DSP MUTUAL FUND

EXISTING INVESTORS TRANSACTION FORM

FINANCIAL TRANSACTIONS

Please fill only in the space provided. Any additional details/notings/instructions or those provided at a non designated area of the form may not be executed. Kindly strike off the unused Sections of the Form to avoid misuse. Please use separate Transaction Form for each Transaction and for each Scheme / Plan and Kindly refer Instructions overleaf.

Distributor / RIA / PMRN Name and ARN / Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
ARN-64917			E434563	

☐ I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

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.

Existing Folio Number	Name of Sole / First Unitholder	(Sole / First Applicant's Signature Mandatory)

ADDITIONAL PURCHASE (DEFAULT PLAN/OPTION WILL BE APPLIED INCASE OF NO INFORMATION, AMBIGUITY OR DISCREPANCY)

Cheque/DD should be in favour of: "DSP Mutual Fund" if single cheque with multiple schemes OR "Scheme Name", in case of single scheme / scheme wise cheques.

Full Scheme/Plan/Option/Sub Option				Amount (₹)
1. DSP -	Scheme	Plan	Option/Sub Option	
2. DSP -	Scheme	Plan	Option/Sub Option	
3. DSP -	Scheme	Plan	Option/Sub Option	
Total	Amount in words			Amount in Figures

Payment Mode:
- ☐ OTM Facility (One Time Mandate)
- ☐ Cheque ☐ DD ☐ RTGS
- ☐ NEFT ☐ Funds transfer ☐ CAMS OTM
- ☐ Cheque/DD/RTGS/NEFT Details:

Ref. No._____
Date ☐☐/☐☐/☐☐☐☐
DD charges, if any_____

Payment from Bank A/c No. _____ Pay In A/c No. _____

A/c. Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others_____

Bank Name & Branch _____

Documents Attached to avoid Third Party Payment Rejection, where applicable: ☐ Bank Certificate, for DD ☐ Third Party Declarations

REDEMPTION (Write Scheme Name, Plan / Option / Sub Option below)

Scheme Name/Plan/Option*/Sub Option* : DSP -

Amount in Figures : Rs.

Amount in Words

OR (Please note that the Redemption can be done either in Units or in Amount and not in both)

Units in Figures

Units in Words

Bank Account for This Redemption Proceeds (This should NOT be construed as "Change of Bank Mandate" request. Refer Instructions overleaf.)

I/We agree that the redemption proceeds should be sent entirely at our risk to the following bank account, if already registered with the fund or to the default bank account if no bank account is mentioned here.

Bank Name

Account No.

Important Note: Unregistered bank account will not be considered, even if mentioned here. To change bank account, investors should avail multiple bank account registration facility and use a specific designated form for this purpose. If unit holder(s) provide a new and unregistered bank mandate with the redemption request (with or without necessary supporting documents) such bank account will not be considered for payment of redemption proceeds and will not be registered.

* Default Option may be applied in case of no information, ambiguity or discrepancy.

SWITCH (Write switch-out Scheme Name, Plan / Option / Sub Option below)

Scheme Name/Plan/Option*/Sub Option* : DSP -

Amount in Figures : Rs.

Amount in Words

OR (Please note that the Switch can be done either in Units or in Amount and not in both)

Units in Figures

Units in Words

Switch-in To Scheme / Plan / Option* / Sub Option*

DSP

PAN AND KYC UPDATION

		KYC LETTER
Sole / First Applicant / Guardian		☐ Attached
Second Applicant / Guardian		☐ Attached
Third Applicant / Guardian		☐ Attached

PoA (Power of Attorney) REGISTRATION DETAILS (Refer Instructions overleaf)

Name of the PoA holder

PAN of the PoA holder

Attached ☐ KYC Letter (Mandatory) ☐ Notarized copy of PoA ☐ FATCA

DECLARATION & SIGNATURES

(To be signed as per Mode of Holding)

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP Mutual Fund, I / We, hereby apply to the Trustee of DSP Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. Applicable to NRIs only: I/We confirm that I am/We are Non-Resident(s) of Indian Nationality.

If EUIN is left blank/not mentioned; I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Sole / First Unit Holder	Second Unit Holder	Third Unit Holder	POA Holder, if any

V5 15/JUL/2020

- - - - - - ✂ - ✂ - - - - - -

ACKNOWLEDGEMENT SLIP

DSP MUTUAL FUND

Acknowledgement is subject to verification. Request may not be processed in case of incomplete / ambiguous / improper / incorrect details in Transaction Form.

Investor Name

Folio Number

Scheme/s

☐ Additional Purchase or ☐ SIP

Total Amount (Rs.)

☐ Redemption or ☐ Switch

Amount (Rs.)

OR Units

☐ PAN and KYC Updation

☐ PoA Registration ☐ STP or ☐ SWP or ☐ IDCW TP

ISC Stamp & Signature

Website : www.dspim.com | **E-mail** : service@dspim.com | **Contact Centre:** 1800-208-4499 / 1800-200-4499

DSP MUTUAL FUND

SIP (PDC) / STP / SWP / DTP

Distributor / RIA / PMRN Name and ARN / Code	Sub Broker Name and ARN	Branch/RM Internal Code	Employee Unique ID. No. (EUIN)	For Office use only

Name of Sole / First Unitholder (Leave space between first / middle / last name)   ☐ Mr. ☐ Ms. ☐ M/s. ☐ Others_____   Folio Number

Scheme Name/Plan/Option*/Sub Option*   DSP _____ PLAN _____ OPTION

SYSTEMATIC TRANSFER PLAN (STP) (Please allow 7 days to register STP)

STP in To Scheme/Plan/Option*/Sub Option*

DSP _____ PLAN _____ OPTION

Transfer Amount (Anyone)
☐ Fixed Sum of Rs. _____ (Minimum Rs.500/-)
☐ Capital Appreciation, subject to Minimum of Rs.500/-

Frequency (✓Tick any one)	Days/Dates (✓Tick any one)
☐ Daily	All Business days
☐ Weekly	☐ Mon* ☐ Tue ☐ Wed ☐ Thu ☐ Fri
☐ Monthly* ☐ Half Yearly ☐ Quarterly ☐ Yearly	D D Any date (1st* to 31st)

Transfer Period (Period to cover - minimum 6 STP transactions)   From D D / M M / Y Y To D D / M M / Y Y

Investments done in schemes through STP will be treated as investments through SIP and the load structure for SIP will be applicable.

SYSTEMATIC WITHDRAWAL PLAN (SWP) (Please allow 7 days to register SWP)

Withdrawal Amount
☐ Fixed Sum of Rs. _____ (Minimum Rs.500/-)
☐ Capital Appreciation, subject to Minimum of Rs.500/-

Withdrawal Date D D Any date (1st* to 31st)

Frequency ☐ Monthly* ☐ Quarterly ☐ Half Yearly ☐ Yearly

Withdrawal Period (Period to cover - minimum 6 SWP transactions) From D D / M M / Y Y To D D / M M / Y Y

Please mention any of the registered bank account details in the folio for Payout. If no details are mentioned payout will be credited to the default bank account.

Bank Name

Bank Account No.

* Default Option/Date may be applied in case of no information, ambiguity or discrepancy.

☐ I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

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.

Sole / FirstApplicant's Signature Mandatory

IDCW TRANSFER PLAN
(Please allow 7 days to register IDCW Transfer Plan)

(Please mention complete Scheme, Plan & Option)
Source Scheme (From where IDCW is to be transferred)

DSP _____ PLAN _____ OPTION

To

Target Scheme (To where IDCW is to be transferred)

DSP _____ PLAN _____ OPTION

SYSTEMATIC INVESTMENT PLAN (SIP) POST DATED CHEQUES (PDC)
(Separate Cheque required for investment in different Scheme / Plan)
All Cheques should be of same date of the months / quarters.

Each SIP Amount (minimum Rs. 500) Rs. _____

SIP Date D D Any date (1st* to 31st) Frequency ☐ Monthly ☐ Quarterly

SIP Period From D D / M M / Y Y To D D / M M / Y

(Minimum 6 installments)

Cheque Nos. From _____ To _____

Drawn on Bank/Branch

DECLARATION & SIGNATURES   (To be signed as per Mode of Holding)

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP Mutual Fund, I / We, hereby apply to the Trustee of DSP Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. Applicable to NRIs only: I/We confirm that I am/We are Non-Resident(s) of Indian Nationality.

If EUIN is left blank/not mentioned; I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Sole / First Unit Holder	Second Unit Holder	Third Unit Holder	POA Holder, if any

INSTRUCTIONS

This form should be used by existing investors only by mentioning their folio number, name and Scheme details. **Please read the Scheme related documents, Addenda, KIM and Instructions there-in and below mentioned instructions carefully before filling up the form.** Investors should provide details/instructions only in the designated space provided in the form else the same may not be considered. ADDITIONAL PURCHASE & PAYMENT DETAILS: Investors should fill name of the scheme, plan, option and sub-option. In case the details are not proper and clear or in case of incomplete details, non-clarity or ambiguity, default options will be considered and applied. Separate cheques and form should be given for each separate investment in different scheme, plan or option. The first unit holder should be one of the bank account holders in the pay-in bank account. Purchase application through Cheque/DD/RTGS/NEFT/Funds transfer requests should necessarily mention the pay-in bank account details i.e. account number and bank, branch name of the bank account used for issuing the payments to the fund. If this is not evidenced on the payment cheque/funds transfer/RTGS/NEFT request, or in case of demand drafts, unit holder should attach necessary supporting documents as required by the fund, like bank certificate, bank passbook copy or statement to prove that the funds are from a bank account held by first unit holder only. If the documents are not submitted with the application, the fund reserves the right to reject the application or call for additional details. ADDITIONAL PURCHASE THROUGH OTM FACILITY: If you are making payment through OTM facility registered in your folio, please tick the relevant box and do not attach any cheque. If more than one bank accounts are registered in your folio under OTM facility, please mention the bank account number and bank name where you wish the debit to happen. If the same is not mentioned or is not registered, default bank mandate under OTM facility will be considered to debit the purchase amount. KYC COMPLIANCE: Investors shall note that KYC is mandatory and they need to comply with the 'Know Your Client' requirements as applicable from time to time. Applications are liable to be rejected without any intimation to the applicants, if required KYC compliance is not completed by all the applicants/unit holders. REDEMPTION REQUEST: Redemption may not be processed if folio number and full scheme name including plan and option is not mentioned. Please ensure that either of amount or units is mentioned in the redemption request. The fund offers a facility to register multiple bank accounts and designate one of the bank account as "Default Bank Account". Default Bank Account will be used for all IDCW and redemptions payouts including FMP schemes maturity proceeds unless investor specifies one of the existing registered bank account in the redemption request for receiving redemption proceeds. A new non-registered bank account specified in the specific redemption request for receiving redemption proceeds will not be considered. Consequent to introduction of "Multiple Bank Accounts Facility", the existing facility of redemption with change of bank mandate is discontinued by the fund. New bank accounts can only be registered using the designated "Bank Account Registration Form". BANK ACCOUNT FOR REDEMPTION PROCEEDS: Please note the following important points related to payment of redemption proceeds: Proceeds of any redemption request will be sent only to a bank account that is already registered and validated in the folio at the time of redemption transaction processing. Unit holder(s) may choose to mention any of the existing registered bank accounts with redemption request for receiving redemption proceeds. If no registered bank account is mentioned, default bank account will be used. If unit holder(s) provide a new and unregistered bank mandate with a specific redemption request (with or without necessary supporting documents) such bank account will not be considered for payment of redemption proceeds. POA REGISTRATION: Only a General Power of Attorney agreement without any restrictions and perennial validity is accepted. The PoA must be executed on stamp paper and registered in India and a duly notarized copy should be enclosed. The PoA must have signatures of the investor as well the PoA holder. If the signature of PoA holder is not available, the fund may call for additional documents or declarations on a case to case basis. PoA will be registered within 10 working days of receipt of all valid documents. SYSTEMATIC INVESTMENT PLAN (SIP): Minimum Investment Amount for each SIP instalment is Rs.500/-. SIP/STP/SWP facility is available on all dates. SYSTEMATIC TRANSFER PLAN (STP) / SYSTEMATIC WITHDRAWAL PLAN (SWP): Please allow upto 7 days for STP/ SWP to be registered and first STP/ SWP transaction to happen. Hence form should be submitted atleast 7 days before STP / SWP start date. STP/ SWP is available in all the schemes of the Fund. STP/SWP of capital appreciation, Flex STP, Value STP is not available in case of daily & weekly frequency. For investors availing the transfer/ withdrawal of 'appreciation' option, where in any month or quarter, there is no appreciation or is less than Rs.500/-, switch/withdrawal as mentioned above, may not be carried out. In case the selected date falls on a Non-Business Day or on a date which is not available in a particular month, the SIP/STP/SWP will be processed on the immediate next business day/date. You can choose to discontinue this facility by giving 30 days written notice to the Registrar. IDCW TRANSFER PLAN: Please allow upto 7 days for IDCW Transfer Plan to be registered. Hence form should be submitted atleast 7 days before the record date of any forthcoming proposed IDCW. The Minimum amount of IDCW eligible for transfer under IDCW Transfer Plan is Rs. 500/-.

DSP
MUTUAL FUND

APPLICATION FORM
For Product Labelling & Suitability (Including Risk-o-Meter of Benchmark) and PRC
Matrix For Debt Schemes available on cover pages

Distributor / RIA / PMRN Name and ARN / Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
ARN-64917			**E434563**	

I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

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. ☐ I am a First Time Investor in Mutual Fund Industry. ☐ I am an Existing Investor in Mutual Fund Industry.

Sole / First Applicant's Signature Mandatory

1. FIRST APPLICANT'S DETAILS

Name of First Applicant (As per PAN) (Refer Instructions)

Date of Birth (1st Appl / Minor) (attach proof)
D D / M M / Y Y Y Y

Name of Guardian (if minor)/POA/Contact Person (As per PAN) (Refer Instructions)

Guardian is: ☐ Father ☐ Mother ☐ Court Appointed

Date of Birth (Guardian)
D D / M M / Y Y Y Y

Existing Folio

PAN (1st Appl / Guardian)

CKYC - KIN

PAN of POA　☐ **KYC attached**

2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS (As per KYC records)　NRI Investors should mention their Overseas address (Refer instructions).

Email ID (in capital)

Mobile +91

Tel (STD Code)

Address Type (Mandatory)
☐ a. Residential & Business
☐ b. Residential
☐ c. Business
☐ d. Registered Office

Contact details belong to family due to investor being,
☐ Self ☐ Spouse ☐ Dependent Child ☐ Dependent Parent ☐ Dependent Sibling ☐ Guardian In case of Minor

Address

Landmark

City　**Pin Code** (Mandatory)

3. KYC DETAILS (Mandatory)

3a. Status of Sole/1st Applicant (Please tick ✓) ○ Indian Resident Individual ○ Minor (Resident) ○ Minor (Repatriable) ○ Minor (Non Repatriable)

○ NRI (Repatriable) ○ NRI (Non-Repatriable) ○ PIO ○ Sole Proprietorship ○ HUF - Indian ○ HUF - NR ○ Partnership Firm ○ Limited Partnership (LLP) ○ Public Ltd. Co. ○ Private Ltd. Co. ○ Body Corporate ○ Bank ○ FIs ○ Insurance Companies ○ Government Body ○ AOP/BOI ○ Trust ○ Society ○ Provident Fund ○ Superannuation/Pension Fund ○ Gratuity Fund ○ Mutual Fund ○ FII ○ FPI-Category I/II/III ○ FCRA ○ GDN ○ Defence Establishment ○ NPS Trust ○ Others _____ (Please specify)

☞ Are you a Non-Profit Organization [NPO] or Company u/s 25 (Companies Act 1956) or u/s 8 of Companies, Act, 2013: ☐ Yes ☐ No

3b. Occupation Details (Please tick ✓) ○ Private Sector Service ○ Public Sector Service ○ Government Service ○ Business ○ Professional
○ Agriculturist ○ Retired ○ Housewife ○ Student ○ Forex Dealer ○ Others _____ (Please specify)

3c. Gross Annual Income (Please tick ✓) ○ Below 1 Lac   ○ 1-5 Lacs   ○ 5-10 Lacs   ○ 10-25 Lacs   ○ >25 Lacs-1 crore   ○ >1 crore
Net-worth in (Mandatory for Non-Individuals) ₹ .... as on D D / M M / Y Y Y Y (Not older than 1 year)

3d. For Individuals (Please tick ✓) ○ Not Applicable ○ I am Politically Exposed Person ○ I am Related to Politically Exposed Person

4. JOINT APPLICANTS (IF ANY) DETAILS

☞ **Mode of Holding** (Please tick ✓)　☐ Joint (Default)　☐ Anyone or Survivor　**Date of Birth**　D D / M M / Y Y Y Y

2nd Applicant Name

(As per PAN) (Refer Instructions)
PAN　　　　**CKYC - KIN**

a. Occupation Details (Please tick ✓) ○ Private Sector Service ○ Public Sector Service ○ Government Service ○ Business ○ Professional
○ Agriculturist ○ Retired ○ Housewife ○ Student ○ Forex Dealer ○ Others .... (Please specify)
b. Gross Annual Income (Please tick ✓) ○ Below 1 Lac ○ 1-5 Lacs ○ 5-10 Lacs ○ 10-25 Lacs ○ >25 Lacs-1 crore ○ >1 crore
c. Others (Please tick ✓) ○ Not Applicable ○ Politically Exposed Person (PEP) ○ Related to a Politically Exposed Person (PEP)

3rd Applicant Name　　**Date of Birth**　D D / M M / Y Y Y Y

(As per PAN) (Refer Instructions)
PAN　　　　**CKYC - KIN**

a. Occupation Details (Please tick ✓) ○ Private Sector Service ○ Public Sector Service ○ Government Service ○ Business ○ Professional
○ Agriculturist ○ Retired ○ Housewife ○ Student ○ Forex Dealer ○ Others .... (Please specify)
b. Gross Annual Income (Please tick ✓) ○ Below 1 Lac ○ 1-5 Lacs ○ 5-10 Lacs ○ 10-25 Lacs ○ >25 Lacs-1 crore ○ >1 crore
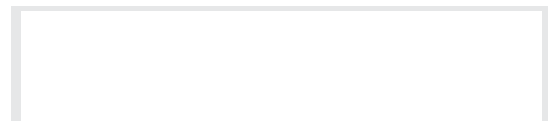**c. Others** (Please tick ✓) ○ Not Applicable ○ Politically Exposed Person (PEP) ○ Related to a Politically Exposed Person (PEP)

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)　　　DSP MUTUAL FUND

Received, subject to realisation and verification an application for purchase of Units as mentionedin the application form.
From

Scheme	Cheque no.	Amount
DSP		

5. FATCA and CRS DETAILS

	Sole/First Applicant/Guardian			2nd Applicant			☐ 3rd Applicant		☐ POA	
Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY		
Nationality ☐ Indian ☐ U.S. ☐ Other _____			Nationality ☐ Indian ☐ U.S. ☐ Other _____			Nationality ☐ Indian ☐ U.S. ☐ Other _____				

Please indicate all Countries, other than India, in which you are a resident for tax purpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.
*If TIN is not available or mentioned, please mention reason as: 'A' if the country does not issue TINs to its residents; 'B' & mention why you are unable to obtain a TIN; 'C' if the authorities of the country of tax residence entered above do not require the TIN to be disclosed.

Country #	Tax Identification Number	Identification Type/Reason*	Country #	Tax Identification Number	Identification Type/Reason*	Country #	Tax Identification Number	Identification Type/Reason*
1			1			1		
2			2			2		
3			3			3		

6. BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)

Bank Name

Bank A/C No. A/C Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others

City **Pin** **IFSC code:** (11 digit)

7. INVESTMENT AND PAYMENT DETAILS (Default plan/option/sub option will be applied incase of no information, ambiguity or discrepancy)

Cheque/DD should be in favour of: "DSP Mutual Fund" if single cheque with multiple schemes OR "Scheme Name", in case of single scheme / scheme wise cheques.

☐ One time Lumpsum Investment ☐ SIP: Systematic Investment Plan.☞Attach OTM form, if not already registered. **Mention LUMPSUM and First SIP Cheque Details below**

Full Scheme/Plan/Option/Sub Option	Amount (₹)	Payment Details
1. DSP - Scheme Plan Option/Sub Option		Payment Mode: ☐ Cheque ☐ DD
2. DSP - Scheme Plan Option/Sub Option		☐ RTGS ☐ NEFT ☐ Funds transfer
3. DSP - Scheme Plan Option/Sub Option		Cheque/DD/RTGS/NEFT Details:
Total Amount in words	Amount in Figures	Ref. No. _____ Date D D / M M / Y Y Y Y

DD charges, if any _____

Payment from Bank A/c No. Pay In A/c No.   **A/c. Type** ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others _____

Bank Name

8. NOMINATION (PREFERABLE) OR OPT OUT (AVOIDABLE) Nominee Details or Opt-Out Declaration (by way of tick) is mandatory to process the application.

Nomination OPT-IN *Mandatory

	Nominee Name/s & PAN	Relationship with applicant*	If Nominee is a Minor*		Guardian Relation	Allocation (%)*	Nominee/Guardian Signature
			Date of Birth	Guardian Name* & PAN			
1							
2							
3							
Address		In case of each Minor as Nominee, please mention Guardian's relationship with Minor as Mother/Father/Legal Guardian. Kindly attach proof like Birth Certificate/School Leaving Certificate/Passport/Others.			Total 100%		

☐ OPT-OUT declaration: I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in non appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

9. UNIT HOLDING OPTION:

☐ Account Statement Mode (Default) ☐ Demat Mode NSDL: I N Depository Participant (DP) ID (NSDL only) Beneficiary Account Number (NSDL only)

CDSL:

Enclose for demat option: ☐ Client Master List ☐ Transaction/Holding Statement ☐ DIS Copy

10. I/We wish to receive physical copy of the annual report/abridged summary, if email id is not registered in the folio. ☐

11. DECLARATION & SIGNATURES

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP Mutual Fund form time to time, I / We, hereby apply to the Trustee of DSP Mutual Fund for Units of the relevant Scheme/Plan/Option and agree to abide by the terms and conditions, rules and regulations. I / We have understood the information requirements of the application form, including FATCA and CRS requirements, terms and conditions (read along with instructions and scheme related documents) and hereby accept the same and further confirm that the information provided by me/us on this form is true, correct, and complete. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority.

Sole / First Applicant / Guardian Second Applicant Third Applicant POA holder, if any

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Email: service@dspim.com **Website: www.dspim.com** Contact Center: 1800-208-4499 / 1800-200-4499

Quick Checklist ☞
- ☐ Name/s mentioned are as per PAN only
- ☐ Address, Email ID/Mobile are correctly mentioned.
- ☐ KYC information provided for each applicant
- ☐ FATCA/CRS details provided for each applicant
- ☐ Full scheme name, plan, option is mentioned
- ☐ Pay-In bank details and supportings are attached
- ☐ Nomination facility opted
- ☐ Form is signed by all applicants
- ☐ Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used.
- ☐ Non Individual investors should attach
  - ☐ FATCA Details and Declaration Form
  - ☐ UBO Declaration Form