



## Know Your Client

### Application Form (For Individuals only)

(Please fill the form in English and in BLOCK Letters)  
Fields marked with \*\* are mandatory fields

Application  New

Type\*  Update KYC Number\*

KYC Type\*  Normal (PAN is mandatory)  PAN Exempt Investors (Refer instruction K)

### 1. Identity Details (Please refer instruction A at the end)

PAN  Please enclose a duly attested copy of your PAN Card

| Name* (same as ID proof) | Prefix               | First Name           | Middle Name          | Last Name            |
|--------------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Maiden Name (If any*)    |                      |                      |                      |                      |
| Father / Spouse Name*    |                      |                      |                      |                      |
| Mother Name*             |                      |                      |                      |                      |

Date of Birth\*  DD -  MM -  YY  YY

Gender\*  M- Male  F- Female  T-Transgender

Marital Status\*  Married  Unmarried  Others

Citizenship\*  IN- Indian  Others - Country  Country Code

Residential Status\*  Resident Individual  Non Resident Indian

Foreign National  Person of Indian Origin

Occupation Type\*  S-Service  Private Sector  Public Sector  Government Sector

O-Others  Professional  Self Employed  Retired  Housewife  Student

B-Business  X-Not Categorized

Photo



Signature/  
Thumb Impression

### 2. Proof of Identity (PoI)\* (for PAN exempt Investor or if PAN card copy not provided) (Please refer instruction C & K at the end)

(Certified copy of any one of the following Proof of Identity [PoI] needs to be submitted)

A- Passport Number  Passport Expiry Date  DD -  MM -  YY  YY

B- Voter ID Card

D- Driving Licence  Driving Licence Expiry Date  DD -  MM -  YY  YY

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government)  Identification Number

### 3. Proof of Address (PoA)\*

3.1 Current / Permanent / Overseas Address Details (Please see instruction D at the end)

#### Address

Line 1\*

Line 2

Line 3  City / Town / Village\*

District\*  Zip / Post Code\*  State/UT Code  as per Indian Motor Vehicle Act, 1988

State/UT\*  Country\*  Country Code  as per ISO 3166

Address Type\*  Residential / Business  Residential  Business  Registered Office  Unspecified

(Certified copy of any one of the following Proof of Address [PoA] needs to be submitted)

Proof of Address\*  Passport Number  Passport Expiry Date  DD -  MM -  YY  YY

Voter ID Card

Driving Licence  Driving Licence Expiry Date  DD -  MM -  YY  YY

Aadhaar Card

NREGA Job Card

Others (any document notified by the central government)  Identification Number

3.2 Correspondence / Local Address Details\* (Please see instruction E at the end)

Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1', Submit relevant documentary proof)

Line 1\*

Line 2

Line 3  City / Town / Village\*

District\*  Zip / Post Code\*  State/UT Code  as per Indian Motor Vehicle Act, 1988

State/UT\*  Country\*  Country Code  as per ISO 3166

**4. Contact Details** (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction **F** at the end)

Email ID   
Mobile - Tel. (Off) - Tel. (Res) -

**5. FATCA/CRS Information** (Tick if Applicable)  Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction **B** at the end)

Additional Details Required\* (Mandatory only if above option (5) is ticked)  
Country of Jurisdiction of Residence\*  Country Code of Jurisdiction of Residence  as per ISO 3166  
Tax Identification Number or equivalent (If issued by jurisdiction)\*   
Place / City of Birth\*  Country of Birth\*  Country Code  as per ISO 3166  
Address  
Line 1\*   
Line 2   
Line 3  City / Town / Village\*   
District\*  Zip / Post Code\*  State/UT Code  as per Indian Motor Vehicle Act, 1988  
State/UT\*  Country\*  Country Code  as per ISO 3166

**6. Details of Related Person** (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

Related Person  Deletion of Related Person KYC Number of Related Person (if available\*)   
Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative  
Name\* Prefix  First Name  Middle Name  Last Name   
(If KYC number and name are provided, below details of section 6 are optional)

Proof of Identity [PoI] of Related Person\* (Please see instruction **(H)** at the end)

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

A- Passport Number  Passport Expiry Date   
 B- Voter ID Card   
 C- PAN Card   
 D- Driving Licence  Driving Licence Expiry Date   
 E- Aadhaar Card   
 F- NREGA Job Card   
 Z- Others (any document notified by the central government)  Identification Number

**7. Remarks (If any)**

**8. Applicant Declaration**

• I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time.  
• I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

[Signature / Thumb Impression]  
Signature / Thumb Impression of Applicant

Date:  Place:

**9. Attestation / For Office Use Only**

**Documents Received**  Certified Copies

**KYC Verification Carried Out by** (Refer Instruction I)

Date   
Emp. Name   
Emp. Code   
Emp. Designation   
[Employee Signature]

**Institution Details**

Name   
Code   
Emp. Branch   
[Institution Stamp]

**In-Person Verification (IPV) Carried Out by** (Refer Instruction J)

Date   
Emp. Name   
Emp. Code   
Emp. Designation   
[Employee Signature]

**Institution Details**

Name   
Code   
Emp. Branch   
[Institution Stamp]

# Supplementary CKYC Form

## Know Your Client (KYC) Application Form

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



**BNP PARIBAS**  
MUTUAL FUND

### For Individuals Only

(Please fill the form in English and in BLOCK Letters)

Fields marked with \* are mandatory fields

KYC Type:  Normal (PAN is mandatory)

PAN Exempt Investors

#### 1. Identity Details (Please refer instruction A at the end)

PAN  Please enclose a duly attested copy of your PAN Card

| Name* (same as ID proof) | Prefix               | First Name           | Middle Name          | Last Name            |
|--------------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Maiden Name (If any*)    | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Mother Name*             | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Residential Status\*  Resident Individual  Non Resident Indian  
 Foreign National  Person of Indian Origin

Occupation Type\*  S-Service  Private Sector  Public Sector  Government Sector  
 O-Others  Professional  Self Employed  Retired  Housewife  Student  
 B-Business  X-Not Categorised

#### 2. FATCA/CRS Information (Tick if Applicable) Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)

Additional Details Required\* (Mandatory only if above option is ticked)

Country of Jurisdiction of Residence\*  Country Code of Jurisdiction of Residence  as per ISO 3166

Tax Identification Number or equivalent (If issued by jurisdiction)\*

Place / City of Birth\*  Country of Birth\*  Country Code  as per ISO 3166

Address Line 1\*   
 Line 2   
 Line 3  City / Town / Village\*

District\*  Zip / Post Code\*  State/UT Code  as per Indian Motor Vehicle Act, 1988

State/UT\*  Country\*  Country Code  as per ISO 3166

#### 3. Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

Related Person  Deletion of Related Person KYC Number of Related Person (if available\*)

Related Person Type\*  Guardian of Minor  Assignee  Authorized Representative

Name\*

(If KYC number and name are provided, below details of section 6 are optional)

#### Proof of Identity [PoI] of Related Person\* (Please see instruction (H) at the end)

(Certified copy of any one of the following Proof of Identity[PoI] needs to be submitted)

A- Passport Number  Passport Expiry Date

B- Voter ID Card

C- PAN Card

D- Driving Licence  Driving Licence Expiry Date

E- Aadhaar Card

F- NREGA Job Card

Z- Others (any document notified by the central government)  Identification Number

#### 4. Remarks (If any)

#### 5. Applicant Declaration

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time.

I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Signature / Thumb Impression of Applicant

Date:  Place:



DATE : / /

**1. UNIT HOLDER INFORMATION**

**a. EXISTING UNIT HOLDER INFORMATION**

PAN

Any information provided at PAN level, will be updated in all the Folios where the PAN is Registered.

**b. NAME OF FIRST / SOLE APPLICANT**

Mr. Ms. M/s.

Application Form No.

**2. FIRST/ SOLE APPLICANT OTHER DETAILS (Mandatory)**

**a. Status of First/ Sole Applicant [Please tick (✓)]**  Individual  Non - Individual

Resident Individual  NRI-Repatriation  NRI-Non Repatriation  Partnership  Trust  HUF  AOP  PIO  Company  FIs  Minor through guardian  BOI  OCI  
 Body Corporate  LLP  Society / Club  FPI  Sole Proprietorship  Non Profit Organisation  Others \_\_\_\_\_ (please specify)

**b. Occupation Details [Please tick (✓)]**  Service  Private Sector  Public Sector  Government Service  Student  Professional  Housewife  Business  
 Retired  Agriculture  Proprietorship  Others \_\_\_\_\_ (please specify)

**c. Gross Annual Income (Rs.) [Please tick (✓)]**  Below 1 Lakh  1 - 5 Lakhs  5 - 10 Lakhs  10 - 25 Lakhs  >25 Lakhs - 1 Crore  >1 Crore  
OR

**c. Net-worth (Mandatory for Non-Individuals) Rs.** \_\_\_\_\_ **as on**  DD  MM  YYYY (Not older than 1 year)

**d. Politically Exposed Person (PEP) Status** (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)  I am PEP  I am Related to PEP  Not Applicable

**e. Investors involved/ providing any of the mentioned services**

Wholesalers OR  Retailers in Precious metals (in particular buying-selling gold) and gems  Wholesalers OR  Retailers in Luxury cars  
 Wholesalers OR  Retailers in Boats  Wholesalers OR  Retailers in Race-horses  Wholesalers OR  Retailers in Jewellery

Money Service Businesses (MSB) & their agents (excluding Banks)  Currency dealers or exchanges  Sellers or redeemers of traveler's cheques  
 Money orders / remittance services

Pawn shops  Street market stall  Hotels  Restaurants  Internet cafés  Door-to-door sales companies  Taxi  Bars  Night-clubs  
 Second-hand goods sales  Second-hand vehicle dealers (excluding automobile franchise)

Casinos  Lotteries  Gaming clubs  Slot machines  Antiques  Art galleries  Art dealers  Auctioneer  Art expert

**3. DETAILS OF SECOND APPLICANT, If any**

**a. Occupation Details [Please tick (✓)]**  Service  Private Sector  Public Sector  Government Service  Student  Professional  Housewife  Business  
 Retired  Agriculture  Proprietorship  Others \_\_\_\_\_ (please specify)

**b. Gross Annual Income (Rs.)**  Below 1 Lakh  1 - 5 Lakhs  5 - 10 Lakhs  10 - 25 Lakhs  >25 Lakhs - 1 Crore  >1 Crore OR Net worth Rs. \_\_\_\_\_

**c. Politically Exposed Person (PEP) Status** (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)  I am PEP  I am Related to PEP  Not Applicable

**d. Investors involved/ providing any of the mentioned services**

Wholesalers OR  Retailers in Precious metals (in particular buying-selling gold) and gems  Wholesalers OR  Retailers in Luxury cars  
 Wholesalers OR  Retailers in Boats  Wholesalers OR  Retailers in Race-horses  Wholesalers OR  Retailers in Jewellery

Money Service Businesses (MSB) & their agents (excluding Banks)  Currency dealers or exchanges  Sellers or redeemers of traveler's cheques  
 Money orders / remittance services

Pawn shops  Street market stall  Hotels  Restaurants  Internet cafés  Door-to-door sales companies  Taxi  Bars  Night-clubs  
 Second-hand goods sales  Second-hand vehicle dealers (excluding automobile franchise)

Casinos  Lotteries  Gaming clubs  Slot machines  Antiques  Art galleries  Art dealers  Auctioneer  Art expert



**4. DETAILS OF THIRD APPLICANT, If any**

**a. Occupation Details [Please tick (✓)]**  Service  Private Sector  Public Sector  Government Service  Student  Professional  Housewife  Business  
 Retired  Agriculture  Proprietorship  Others \_\_\_\_\_ (please specify)

**b. Gross Annual Income (Rs.)**  Below 1 Lakh  1 - 5 Lakhs  5 - 10 Lakhs  10 - 25 Lakhs  >25 Lakhs - 1 Crore  >1 Crore **OR** Net worth Rs. \_\_\_\_\_

**c. Politically Exposed Person (PEP) Status** (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)  I am PEP  I am Related to PEP  Not Applicable

**d. Investors involved/ providing any of the mentioned services**

- Wholesalers **OR**  Retailers in Precious metals (in particular buying-selling gold) and gems  Wholesalers **OR**  Retailers in Luxury cars
- Wholesalers **OR**  Retailers in Boats  Wholesalers **OR**  Retailers in Race-horses  Wholesalers **OR**  Retailers in Jewellery
  
- Money Service Businesses (MSB) & their agents (excluding Banks)  Currency dealers or exchanges  Sellers or redeemers of traveler's cheques
- Money orders / remittance services
  
- Pawn shops  Street market stall  Hotels  Restaurants  Internet cafés  Door-to-door sales companies  Taxi  Bars  Night-clubs
- Second-hand goods sales  Second-hand vehicle dealers (excluding automobile franchise)
  
- Casinos  Lotteries  Gaming clubs  Slot machines  Antiques  Art galleries  Art dealers  Auctioneer  Art expert

**DECLARATION**

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

\_\_\_\_\_  
First / Sole Applicant / Guardian

\_\_\_\_\_  
Second Applicant

\_\_\_\_\_  
Third Applicant

**INSTRUCTIONS**

**In accordance with SEBI Circular No. CIR/MIRSD/13/2013 dated December 26, 2013, the additional details** viz. Occupation details, Gross Annual Income/networth and Politically Exposed Person (PEP)\* status mentioned under section 2 & 3 which was forming part of uniform KYC form will now be captured in the application form of the Fund. Also, the detail of nature of services viz. Foreign Exchange/Gaming/Money Lending, etc., (applicable for all applicants) is required to be provided as part of Client Due Diligence (CDD) Process of the Fund.

**The said details are mandatory for both Individual and Non Individual applicants.**

\*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.



**FIRST / SOLE APPLICANT / GUARDIAN**

Name  First Name  Middle Name  Last Name   
 Gender (Please ✓)  M  F  O PAN  Occupation Type  Service  Business  Others

Father's Name  First Name  Middle Name  Last Name

Cust. ID / Folio No.

Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes

Type of address given at KRA (Please ✓)  Residential or Business  Residential  Business  Registered Office

Permissible documents are  Passport  Election ID Card  PAN Card  Govt. ID Card  Driving License  UIDAI Card  NREGA Job Card  Others

Date of Birth  D D M M Y Y Y Y Y Y Place of Birth

Country of Birth  Nationality

Are you a tax resident of any country other than India? (Please ✓)  YES  NO

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:

| Country # | Tax Identification Number <sup>^</sup> | Identification Type (TIN or Other, please specify) |
|-----------|--|--|
|           |  |  |
|           |  |  |
|           |  |  |

# To also include USA, where the individual is a citizen / green card holder of The USA

<sup>^</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent \$

**SECOND APPLICANT**

Name  First Name  Middle Name  Last Name   
 Gender (Please ✓)  M  F  O PAN  Occupation Type  Service  Business  Others

Father's Name  First Name  Middle Name  Last Name

Cust. ID / Folio No.

Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes

Type of address given at KRA (Please ✓)  Residential or Business  Residential  Business  Registered Office

Permissible documents are  Passport  Election ID Card  PAN Card  Govt. ID Card  Driving License  UIDAI Card  NREGA Job Card  Others

Date of Birth  D D M M Y Y Y Y Y Y Place of Birth

Country of Birth  Nationality

Are you a tax resident of any country other than India? (Please ✓)  YES  NO

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:

| Country # | Tax Identification Number <sup>^</sup> | Identification Type (TIN or Other, please specify) |
|-----------|--|--|
|           |  |  |
|           |  |  |
|           |  |  |

# To also include USA, where the individual is a citizen / green card holder of The USA

<sup>^</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent \$

**THIRD APPLICANT**

Name  First Name  Middle Name  Last Name   
 Gender (Please ✓)  M  F  O PAN  Occupation Type  Service  Business  Others

Father's Name  First Name  Middle Name  Last Name

Cust. ID / Folio No.

Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes

Type of address given at KRA (Please ✓)  Residential or Business  Residential  Business  Registered Office

Permissible documents are  Passport  Election ID Card  PAN Card  Govt. ID Card  Driving License  UIDAI Card  NREGA Job Card  Others

Date of Birth  D D M M Y Y Y Y Y Y Place of Birth

Country of Birth  Nationality

Are you a tax resident of any country other than India? (Please ✓)  YES  NO

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below:

| Country # | Tax Identification Number <sup>^</sup> | Identification Type (TIN or Other, please specify) |
|-----------|--|--|
|           |  |  |
|           |  |  |
|           |  |  |

# To also include USA, where the individual is a citizen / green card holder of The USA

<sup>^</sup> In case Tax Identification Number is not available, kindly provide its functional equivalent \$

## CERTIFICATION

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 below and hereby accept the same.

### Signatures

|                                   |                  |                 |
|-----------------------------------|------------------|-----------------|
| First / Sole Applicant / Guardian | Second Applicant | Third Applicant |
|-----------------------------------|------------------|-----------------|

Date:

Place:

## 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 the Bank 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 (Insert FI's name) 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 green card holder, please include United States in the foreign country information field along with your US Tax Identification Number.

\$It 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 (ticked)                     | Documentation required for Cure of FATCA / CRS indicia   |
|---|--|
| U.S. place of birth                                       | <ol style="list-style-type: none"> <li>Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes;</li> <li>Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND</li> <li>Any one of the following documents:<br/>Certified Copy of *Certificate of Loss of Nationality<br/>or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship;<br/>or Reason the customer did not obtain U.S. citizenship at birth</li> </ol>   |
| Residence / mailing address in a country other than India | <ol style="list-style-type: none"> <li>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</li> <li>Documentary evidence (refer list below)</li> </ol>   |
| Telephone number in a country other than India            | <p><b>If no Indian telephone number is provided</b></p> <ol style="list-style-type: none"> <li>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</li> <li>Documentary evidence (refer list below)</li> </ol> <p><b>If Indian telephone number is provided along with a foreign country telephone number</b></p> <ol style="list-style-type: none"> <li>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</li> <li>Documentary evidence (refer list below)</li> </ol> |
| Telephone number in a country other than India            | <ol style="list-style-type: none"> <li>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</li> <li>Documentary evidence (refer list below)</li> </ol>   |

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

- Certificate of residence issued by an authorized government body\*
- 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 & call centre details. | Blank space for your branch or any other details. |
|--|---|



# REQUEST FOR SEEDING OF AADHAAR



Please submit this request for each PAN separately

PAN

Aadhaar Number

*\*Where Aadhaar Number not assigned, please submit proof of application for enrolment of Aadhaar*

Name \_\_\_\_\_ Gender (Please  Male  Female  Other

Date of Birth  /  /  Mobile Number  Pin code

Email \_\_\_\_\_

**Consent:** I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (iii) updating my Aadhaar number in accordance with the Aadhaar Act, 2016 (and regulations made there under) and PMLA. I hereby provide my consent for sharing / disclose of the 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 folio/s with my PAN.

Date  /  /  Place \_\_\_\_\_ Signature \_\_\_\_\_

**General Instructions:**

- a. This form should be submitted separately for each PAN.
- b. Seeding of Aadhaar is Not applicable for NRIs
- c. In case of Non-Individuals and HUFs, Kindly refer Non-Individual Forms.
- d. Submission of this form does not warranty linking of Aadhaar Number in your Folios. It is subject to authentication with UIDAI database & other required validations. Please ensure your mobile number is updated in your Aadhaar database.
- e. Please Submit duly filled and signed form to your nearest Sundaram BNP Paribas Fund Services Limited Customer Care Center / AMC branches.
- f. You can dispatch the filled and signed form(s) to the following address: Sundaram BNP Paribas Fund Services Limited (SBFS) No. 23, Cathedral Garden Road, Nungambakkam, Chennai – 600034.

**Acknowledgment (To be filled by Investor)**



PAN \_\_\_\_\_

Investor Name \_\_\_\_\_

Aadhaar linking request form received for the above referred PAN. Linking your Aadhaar in Folios will be subject to verification and authentication of your Aadhaar with concerned authorities

Official Service Centre / Point of Acceptance seal & sign