

Scheme /Plan/ Option:

Payment Details: Amount ₹_

(To be filled in CAPITAL letters)

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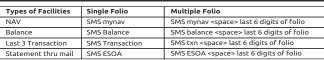
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13. POWER OF A	TODNEY (BO V) HO	I DED	DETAIL	S (Refer	Instructi	ion No I	I 1)								PAN						
		Ar./Ms./M		DETAIL			1011 110. 1	,								PAN						
First Applicant POA	Name	111./1415./141/	7 3										+	+	\sqsubseteq	\vdash	+	++	_			
Second Applicant P	OA Name N	лг./Ms./M	/s																			
Third Applicant PO	A Name	Лг./Ms./M	/s																			
14. DECLARATION	I AND SICN	ATURE																				
I/We would like to invest and subsequent amendr					_ subject to ter	ms of the	e Statem	ent of Additio	nal Infor	mation (SAI)	, Scheme Inl	ormal	tion Docum	nent (SID), Key	Informa	ation M	emorand	um (KIM)			
l limited to Nippon India A	inv Time Monev	Card. I/We h	nave not	received n	ior been induce	ed by anv	rebate o	r aifts. directl	≀or indire	ectlv. in maki	ina this inve	stmen	ıt. I / We de	clare tha	it the a	amount	investe	ed in the S	Scheme is			
through legitimate sourd India or any Statutory Au	tes only and is no thority. Taccept	ot designed f : and agree t	or the pour	ourpose of our and by the s	contravention of said Terms and	or evasio: Conditio:	n of any A	Act / Regulatio ling those excl	ns / Rule udina/lin	s / Notificati nitina the Re	ions / Direct eliance Nipp	ions or on Life	r any other e Asset Mar	Applicab nagemen	ole Lav it Limil	ws enact ited (RN)	ed by t AM) lial	:he Gover bilitv. I un	nment of derstand			
that the RNAM may, at it to time. The ARN holder the Scheme is being reco	s absolute discre has disclosed to r	tion, discon me/us all the	tinue an commis	y of the ser ssions (in th	vices complete ie form of trail (ely or part commissi	tially witl ion or any	hout any prior y other mode),	notice to payable t	me. I agree I to him for th	RNAM can d e different c	ebit fr ompe	om my folio ting Schem	o for the : ies of vari	service ious M	e charge 1utual F	es as ap unds fr	plicable f om amon	rom time gst which			
the Scheme is being reco (if applicable) shall be de	mmended to me ducted from the	/us. I hereby subscription	declare amoun	that the ab t and the sa	ove informatio iid charges shal	n is giver l be paid I	n by the u to the dis	ındersigned ar stributors.	nd particu	ılars given by	y me/us are o	orrect	t and comp	lete. Furt	:her, I a	agree th	at the I	ransactio	on charge			
☐ I confirm that I am re	sident of India. [s or from funds i	I/We conf	irm that on-Resid	t I am/We a lent Extern	re Non-Resider	nt of India	an Natio	nality/Origin a ount. I/We und	nd I/We l lertake tl	hereby confi hat all additi	irm that the ional purcha	funds ses m	for subscri ade under	ption hav	ve bee	en remit	ted fro	m abroad	I through ved from			
normal banking channel abroad through approve read with Rules 114F to 1	d banking chann 14H of the Incon	els or from f ne Tax Rules	unds in , 1962 ar	my/ our NR nd the infor	E/FCNR Accourmation provide	nt.∐ Í he ed by me	ereby de /us in the	clare that the Form, its supp	nformati	ion provided nnexures as	l in the Form well as in the	is in a	ccordance mentary ev	with sect	ion 28	35BA of ed by me	the Inc	ome Tax	Act, 1961 est of our			
knowledge and belief, tri	ue, correct and co	omplete.																				
++ I/We, have invested in investments under Direct Asset Management Ltd a	t Plan of all Sche	mes Manag	ed by yo	ou, to the al	bove mentione	d Mutual cation. Th	l Fund Di	stributor / SEE	I-Registe on DND	ered Investr	ment Advise he case may	r. I her be.	eby author	rize the r	eprese	entative	s of Re	liance Ni	opon Life			
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				Add	convenie	nce to	your l	ife with o	ur valu	ie added	service											
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9. FATCA and CRS DETAILS For Individuals (Mandatory) Non Individual Investors should mandatory fill separate FATCA/CRS details form

Please indicate all Countries in which you are a resident for tax purpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.





SMS

