

Mode of Payment Self Third Party Payment (please fill the Third Party Payment Declaration Form)

Payment mode Cheque DD Common CAMS OTM / PPFAS OTM Fund Transfer RTGS/NEFT Transfer Letter

DD Charges

S. No.	*Cheque / DD Favouring Scheme Name	Cheque Date	Amount Invested (₹)	DD Charges	Net Amount Paid (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch and Account Number
1.	Parag Parikh Flexi Cap Fund						
2.	Parag Parikh Liquid Fund						
3.	Parag Parikh ELSS Tax Saver Fund						
4.	Parag Parikh Conservative Hybrid Fund						
5.	Parag Parikh Arbitrage Fund						
6.	Parag Parikh Dynamic Asset Allocation Fund						

*All purchases are subject to realization of funds in our bank accounts w.e.f February 01, 2021

13 NOMINATION DETAILS Individuals (single or joint applicant) are advised to avail Nomination facility.

Declaration Form for opting out of nomination

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 heir 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.

I/We wish to nominate

I/We, the unitholders of schemes of PPFAS Mutual Fund, do hereby nominate the person(s) more particularly described hereunder to receive the units held my/our folio(s) listed below in the event of my / our death in respect of the units which will be held by me/ us in the said investment




I / We have read the terms and conditions for nomination and hereby nominate the above nominee(s) to receive all the amounts to my / our credits in the event of my / our death. Signature of the nominee(s) acknowledging receipt of my / our credit will constitute full discharge of liabilities of the PPFAS Mutual Fund.

Nominee details	Nominee 1	Nominee 2	Nominee 3
Name and address of Nominee(s) [Mandatory]			
PAN of the Nominee [Guardian PAN to be quoted if Nominee is Minor - Mandatory]			
Relationship with Sole / First unit holder (Mandatory)			
Date of Birth* [Mandatory]	dd-mm-yyyy	dd-mm-yyyy	dd-mm-yyyy
Name and address of Guardian* [Mandatory if Nominee is Minor]			
Signature of Nominee / Guardian*			
Guardian's Relationship with Nominee* [attach proof]	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian
Allocation % to each nominee [Mandatory] (Aggregate should be 100%)			

* Applicable in case the Nominee is a Minor. (Also, please attach a copy of the minor's birth certificate)

Declaration & Signature(s) (to be signed by all unit holders including joint holders, irrespective of mode of holding).

I/We have read and understood the instructions on nomination and I/We hereby undertake to abide by the same. The instructions contained herein super cedes all previous nominations made by me/us in respect of the folio(s) mentioned above.

 Sole / First Holder's Signature	 Second Holder's Signature	 Third Holder's Signature
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13 FATCA and CRS Information/Foreign Tax Law (Self Certification) (Required for all applicant(s)/Guardians, Sole Proprietor & POA Holder)
For Non-Individual investor : You are required to submit separate FATCA/CRS/UBO declaration form.

	Place/City of Birth	Country of Birth	Country of Citizenship / Nationality
First Applicant / Guardian			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others <small>Please specify _____</small>
Second Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others <small>Please specify _____</small>
Third Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others <small>Please specify _____</small>
POA Holder			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others <small>Please specify _____</small>

Are you a tax resident (i.e. are you assessed for tax) in any other country outside India? YES No (please tick ✓)

If "YES" please fill for ALL countries (other than Indian in which you are a Resident for tax purpose i.e. where you are a Citizen/ Resident/ Green Card holder/ Tax Resident in the respective countries.)

	Country of Tax Residency#	Tax Identification Number or Functional Equivalent	Identification Type* (TIN or other please specify)	Identification Type (TIN or other please specify)
First Applicant / Guardian				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Second Applicant				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
Third Applicant				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
POA Holder				Reasons <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C

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.

Reason A → The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.

Reason B → No TIN required (Select this reasons Only if the authorities of the country of tax residence do not require the TIN to be collected) Reason C → Others please state the reasons there of:

Address Type of Sole / 1st Holder	Address Type of 2nd Holder	Address Type of 3rd Holder
<input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business	<input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business	<input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business

14 Declaration for NPO

<p>We are falling under "Non-Profit Organization" [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If yes, please quote the NPO Registration Number provided by DARPAN portal.</p> <p><i>(If not registered already, please register immediately and confirm with the above information. In absence of receipt of the Darpan portal registration details, MF / AMC/ RTA will be required to register your entity on the said portal and/or report to the relevant authorities as applicable.)</i></p>	<hr/>

Instructions

- 'If the Name given in the application does not match the name as appearing on the PAN Card/Aadhaar card, authentication, application may be liable to get rejected or further transactions may be liable to get rejected'
- I /We have understood the information requirement of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided be 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 below and hereby accept the same.
- Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public function in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior government/judicial/military officers, senior executive of state-owned corporations, important political party officials, etc.
- Country of Tax Residence and Tax ID number: Tax Regulations require us to collect information about each investor's tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about tax residency, please contact your tax advisor. Should any information provided change in the future, please ensure you advise us of the change. If you are a US citizen or resident, please include United States in this related field along with your US Tax Identification Number.
- As per AMFI Circular No. 135/BP/77 /2018-19, please provide email id and Mobile Number of the Primary Unit Holder of the Folio. In cases where the email address/mobile No. is not provided in the application form, the email address/mobile no. of the first applicant as per the KYC data will be taken as the email address/mobile No. The email address of one investor should not be allowed/up dated against folios of other/multiple investors, unless a specific written request is received in this regard, duly signed by the investors or the investors in such folios belong to the same family (applicable in respect of individual investors only).

"Family means self, spouse, dependent children, dependent siblings, dependent parents, and a guardian in case of a minor as per AMFI guidelines dated March 28, 2022"
- The AMC to strengthen control with respect to verification of key details of investors like Bank account details, email id, mobile number, and address, etc and to standardize the process for Validation of Email ID, Mobile Number, Bank Mandate & Two Factor Authentication for Redemptions of Non-Demat folios. AMC shall take necessary steps to comply with the AMFI Best Practice guidelines dated March 28, 2022, and as amended from time to time. Investors are requested to provide correct Bank account details, email id, and mobile number at the time of submitting the application.