Time Stamp:



Distributor Code ARN-	. 64917	Sub-Distributor Code	ARN-	Internal Code for Sub-broker/ Employee		EUIN E-029678
Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. Transaction charges if applicable shall be deducted.						
EUIN I/We he without notwith:	ereby confirm that the E any interaction or ac standing the advice of	dvice by the employee/rel in-appropriateness, if any, p	lationship manager/sales pers	is an "execution-only" transaction on of the above distributor or onship manager/sales person of	First Holder	Second Holder Third Holder
Mobile No. +91			E-mail ID			
	. PURCHASE I	PEOLIEST	E-IIIaii ID			
Scheme BNP Pari		KEQUEST	(Please mention sc	neme name)		Plan Regular Direct
Option Growth		avout Dividend				Quarterly/Half Yearly/Yearly)
l		he above mentioned		nt in Rs.		
Payment Options	Cheque/DD			Others		
Instrument No.	onoquorbe		& Branch Name	JUNO10		
SWITCH						
From Scheme BNP	Paribas		(Please mention	n scheme name)		Plan Regular Direct
Option Growth		avout Dividend-	Reinvestment Divide			Quarterly/Half Yearly/Yearly)
Amount in Rs.		figures)	OR Units	,		OR Entire Units
	Paribas					Plan Regular Direct
Option Growth	Dividend-P	ayout Dividend-	Reinvestment Divide	end Frequency		Quarterly/Half Yearly/Yearly)
REDEMPTIO	N .					
Scheme BNP Pari			(Please mention scl	neme name)		Plan Regular Direct
Option Growth Dividend-Payout Dividend-Reinvestment Dividend Frequency (Daily/Weekly/Monthly/Quarterly/Half Yearly/Yearly)						
		he above mentioned				
Amount in Rs.			OR Units			OR Entire Units
						ple banks are registered. Bank details
	e mentioned if the	proceeds are require		efault bank mandate registe	red in the folio).	
Bank Name			Account No.			
				HUF should Mandatorily fill		0 0
Place & Country of Birth	n iax Laws:	First / Sole Ap	plicant / Guardian	Second Applic	ant	○ Third Applicant ○ PoA
Nationality		○ Indian ○ US ○	Others (Please Specify)	○ Indian ○ US ○ Others	(Please Specify) O Inc	dian OUS Others (Please Specify)
Address Type			stered Office OBusiness	Residential Registered Of		sidential Registered Office Business
Country of Tax Residency	nt (i.e. are you ass	essed for Tax) in any	other country outside I	ndia? Yes No	(If Yes, please provide	information below)
Tax Identification Number of	r Functional Equivalent	i				
Identification Type (TIN or 0		- 0.0-0	(0)			
If TIN is not available, please Country of Tax Residency	se tick	Reason OA OB O	C (Please Specify)	Reason O A O B O C	(Please Specify) Reaso	n O A O B O C (Please Specify)
Tax Identification Number of	r Functional Equivalent	i				
Identification Type (TIN or 0	Other, please specify)					
If TIN is not available, pleas		Reason O A O B O				n O A O B O C (Please Specify)
do not require the TIN to b			ot issue TIN to its residents use specify the reason above	Neasun D. NO THIN REQUIRE	to (Select this only if the autho	prities of the respective country of tax residents
ADDITIONAL KY						
Particulars Occupation		ole Applicant / Guardia		Second Applicant Service O Pub. Sector Service O	Cov Sandoo Ond Sandor	Third Applicant Service ○ Pub. Sector Service ○ Gov. Service
Созаранол	Student Pro	fessional O Housewife ence O Agriculturist O	O Business O Student Proprietorship Retired	O Professional O Housewife (Business Student Proprietorship Retired	Professional Housewife Business Defence Agriculturist Proprietorship
Gross Annual Income / Net Worth (₹)		1-5 Lacs 5-10 Lacs 7		ac 1-5 Lacs 5-10 Lacs 1 Crore > 1 Crore OR Net worth		c
Politically Exposed Person (PEP) Status	○I am PEP ○I	am Related to PEP ON	ot Applicable I am PEP	O I am Related to PEP O No	t Applicable I am PEP	O I am Related to PEP O Not Applicable
X Sole / First / POA Holder / Guardian X Second Account Holder X Third Account Holder						
BNP PARIBAS N (To be filled in by			EDGMENT SLIP			BNP PARIBAS MUTUAL FUND
Received, subject to	•	,	s, an application for			
in folio no.						
Scheme Name	To Sche	eme (for switches)	Amount/ Units	Instrument no./ da	ted/ bank name	