## Aditya Birla Sun Life Mutual Fund



## **MUTUAL FUNDS**

## Common Application Form For Resident Indians and NRIs/FPIs

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Aditya Birla Sun Life AMC Limited (Investment Manager to Aditya Birla Sun Life Mutual Fund)
Regn. No.: 1.09. Regd Office: One World Center, Tower 1, 17th Floor, Jupiter Mills,
Senapati Bapat Marg, Elphinstone Road, Mumbai 400013.

Contact Us: 1800-270-7000

adityabirlacapital.com



MAILING ADDRESS OF FIRST / SOLE APPLICANT (P. O. Box Address is not sufficient. Please provide full address.)  CITY  STATE  OVERSEAS ADDRESS (Mandatory for NRI/FPI Applicant.)  CITY  COUNTRY  Tip COUNTRY  SMS Transact Online Access Mobile No. +91  SMS Transact Online Access Mobile No. +91  This mobile number pertains to Guardian POA PMS  Custodian (For FPI'S only)  Email ID												
STATE  OVERSEAS ADDRESS (Mandatory for NRI/FPI Applicant.)  CITY  COUNTRY  ZIP COD  GO GREEN [Please tick (*/)] (Refer Instruction No. 10)  SMS Transact Online Access Mobile No. +91  This mobile number pertains to Self Spouse Dependent Children Dependent Parents (Mandatory):  Guardian POA PMS  Custodian (For FPI'S only)												
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Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: [Please tick (🗸)] Account Statement 🗌 Annual	Report Other Statutory Inform											
Facebook Id Twitter Id												
BANK ACCOUNT DETAILS (In case of Minor investment, bank details should be of the minor, parent or legal guardian of the minor, or joint account of the minor with parent or legal guardian) if	Refer Instruction No. 3(A)											
Name of the Bank												
Branch Address												
Pin Code City												
Account No.												
Account Type [Please tick (🗸)] SAVINGS CURRENT NRE NRO FONE OTHERS (Please Specify)												
11 Digit IFSC Code 9 Digit MICR Code												
INVESTMENT & PAYMENT DETAILS [Please tick (🗸)] (Refer Instruction No. 5, 9 & 14) (If this section is left blank, only folio will be created)												
S. No. Scheme Name* Plan/	Option Amount Invested											
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2. ABSL												
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# (Type of Account : Saving / Current / NRE / NRO / FCNR / NRSR) *All purchases are subject to realization of funds ^Refer to Instruction No. 5 (vi)												
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Dominat Day	Bank and Branch											
S. No. Scheme Name Plan / Option Net Amount Paid (₹) Cheque/DD No./UTR No. (in case of NEET/PTGS)												
S. Schame Name Dian / Ontion Not Amount Daid (#)												
S. No. Scheme Name Plan / Option Net Amount Paid (₹) Cheque/DD No./UTR No.												

PAYMENT DETAIL	S															
	Cheque Dat	e	Cheque No.	Amount												
	In case of Minor,	Payment should be fro	ould be from the bank account of the minor, parent or legal guardian of the m					nt accour	nt of the	minor wit	h parer	nt or leg	gal guar	dian		
Drawn on Bank and Branch																
	Mandate (To be filled in o	ase of more than one	OTM registration) (In c	ase of minor, manda	te should be reg	stered in the na	me of the	minor, p	arent or	legal gua	rdian of	f the mi	nor, or	rom a joint	account o	
the minor with parent	or legal guardian.)					A/ N	1									
Bank Name						A/c No.										
Cheque should be submitted, o	crossed "Account Payee o	nly" and drawn favorin	g "Aditya Birla Sun Life	Mutual Fund".												
KYC DETAILS (Mandato	ry)															
OCCUPATION [Please tid	ck (✔)]															
	☐ Private Sector Se	ervice Public	Sector Service	Government Serv	rice Busii	ness Pro	ofessiona	al 🔲	Agricult	urist	☐ Re	etired		Housewife	:	
FIRST APPLICANT	Student	☐ Forex □	ealer	Others				(	please s	specify)						
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THIRD ADDITIONAL	<del></del>														-	
THIRD APPLICANT Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs > 25 Lacs - 1 Crore OR Net Worth											-					
For Individuals	lam la	ım Not	For Non-Indi	vidual Investors	(Companies,	Trust, Partn	ership e	etc.)								
	Politically   Related to   Exposed   Exposed											s $\square$ N				
Sole/First Applicant		Person Foreign Exchange / Money Charger Services											s $\square$ N			
Second Applicant		Gaming / Gambling / Lottery / Casino Services										s 🔲 N				
										Yes	s $\square$ N					
DEMAT ACCOUNT DETAIL the A/c. held with the deposit	ory participant.) Refer Ins	truction No. 3(B)		ily given in Demat for	rm only) (Please	ensure that the	sequence	7		tioned in		plication	) form r	natches wit	th that of	
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Enclosed: Client Ma	ster Transact	on/ Statement Co	ppy/ DIS Copy													
NOMINATION DETAILS (M	Mandatory) (Refer Instru	ıction No. 7)														
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ss I/We hereby confirm tha and further are aware tha the value of assets held in	t in case of death of a															
Signatu	re of the 1st unitholo	ler	Si	Signature of the 2 <sup>nd</sup> unitholder						Signature of the 3 <sup>rd</sup> unitholder						

FAICA & CRS INFURMATION [Please t	ick (✔)] For Individual Invest	fors including Sole Prop	orietor (Non Individual Investors should m	andatorily fill seperate F	FATCA detail form)						
The below information is required	· · · · · · · · · · · · · · · · · · ·		1000 00 11 11 11 11 11								
Address Type: Residential or Is the applicant(s)/ guardian's Co			ered Office (for address mentioned in for dency other than India?	m∕existing address app □No	pearing in Folio)						
If Yes, please provide the followin	,	Nationality / Tax Resi	dency other than India?	∐ N0							
		ourposes and the assoc	ciated Tax Reference Numbers below.								
Category	First Applicant (includi	ng Minor)	Second Applicant/ Guardian		Third Applicant						
Name of Applicant											
Place/ City of Birth											
Country of Birth											
Country of Tax Residency#											
Tax Payer Ref. ID No^											
Identification Type [TIN or other, please specify]											
Country of Tax Residency 2											
Tax Payer Ref. ID No. 2											
Identification Type											
[TIN or other, please specify]											
Country of Tax Residency 3											
Tax Payer Ref. ID No. 3											
Identification Type											
[TIN or other, please specify]											
#To also include USA, where the individual is a citizen/green card holder of USA. ^In case Tax Identification Number is not available, kindly provide its functional equivalent.											
DECLARATION(S) & SIGNATURE(S) (Refer Instruction No. 1)											
The Trustee,  Aditya Birla Sun Life Trustee Private Limited.  Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering  Laws, Arti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/We have not received.											
Laws, Anti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.  For Non-Individual Investors: I/We hereby confirm that the object clause of the constitution document of the entity (viz. MOA / AOA / Trust Deed, etc.), allows us to apply for investment in this scheme of Aditya Birla Sun Life AMC Limited and the application is being made within the limits for the same. I/We are complying with all requirements / conditions of the entity while applying for the investments and I/We, including the entity, if the case may arise so, hereby agree to indemnify ABSLAMC / ABSLMF in case of any dispute regarding the eligibility, validity and authorization of the entity and/or the applicants who have applied on behalf of the entity.  For NRIs only: I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident External/Non-Resident Cordinary/FCNR account. (Refer Inst. No. 6)											
I/We confirm that details provided by me/us are true and correct.**  ** I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Aditya Birla Sun Life AMC Limited (Investment Manager of Aditya Birla Sun Life Mutual Fund) and confirm of having read, understood and agree to abide the terms and conditions for availing of the internet facility more particularly mentioned on the website www.adityabirlasunlifemf.com and hereby undertake to bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.  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.  "I / We acknowledge that the RIA has entered into an agreement with the AMC / MF for accepting transaction feeds under the code. I / We hereby indemnify, defend and hold harmless the AMC / MF against any regulatory action, damage or liability that they may suffer, incur or become subject to in connection therewith or arising from sharing, disclosing and transferring of the aforesaid											
information."  FATCA & CRS Declaration: I/ We have understood the information requirements of this Form (read along with FATCA & CRS Instructions) and hereby confirm that the information provided by me/ us on this Form is true, correct, and complete. I/ We also confirm that I/ We have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same. (Refer Inst. No. 13)											
Signature of First Applicant /	Authorised Signatory	Signati	ure of Second Applicant	Signat	ure of Third Applicant						

## VALUE ADD

I/We am/are interested in knowing my/our credit score and am/are happy to receive help in this regard.

I/We hereby provide my consent to:-

- 1. Aditya Birla Sun Life AMC Limited and its group companies & associates to conduct check on my/our credit information with any of the credit bureau.
- 2. Aditya Birla Sun Life AMC Limited and its group companies & associates to conduct a background check either by their employees or through any third party vendor. Yes