable to be rejected.)         Please arrange for SWP with the following options - Fixed Amount       Bs. (in words)         SWP Frequency:       Weekly       Fortnightly         Monthly       Quarterly       Annualy       SWP Date:       1"       7"       14"       21"       28"         SWP Frequency:       Weekly       Fortnightly       Monthly       Quarterly       Annualy       SWP Date:       1"       7"       14"       21"       28"         SWP Frequency:       Weekly       Fortnightly       Monthly       Quarterly       Annualy       SWP Date:       1"       7"       14"       21"       28"         SWP Frequency:       Weekly       Fortnightly       Monthly       Quarterly       Annualy       SWP Date:       1"       7"       14"       21"       28"         SWP frequency:       In additional second seco	(in case of weekly frequency) STP Period: Start: DDD			Y Y	STP Period		) D I ) D I	M N	Y   Y	Y
Please arrange for SWP with the following options - Fixed Amount         Rs. (in figures)       Rs. (in words)         SWP Frequency:       Weekly         Period:       Start:         M       Y         From Scheme	For Other Frequency Minimum	MMYY								
Bs. (in figures)       Bs. (in words)         SWP Frequency:       Weekly       Fornightly       Monthly       Quarterly       Annualy       SWP Date:       1"       7"       14"       21"       28"         SWP Period:       Start:       M       V       Y       End:       M       V       Y         From Scheme	SYSTEMATIC WITHDRAWAL PLAN (SW	(Please mention the PAN/PERN w	ithout which, this application	on form will be c	onsidered in	complete and is l	able to be	e reject	ed.)	
SWP Frequency:       Weekly       Fortnightly       Monthly       Quarterly       Annualy       SWP Date:       1"       7"       14"       21"       28"         SWP Period:       Start:       M       Y       End:       Y       Form Scheme         Plan       Option       Growth       Dividend-Payout       Dividend - Reinvest         "Minimum No. of SWP Installments 12 - (monthly/weekly/fortnightly)       *Minimum No. of SWP Installments 4 - instalments (quarterly)         *Minimum No. of SWP Installments 1 - (annual)       *Minimum No. of SWP Installments 1 - (annual)         Having read and understood the contents of the Scheme Information Document of the Scheme(s), 1 / We hereby apply for units of the Scheme(s) and agree to abide by the sequence of any other applicable laws enacted by the Government of India from the totine 1. We have understood the details of the Scheme(s), indivections of the scheme(s), indivections of the scheme(s), indivections of the scheme(s), indivection of any Act, Rules, Regulations, Notifications or Directories for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directories for the scheme(s), indivection of the scheme of trains true time to the indivection of the scheme set in the Scheme(s), indivection of any Other applicable laws enacted by the Government of India from the totic true of the scheme set in										
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Plan       Option       Growth       Dividend -Payout       Dividend - Reinvest         Minimum No. of SWP Installments 12 - (monthly/weekly/fortnightly)       *Minimum No. of SWP Installments 12 - (monthly/weekly/fortnightly)         *Minimum No. of SWP Installments 1 - (annual)       *Minimum No. of SWP Installments 1 - (annual)		Y End: M M Y Y								
Dividend Frequency (In case of Dividend option)       *Minimum No. of SWP Installments 12 - (monthly/weekly/fortnightly)         *Minimum No. of SWP Installments 4 - instalments (quarterly)       *Minimum No. of SWP Installments 4 - instalments (quarterly)         *Minimum No. of SWP Installments 1 - (annual)       *Minimum No. of SWP Installments 1 - (annual)         Having read and understood the contents of the Scheme Information Document of the Scheme(s), 1 / We hereby apply for units of the Scheme(s) and agree to abide by 1         terms, conditions, rules and regulation governing the Scheme(s). I / We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and to designed for the purpose of the contravention of any Act, Rules, Regulations, Nutifications or Directions to the provisions of the Income Tax Act, Anti Money Lauwering Laws, Anti Corrupt Laws or any other applicable laws enacted by the Government of India from time to time. 1 / We have understood the details of the Scheme(s), in favour of the applicant, at the applicant purpose of the contravention of any Act, Rules, Regulations, Nutifications or any other mode), payable to him for the different competing Schemes of various Mutual Fund, to redeem the funds invested in the Scheme(s), in favour of the applicant, at the applicant for any or any other mode), payable to him for the different competing Schemes of various Mutual Fund, toright and year Rom Resident Soft and many be required by the Law.         For Nfls Sonly: 1 / We confirm that I and / we are Non Resident Soft Indian nationality / origin and that 1 / We have remitted funds from abroad through approved banking channels or from funds in a // our Non-Resident Soft and correct.         I/We confirm that I and / we are Non Re	From Scheme									
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terms, conditions, rules and regulation governing the Scheme(s). I / We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions fo the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corrupt 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(s), legally belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the astisfaction of the Mutual Fund, I / We hereby authorize the Mutual Fund, to redeem the funds invested in the Scheme(s), in favour of the applicant, at the applicant NAV prevailing on the date of such ordengtion and undertake such other action with such funds that may be required by the Law. 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 Fund, 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 a / our Non-Resident Crdimary / FCNR account. I/We confirm that details provide by me / us are true and correct.  First / Sole Applicant / Guardian Second Applicant Third Applicant POA Holder AcKNOWLEDGMENT SLIP AcKNOWLEDGMENT SLIP	Dividend Frequency (In case of Dividend optic	on)	*Minimum No.	of SWP Installm	nents 4 - in	stalments (quart	0	y)		
ACKNOWLEDGMENT SLIP	terms, conditions, rules and regulation gover not designed for the purpose of the contraw Laws or any other applicable laws enacted b by any rebate or gifts, directly or indirectly in is not completed by me / us to the satisfactio NAV prevailing on the date of such redemption an The ARN holder has disclosed to me/us all th amongst which the Scheme is being recommend For NRIs only: I / We confirm that I am / we / our Non-Resident External / Non-Resident Ordin	ning the Scheme(s). I / We hereby declare that ention of any Act, Rules, Regulations, Notificatio y the Government of India from time to time. I / making this investment. I / We confirm that the n of the Mutual Fund, I / We hereby authorize the d undertake such other action with such funds that m re commissions (in the form of trail commission edto me / us. are Non Residents of Indian nationality / origin a lary / FCNR account.	the amount invested in the ns or Directions fo the pro- We have understood the of funds invested in the Sche- Mutual Fund, to redeem the ay be required by the Law. or any other mode), payab	e Scheme(s) is ti visions of the Ind letails of the Schu eme(s), legally bel le funds invested ale to him for the	hrough legiti come Tax Ac eme(s) and l long to me / in the Scher	imate sources only ct, Anti Money Lau I / We have not re ' us. In the event ' ne(s), in favour of ompeting Schemes	y and doe undering L eceived no "Know You the applic of various	es not i Laws, A or have ur Custo ant, at s Mutua	nvolve nti Co been i omer" the ap al Fund	e and prruptic induce proces oplicab ds fro
	First / Sole Applicant / Guardian	Second Applicant	Third	Applicant		P	DA Holde	r		
	<									>
					Application	on No.				

🗌 Systematic Transfer Plan 🔄 Dividend Transfer Plan 🗌 Nav Appreciation Facility 🔲 Systematic Withdrawal Plan