

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 Type* New Update KYC No.

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 F I R S T M I D D L E L A S T

Maiden Name (If any*) F I R S T M I D D L E L A S T

Father / Spouse Name* F I R S T M I D D L E L A S T

Mother Name* F I R S T M I D D L E L A S T

Date of Birth* Gender* Male Female Transgender Marital Status* Married Unmarried Others

Citizenship* Indian Others – Country Country Code

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

Occupation Type* Service Private Sector Public Sector Government Sector Professional Self Employed Retired Housewife Student Business Not Categorised Others

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)

Passport Number Passport Expiry Date

Voter ID Card Aadhaar Card

Driving Licence Driving Licence Expiry Date

NREGA Job Card

Others (any document notified by the central government) Identification No

3 Proof of Address (PoA)* **3.1 Current / Permanent / Overseas Address Details** (Please see instruction D at the end)

Address

City / Town / Village* District* Pin Code*

State/UT* State/UT Code Country* Country Code

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

Voter ID Card Aadhaar Card

Driving Licence Driving Licence Expiry Date

NREGA Job Card

Others (any document notified by the central government) Identification No

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)

Address

City / Town / Village* District* Pin Code*

State/UT* State/UT Code Country* Country Code

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. (Resi)

4 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.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
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Place _____

Date _____

5 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 Motilal Oswal 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.

6 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.

*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	1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND 3. 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	1. 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 2. Documentary evidence (refer list below)
Telephone number in a country other than India	If no Indian telephone number is provided 1. 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 2. Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number 1. 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 2. Documentary evidence (refer list below)
Telephone number in a country other than India	1. 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 2. 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.



Motilal Oswal Asset Management Company Limited
10th Floor, Motilal Oswal Tower, Rahimtullah Sayani Road,
Opposite Parel ST Depot, Prabhadevi, Mumbai - 400025
Email: mfservice@motilaloswal.com. Toll Free No.: 1800-200-6626
website: www.motilaloswalmf.com

Aadhaar linking form for Individual

Systematix ARN: 64917 EUIIN: E-029678

Please fill in your details below:
 Investors POA Guardian

First Holder Name
PAN/PEKRN/CKIN **Aadhaar No.**
Second Holder Name
PAN/PEKRN/CKIN **Aadhaar No.**
Third Holder Name
PAN/PEKRN/CKIN **Aadhaar No.**
POA Name
PAN/PEKRN/CKIN **Aadhaar No.**
Guardian Name
PAN/PEKRN/CKIN **Aadhaar No.**
Consent

I / We hereby provide my / our consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (ii) updating my/our Aadhaar number(s) in accordance with / our consent for sharing / disclose of the Aadhaar number(s) including demographic with the Aadhaar Act, 2016 (and regulations made there under) and PMLA. I / We hereby provide information to Motilal Oswal Asset Management Company Limited. and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my / our folios with my / our PAN.

Date
Place
Signature:

First Holder /POA/Gaurdian

Second Holder

Third Holder

Please submit the form duly filled, signed, for all the holders and submit at your nearest Karvy Computershare Pvt. Ltd. or at any of AMC branch

ACKNOWLEDGEMENT

PAN
Date
From Mr/Mrs/Ms:

Acknowledgment by Karvy Branch Official /
AMC Branch Official