CENTRAL KYC REGISTRY	' Know Your Custom	er (KYC) Application	n Form Individual			
 Important Instructions: A) Fields marked with '*' are mar B) Tick '√' wherever applicable. C) Please fill the form in English D) Please fill the date in DD-MM- E) For particular section update, section number and strike off to be updated. 	and in BLOCK letters. -YYYY format. please tick (✓) in the box	 G) List of State / U.T H) List of two charact I) KYC number of a J) The 'OTP based E 	Γ code as per Indian Moto cter ISO 3166 country co applicant is mandatory for	checked for accounts opened u	The Paper of P	Total lego belongs to Bank of Barrada and is used under license.
	Application Type*					
For office use only (To be filled by financial institution	Application Type* on) KYC Number Account Type*	New	Update Minor Aadhaa	(Mandatory for r OTP based E-KYC (in non-f	or KYC update request) face to face mode)	
1. PERSONAL DETAILS		,		Middle Name		t Nama
☐ Name* (Same as ID proof)	Prefix	First Name				st Name
Maiden Name						
Father / Spouse Name						
Mother Name						
Date of Birth*		(Y Y Y				
Gender*	M- Male	F- Female	T-Transger	lder		
PAN*			Form 60 furnished			
Marital Status*	Married	🗌 Un	married O	thers		
Citizenship*	In- Indian		ners (ISO 3166 Country	Code)		
Residential Status* Occupation Type *	Resident Individual	Non Resident Indian Private Sector	Foreign National Public Sector	Person of Indian Origin Government Sector		
	O-Others	Professional		Retired Housewife	Student	
	B-Business	X-Not Categorised				
2. PROOF OF IDENTITY A	ND ADDRESS* (Please r	efer instruction B at the	e end)			
I Certified copy of any one of the	e following OVDs needs t	o be submitted				
A- Passport Number						Прното*
B-Voter ID Card						
C-Driving Licence						
D-NREGA Job Card						
E-National Population R	Register Letter					
F-Proof of Possession of	of Aadhaar					
II E-KYC Authentication						
III Offline verification of Aa	dhaar					
Address						
Line 1*						
Line 2						
Line 3				City / Town	/ Village*	
District*		Pin/Post Code*		State/U.T Code*	ISO 3166 C	ountry Code*
3. CURRENT ADDRES	S DETAILS (Please r	efer instruction B at	the end)			
Same as above mentioned	•		•			
I Certified copy of any one of the	,		. ,			
A- Passport Number						
B-Voter ID Card						
_						
C- Driving Licence						
D-NREGA Job Card						
E- National Population F	Register Letter					
F - Proof of Possession	of Aadhaar					
II E-KYC Authentication						
III Offline verification of Aa	dhaar					
IV Deemed PoA						
Address						
Line 1*						
Line 2						
Line 3				City / Town	/ Village*	
District*		Pin / Post Code*		State/U.T Code*	ISO 3166 Co	ountry Code*

4. CONTACT DETAILS	(All communications will be	e sent on provided Mobile no. / I	Email-ID) (Please refer instruction	on C at the end)
Tel. (Off)		Tel. (Res)	Ma	obile
Email ID				
5. REMARKS (If any)				
6. APPLICANT DECL	ARATION			
therein, immediately. Incase and for it. I hereby consent to receiving in	ny of the above information is found	d to be false or untrue or misleading or r stry through SMS/Email on the above re	ellef and I undertake to inform you of any misrepresenting, I am aware that I may b gistered number/email address.	pe held liable [Signature / Thumb Impression]
Date : D D — M M	- Y Y Y Y	Place:		Signature / Thumb Impression of Applicant
7. ATTESTATION / FOR	R OFFICE USE ONLY			
Documents Received	Certified Copies	E-KYC data received from	UIDAI Data received fr	rom Offline verification
	Digital KYC Process	Equivalent e- document] Video Based KYC	
KYC V	ERIFICATION CARRIED C	OUT BY		INSTITUTION DETAILS
Date Emp. Name Emp. Code Emp. Designation			Name Code	
Emp. Branch				[Institution Stamp]

CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Individual KYC Application Form

A Clarification/ Guidelines on filling 'Personal Details' section

- 1 Name: The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
- 2 One the following is mandatory: Mother's name, Spouse's name, Father's name.

B Clarification/ Guidelines on filling 'Current Address details' section

- 1 In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR.
- 2 PoA to be submitted only if the submitted PoI does not have current address or address as per PoI is invalid or not in force.
- 3 State/U.T Code and Pin/Post Code will not be mandatory for Overseas addresses.
- 4 In Section 2, one of I, II, and III is to be selected. In case of online E-KYC authentication, II is to be selected.
- 5 In Section 3, one of I, 11, III and IV is to be selected. In case of online E-KYC authentication, II is to be selected.
- 6 List of documents for 'Deemed Proof of Address':

Document Code Description

- 01 Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill).
- 02 Property or Municipal tax receipt.
- 03 Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain the address.
- 04 Letter of allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and licence agreements with such employers allotting official accommodation.
- 7 Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar, while uploading on CKYCR.
- 8 "Equivalent e-document" means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermediaries Providing Digital Locker Facilities) Rules, 2016.
- 9 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.

C Clarification/ Guidelines on filling 'Contact details' section

- 1 Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-9999999999).
- 2 Do not add 'O' in the beginning of Mobile number.

D Clarification/ Guidelines on filling 'Related Person details' section

1 Provide KYC number of related person, if available.

E Clarification on Minor

- 1 Guardian details are optional for minors above 10 years of age for opening of bank account only.
- 2 However, in case guardian details are available for minor above 10 years of age, the same (or CKYCR number of guardian) is to be uploaded.

Applica	tion	Form (F	or li	ndivi	duals	5 Or	nly)		•	ÿ			nter		ce for diary			Арр	licati	on N	0.:						
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Father's/Sp	ouse Na	me																									
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2. Gender	🗌 Male	🗌 Female	B.	Marital	status	□ S	ingle	ΠМ	arried		C. Da	te of	Birth	l d	d	/ m	Lm	1/	vIv	/ I v	V		siz	•	otogra acros		n
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		(✔) □ Resi				on Res	ident		Foreigr	n Na	tional	(Passpo	ort Co	opy I	Mandat	tory fo	or NR	ls & F	oreign	Natior	nals)						
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City / Tow	n / Village															_	-			_	Pin C	lode				-	-
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INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

A. IMPORTANT POINTS:

- 1. Self attested copy of PAN card is mandatory for all clients.
- Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the below mentioned list.
- 3. If any proof of identity or address is in a foreign language, then translation into English is required.
- Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
- 5. If correspondence & permanent address are different, then proofs for both have to be submitted.
- 6. Sole proprietor must make the application in his individual name & capacity.
- For non-residents and foreign nationals, (allowed to trade subject to RBI and FEMA guidelines), copy of passport/PIOCard/OCICard and overseas address proof is mandatory.
- 8. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.
- 9. In case of Merchant Navy NRI's, Mariner's declaration or certified copy of CDC (Continuous Discharge Certificate) is to be submitted.
- 10. For opening an account with Depository participant or Mutual Fund, for a minor, photocopy of the School Leaving Certificate/Mark sheet issued by Higher Secondary Board/Passport of Minor/Birth Certificate must be provided.
- 11. Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

B. Proof of Identity(POI): List of documents admissible as Proof of Identity:

- PAN card with photograph. This is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).
- Unique Identification Number (UID) (Aadhaar) / Passport / Voter ID card / Driving license.
- 3. Identity card/ document with applicant's Photo, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities, Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members; and Credit cards/Debit cards issued by Banks.
- C. Proof of Address (POA): List of documents admissible as Proof of Address: (*Documents having an expiry date should be valid on the date of submission.)
 - 1. Passport/Voters Identity Card/Ration Card/Registered Lease or Sale

Agreement of Residence/Driving License/Flat Maintenance bill/Insurance Copy.

- 2. Utility bills like Telephone Bill (only land line), Electricity bill or Gas bill Not more than 3 months old.
- 3. Bank Account Statement/Passbook Not more than 3 months old.
- Self-declaration by High Court and Supreme Court judges, giving the new address in respect of their own accounts.
- 5. Proof of address issued by any of the following: Bank Managers of Scheduled Commercial Banks/Scheduled Co-Operative Bank/Multinationa Foreign Banks/Gazetted Officer/Notary public/Elected representatives Legislative to the Assembly/Parliament/Documents issued by any Govt. or Statutory Authority.
- Identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions, Colleges affiliated to Universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc., to their Members.
- For FII/sub account, Power of Attorney given by FII/sub-account to the Custodians (which are duly notarized and/or apostiled or consularised) that gives the registered address should be taken.
- 8. The proof of address in the name of the spouse may be accepted.

D. Exemptions/clarifications to PAN (*Sufficient documentary evidence in support of such claims to be collected.)

- In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
- 2. Investors residing in the state of Sikkim.
- UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
- 4. SIP of Mutual Funds upto Rs 50,000/- p.a.
- 5. In case of institutional clients, namely, FIIs, Mfs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

E. List of people authorized to attest the documents:

- Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/Co-operative Bank or Multinational Foreign Banks (Name, Designation & Seal should be affixed on the copy).
- In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

CENTRAL KYC REGIS	TRY Know Your Custom	er (KYC) Applica	tion Form Inc	dividual				
Important Instructions: A) Fields marked with '*' are m B) Please fill the form in Englis C) Please fill the date in DD-M D) Please read section wise de at the end.	h and in BLOCK letters. M-YYYY format.	 E) List of State / I F) List of two chai G) KYC number o H) For particular s section number 	racter ISO 3166 c f applicant is man	country codes is a datory for update ease tick (イ) in the	vailable at the en application. e box available be uired to be update	d. efore the ed.	Ba Ba	TOCA
For office use only (To be filled by financial ins	Application Type* titution) KYC Number Account Type*]Update]Simplified (fo		(Mandatory fo	-		-KYC
1. PERSONAL DET	AILS (Please refer instruction	A at the end)						
 Name* (Same as ID pro Maiden Name Father / Spouse Name Mother Name Date of Birth* Gender* Marital Status* Citizenship* 		□ Un □ Ot	Female married hers (ISO 316		Jender		Last Name	o
Residential Status* Occupation Type*	Resident Individual Foreign National S-Service (Privat O-Others (Profe B-Business X- Not Categorised	□ Pe ssional □ Se		Origin Governmer Retired	Housewife	Student)	Report of Reports	Trans.
ISO 3166 Country Code	REQUIRED* (Mandatory only of Jurisdiction of Residence r or equivalent (If issued by ju	e* urisdiction)*	3166 Country (Code of Birth*				
3. PROOF OF IDEN	TITY (Pol)* (Please refer ins	struction C at the end)					
(Certified copy of <u>any one</u> of A- Passport Number B- Voter ID Card C- PAN Card	the following Proof of Identity[F	Pol] needs to be subn		Passport Expi	iry Date		M — T V T	Ŧ
 D- Driving Licence E- UID (Aadhaar) F- NREGA Job Card 				Driving Licence			M-777	
	ent notified by the central gover es Account - Document Ty			1 1	cation Number			
_	RESS (PoA)* ANENT / OVERSEAS ADDRES the following Proof of Address			D at the end)				
Address Type*	Residential / Business Passport Voter Identity Card Simplified Measures Accou	Residential Driving Licer NREGA Job	nce	Business UID (Aadhaar) Others	-	tered Office	□ Uns	pecified
Line 1*	Pin /	Post Code*		C State / U.T (ity / Town / Vil Code*		Country Code*	

4.2 CORRESPONDENCE	E / LOCAL ADDRESS DETAILS * (Please see instr	uction E at the end)
Same as Current / Perma	nent / Overseas Address details (In case of multip	le correspondence / local addresses, please fill 'Annexure A1)
Line 1*	وقووها ومحمد وحدوم عروا	
Line 2		
Line 3		City / Town / Village*
District*	Pin / Post Code*	State / U.T Code* ISO 3166 Country Code*
4.3 ADDRESS IN THE JU	RISDICTION DETAILS WHERE APPLICANT IS R	ESIDENT OUTSIDE INDIA FOR TAX PURPOSES* (Applicable if section 2 is ticked)
	nent / Overseas Address details	Same as Correspondence / Local Address details
Line 1*		
Line 2	الأاصاص بي إليار ها بعالة إليار ها بعاري المراجع بعالية	
Line 3	ادر و و و و و و و و و و و و و و	City / Town / Village*
State*		ZIP / Post Code* ISO 3166 Country Code*
5. CONTACT DETAILS	(All communications will be sent on provided	
Tel. (Off)		
FAX	Email ID	
6. DETAILS OF RELAT	ED PERSON (In case of additional related persons,	ple ase fill 'Annexure B1') (please refer instruction ${f G}$ at the end)
Addition of Related Person		(YC Number of Related Person (if available*)
Related Person Type*	Guardian of Minor Assignee	
Name*	Prefix First Name	Middle Name Last Name
Numo	(If KYC number and name are provided, below details	s of section 6 are optional)
] OF RELATED PERSON* (Please see instruction (H) a	at the end)
A- Passport Number		Passport Expiry Date
B- Voter ID Card		
C- PAN Card		
D- Driving Licence		Driving Licence Expiry Date
E- UID (Aadhaar)		
F- NREGA Job Card		
Z- Others (any documen	t notified by the central government)	Identification Number
S- Simplified Measures	s Account - Document Type code	Identification Number
7. REMARKS (If any)	Mobile no. / F	Email-ID) (Please refer instruction F at the end)
	و و و و و و و و و و و و و و و و	
8. APPLICANT DECL		
	hished above are true and correct to the best of my knowledge and I the above information is found to be false or untrue or misleading or r	misrepresenting, I am aware that I may be held liable
 Lhereby concent to receiving inform 	nation from Central KYC Registry through SMS/Email on the above reg	ristand number/amail address
Date :	Place :	Signature / Thumb Impression of Applicant
Date .	Fidue .	
9. ATTESTATION / FC	DR OFFICE USE ONLY	
Documents Received	Certified Copies	
KYC VERI	FICATION CARRIED OUT BY	INSTITUTION DETAILS
Date		Name
Emp. Name		Code
Emp. Code		
Emp. Designation		
Emp. Branch		
·		[Inalliation @bartsp]
	(Employee Signature)	

(Please fill the form in English a Fields marked with * are manda	,	КҮС Туре:	Normal (F PAN Exe			ry))	<u> </u>	J	Л	иит	UAL	FU	ND
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1. Identity Details (Please r	efer instruction A at the end)															
PAN	Prefix First Name	se a duly attested c	opy of your			-						not Ni				
Name* (same as ID proof)	Preix First Name			Ivilda	e Name						La	ast Na			-	
· · · ·							++	$-\ $	_	-		+-	\vdash	+		+
Maiden Name (If any*)																_
Mother Name*																
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	B-Business	🗌 X-Not Ca	ategorised													
2. FATCA/CRS Information	(Tick if Applicable)	dence for Tax Pu	Irposes in	Jurisdic	tion(s)	Outsid	e Indi	a (Pl	ease	refer	instru	uction	B af	the e	end)	
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-	or equivalent (If issued by jurisdict											por 10				
Place / City o f Birth*		Country of Birth*				++			Coun	trv C	ode		7	per IS	SO 31	66
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Line 1*																
Line 2																
Line 3						City /	Tow	n / V	illag	ie*						
District*	Zip / Post C of	de*			State/l	JT C d	ode		a	is per	Indian	Motor	V ehi	cle Act	198	38
State/UT*		Country*							Cou	ntry (Code		as	s per I	SO 3	166
3. Details of Related Perso	n (Optional) (please refer instruction (G at the end) (in	case of add	itional r	elated p	ersons	, plea	se II '	A nne	exure	B1′)					
Related Person	Deletion of Related Person	KYC Number	of Related	Persor	n (if ava	ilable*)									7
Related Person Type*	Guardian of Minor	Assignee	[Auth	orized F	Repres	entati	ve								
••• •	Prefix First Name			Middle	Name			1 Г			Last	t Nam	e			٦
Name*	(If KYC number and name are provided, b	elow details of sec	tion 6 are or	tional)												_
Proof of Identity [Pol] of	Related Person* (Please see instruct			,												
(Certifi ed copy of <u>any one</u> of t	he following Proof of I dentity[Pol] needs	to be s ubmitted)														
A- Pass port Num ber				Pass	sport Ex	kpiry D	ate		D	D	- M	M -	Y	ΥY	Y	
B- Voter ID Card																
C- PAN Card																
D- Drivi ng Licence				Drivi	ng Lice	ence E	xpiry	Date	D	D	- M	M -	Y	ΥY	Y	
E- A adhaar Card																
F- NREGA Job Card																
Z- Others (any documer	nt notified by the central governme	nt)			Identi	ficati c	on Nu	mbe	r							
4. Remarks (If any)																
								1 1				_			_	
5. Applicant Declaration																
	nished above are true and correct to the best of my f the above information is fo und to be false or unt															
liable for it. I hereby declare that I	am not making this application for the purpose tions issued by any governmental or statutory auth	of c ontravention of	any Act, Rules							[Signa	ture / T	humb l	mpress	sion]		
	nation from Central KYC Registry through SMS/Err	-		/email add	Iress.											
Date: DD - MM -	Y Y Y Place :								Signa	ature /	Thumb	Impres	sion of	f Applio	ant	

Supplementary CKYC Form

(To be additionally filled by customers using old KYC form)

Know Your Client (KYC) Application Form For Individuals Only



FATCA & CRS Annexure for Individual Accounts

(Including Sole Proprietor) (Refer to instructions) ARN - 64917 EUIN - E434563 (Please consult your professional tax advisor for further guidance on your tax residency, if required)



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Name																																				
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FATCA & CRS TERMS & CONDITIONS

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian financial institutions such as Investment Entities to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with Baroda Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS INSTRUCTIONS

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.

^sIt 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.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (</th <th>DOCUMENTATION REQUIRED FOR CURE OF FATCA/ CRS INDICIA</th>	DOCUMENTATION REQUIRED FOR CURE OF FATCA/ CRS INDICIA
U.S. place of birth	 Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality". or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/mailing address in a country other than India	 Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below)
Telephone number in a country other than India	 If no Indian telephone number is provided Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR Documentary evidence (refer list below)
Telephone number in a country other than India	 Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes:

1. Certificate of residence issued by an authorized government body*

2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

* Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.

	AMC CONTACT ADDRESS	
Baroda Asset Management India Limited	Baroda Asset Management India Limited	Baroda Asset Management India Limited
CIN : U65991MH1992PLC069414	Flat No. 103 & 104, First Floor,	HP Complex, Flat No.12, 3rd Floor,
501, Titanium, 5th Floor,	Prakash Deep Building,	Door No. 124/1, 2 & 3 New No. 14,
Western Express Highway, Goregaon (E),	7 Tolstoy Marg, New Delhi - 110001.	G. N. Chetty Road,T. Nagar, Chennai - 600 017.
Mumbai - 400063. Tel. No.: 91 22 3074 1000	Phone: 011-43514662	Phone: 044 - 2834 3530, Fax: 044 - 2834 3539

Visit us at : www.barodamf.com • Email:info@barodamf.com

CALL CENTER DETA	ILS & TOLL FREE NO. :
Toll Free Number No. : 1800 2670 189	Monday to Saturday between 9.00 a.m. to 6.00 p.m.

Information to Investor & Consent



ARN - 64917 EUIN - E434563

INFORMATION

The purpose of collection/usage of Aadhaar number including demographic information is to comply with applicable laws/ rules/ regulations and provision of the said data is mandatory as per applicable laws/ rules/ regulations.

Post obtaining the Aadhaar number, we shall authenticate the same in accordance with the Aadhaar Act, 2016. We shall receive your demographic information which shall be used only to comply with applicable laws/rules/regulations.

CONSENT FORM

I/We hereby provide my/ our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/ authenticating and (ii) updating my/our Aadhaar Number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA.

I/We hereby provide my/ our consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/ our folios.

	First / Sole Holder	Joint Holder 1	Joint Holder 2
Signature			
Investor Name			
Aadhaar No			
PAN/PEKRN/CKIN (Manadatory)			





AADHAR CONSENT FORM

Folio Number
PAN
Aadhaar
Consent note The purpose of collection/usage of Aadhaar number including demographic information is to comply with applicable laws/rules/regulations. Post obtaining the Aadhaar number, we shall authenticate the same in accordance with the Aadhaar Act, 2016. We shall receive your demographic information which shall be used only to comply with applicable laws / rules / regulations.
Investor

First / Sole Holder	Joint Holder 1	Joint Holder 2