## 🔈 Nippon india Mutual Fund

Wealth sets you free

## COMMON APPLICATION FORM- SINGLE PURCHASE

(To be filled in CAPITAL letters) APP No.:

MFD / RIA INFORMATION (F Name & ARN Code	Sub Agent ARN Code	Sub Agent Code /Bank Branch Code/ Internal Code	*Employee Unique Identification Number	RIA Code**
ARIARN-64917 here)	ARN-		E434563	
*Please sign alongside in case the any interaction or advice by the el the employee/relationship manag	mployee/relationship manager	. I./We hereby confirm that the EUIN box has been inte /sales person of the above distributor/sub broker or no or/sub broker.	ntionally left blank by me/us as this t ot with standing the advice of in-appro	ransaction is executed withou opriateness, if any, provided by
SIGN First / Sole Applican HERE Authorised S		Second Applicant / Authorised Signatory		plicant / d Signatory
(If you have an existing folio numb	r across Mutual Funds O	R       I am an existing investor in Mutual Fun         ention the number here, enter your name in section 4 &         Mode of holding will be as per existing folio number.)		[CA / Additional KYC details.
2. UNITHOLDING OPTION -	📕 Demat Mode 📕 Phys	ical Mode These details are compulsory if the investa	or wishes to hold the units in <b>DEMAT</b> mod	e. Ref. Instruction No. XI.
		in the application form matches with that of the	,	
DP ID No. Beneficiary Account	curities Depository Limited	Target ID No.	ntral Depository Securities Limite	
Enclosures (Please tick any			g Statement 🗌 Cancelled Deli	, , ,
<b>3. GENERAL INFORMATION</b>	APPLICATION FOR O Zer	o Balance Folio O Investment <b>^MODE OF HOLD</b>	<b>ING</b> : [Please tick( $\checkmark$ )] $\bigcirc$ Single $\bigcirc$ Join	t (Default) 🔿 Any one or Survivo
4. FIRST APPLICANT DETAIL	.s			
Mr. Ms. M/s.				
PAN / PEKRN^**				
Iame of Guardian if first app Contact Person for non individ	Mr. Ms.			
Guardian's Relationship With	of lot Ame		<b>Proof of Date of Birth and Guard</b> O Birth Certificate O Passp	•
<ul> <li>O Resident Individual</li> <li>O Private Limited Compa</li> <li>O Public Limited Compa</li> </ul>		<ul> <li>Body Corporate</li> <li>Solv</li> </ul>	e Proprietor O Society	O Defence Establishmer O Bank (please specify)
		ces: (Applicable only for Non Individuals)		
Foreign Exchange / Money (		aming / Gambling / Lottery / Casino Services	O Money Lending / Pawning	O None of the above
		CA, CRS & UBO Self Certification Form (Ref Ins No. XIV) r investors to be KYC compliant prior to investing in Ni		
5. SECOND APPLICANT DET	TAILS			
IAMEA Mr. Ms. M/s.			STATUS^: O Res	ident Individual O NRI
PAN / PEKRN^**		CKYC Id^**		
6. THIRD APPLICANT DETAI	LS			
IAMEA Mr. Ms. M/s.			STATUS^: O Res	ident Individual O NRI
PAN / PEKRN^**		CKYC IdA**		
🕽 Nippon india Mutual F			ACKNOWLEDGMENT SLIP	
Wealth sets y		To be filled in by the investor. Subject to re	eunzation of cheque and finishin(	y or Mandatory Information
			APP No.:	Time Officer & Date
cheme /Plan/ Option:				Time Stamp & Date of receiving office
ayment Details: Amount ₹	Instrument No.	Date: Drawn on Bank		

Registered Office Address: 4th Floor, Tower A, Peninsula Business Park, Ganapatrao Kadam Marg, Lower Parel (W), Mumbai - 400 013.

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12. ADDITIONA	AL KYC DETA	ILS																	
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Are you related	to a Politically	y Exposed Per	son (PEP)^*	*	Yes	O No	0	Yes	O NoC	)		Yes C	) N	loO		Ye	es ()	No	0
13. POWER OF	ATTORNEY (	POA) HOLD	ER DETAILS	6 (F	efer Instr	uction No	o. II. 1)									PAN^			
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FOR NOMINATIO	N OPT-OUT:		<b>OT</b> wish to m	nake a r	nominat	ion. (Ple	ease tick (v	´) if the	unit holde	er does	not wi	sh to r	nom	inate	anyor	ie)			
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I5. DECLARATI( I/We would like to Information Memo details relating to Scheme is through enacted by the Go Management Limit agree NAM India cr other mode), payo information is give subscription amou I/We hereby confir Account. I/We undi Account. I/We undi Account. I/We undi complete. ++ I/We, etc. in respect of m representatives of	invest in Nippo randum (KIM) ar various services. I legitimate sour vernment of Inc ted (NAM India) an debit from my able to him for th an by the under int and the said m that the fund- ertake that all ac vy declare that the led by me /us in have invested ir y/our investmer	n India nd subsequent I/We have not ces only and is iia or any Statu' liability. I unders y folio for the se he different con signed and pa charges shall bi s for subscriptic diditional purcha he information p the Form, its su the Scheme(s) hts under Direct	amendments received nor b not designed f ory Authority. stand that the vice charges upeting Schem e paid to the di n have been n ses made un- rovided in the pporting Anna of your Mutua Plan of all Sche	thereto. een indu or the pu I accept NAM Ind as applic hes of vo by me/ istributor emitted der this fr Form is ir exures as I Fund ur emes Mar	I/We have aced by a ripose of a and agre ia may, a able from rious Mut us are cc s l con from abre blo will alta a accorda s well as in der Direc naged by	e read, une ny rebate contraver see to be b t its absol t its absol t its absol t its adsol urect and firm that I ad throu so be from nce with s t the doct t Plan. I/W you, to the	derstood (be or gifts, dire tition or evas ound by the ute discretic ime. The ARN from amon a complete. I am residen gh normal b n funds rece section 285B umentary ev e hereby give e above mer	efore fillin ctly or indice of an said Terrin said Terrin, discor holder h gst whick Further, I t of India. anking c ved from A of the Ir idence p e you my tioned M	ig application directly, in my ms and Cor- ntinue any c as disclose in the Schem agree that in J/We c thannels or a abroad the abroad the come Tax A provided by /our conser- lutual Fund I	on form) haking th lations / halitions i of the se d to me/ ne is bei the trai onfirm th from fum rough ap act, 1961 r me/us o ht to shar Distribute	and is/ including Rules / I including rvices c us all the ng reconstant of a line proved ead with are, to the re/provid or / SEBI-	are bou stment. Notifico g those omplet e com mmen n charg /We are y/our N bankir n Rules ne best de the t	und b I / We ations e excl tely o mission ided f ge (if e Non-F ng ch 114F to t of ou trans rered	by the c de declo s / Direc luding/ or partic ons (in to me/ applic n-Resid Resider nannels o 114H o ur know actions Investi	details of are that ctions of limitin ally with the for us. I he cable) s ent of I at Extens or from f the Ind vledge s data f ment A	of the SA t the amor any of g the Nip hout any m of trai reby de shall be hadian No hadian No hadian No and Jord an funds come To and bel eed/po dviser. II	II, SID & nount i ther Ap opon I y prior il com clare t dedu ationc in my, ax Rule ief, tru rtfolio hereb	KIM nvest pplice ife In notic missi hat t cted lity/C Acco our N s, 196 e, co holdi y auth	including ted in the able Law dia Asse to me on or an he abov from the origin and unt/FCN URE/FCN 2 and the rrect and ngs/ NA porize the
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