COMMON APPLICATION FORM



PLEASE FILL ALL FIELDS WITH BLACK BALL POINT, IN BLOCK LETTERS AND ALL FIELDS ARE MANDATORY

Status of First Sole Applicant (Please tick (*)) Individual Non -	Investors must read the KIM, In DISTRIBUTOR INFORMATION	structions a	and Pro	duct La	abeling	on fr	ont p	age b	oefore	comp	leting t	this F	orm.						Ap	plicat			nstr	uctio	n No	o. 1)		F0	R OF	FICE	USE (ONLY	
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FATCA & CRS INFORMATION (for In	dividual incl	uding Sole P	roprietor)) (Self Cert	ificatio	on)											(Re	efer Ins	tructio	n No.	14)
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FOR MORE INFORMATION

BOI AXA Mutual Fund

Add: B/204, Tower 1, Peninsula Corporate Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai 400013

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National Securities Depository Limited (NSI	DL)	DP Name											
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NOMINATION DETAILS for Individuals [Min	or / HUF / POA Holder	/ Non Individuals	cannot	Nominat	te]							(Refer Instruction	
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hereby authorise BOI AXA Mutual Fund, its In investment to my bank(s)/BOI AXA Mutual F have neither received nor been induced by investment. I/We declare that the information stated.	nvestment Manager and Fund and /or Distributor , y any rebate or gifts, di	its agents to disclo /Broker / Investmen rectly or indirectly	se deta nt Adv , in ma	ails of my isor. I/We aking this			rst/ Sole App Guardian/ P uthorised Sig	PoA/					
I/We are aware that the information provided operation of my/our investment account. I/W with any third party as may be required by B me/us or for opening, continuing and operati	/e hereby give consent fo OI AXA Mutual Fund for t	or sharing my/our on the purpose of prov	data/inf	ormation									
I/ We confirm that the ARN holder has dis commission or any other mode), payable to Funds from amongst which the Scheme is be	him by the different con	npeting Schemes o					Second Appli	icant/					
I/we authorize BOI AXA Mutual Fund, BOI AX details to any of the appropriate authorities in Registration Agency/Authentication Agencie including UIDAI to share the data as per their	cluding Unique Identifica es etc. and also authorize	ation Authority of In e such agencies / s	dia (UII	OAI)/KYC		Ai	uthorised Sig						
I/WE HEREBY CONFIRM THAT I/WE HAVE PORTFOLIO AND/ OR ANY INDICATIVE YI INVESTMENT.						L							
Applicable to NRI only: I /We confirm that I that I/We have remitted funds from abroad th NRE/NRO/FCNR Account. I/We undertake th from funds received from abroad through NRE/NRO/FCNR Account.	nrough approved banking at all additional purchase	g channels or from es made under this	funds i Folio w	in my/our ill also be		Au	Third Applic uthorised Sig						
CERTIFICATION: I/ We have understood the FATCA & CRS Instructions) and hereby contrue, correct, and complete. I/ We also conf	firm that the information	provided by me/us	on thi	s Form is									