

Folios / Account Numbers (Investor can opt for multiple requests in one single application form.)

1. Date of Birth (Write name in capital letters) *Please refer the instructions no. 16.

Name of First / Sole applicant

Date of Birth (supporting document such as PAN, birth certificate, passport copy or any other govt issued documents)

2. Consolidation Of Folios:

Target Folio

Source Folios

Note: The consolidation of folios will be affected only if all the details are identical in target and source folios.

3. Update/Change of Contact Details *Please refer the instructions no. 14.

First Holder

Mobile No. (For Receiving Transaction Alerts via SMS) Tel. No. STD Code Office Residence

Mobile No. provided pertains to

Email ID (CAPITAL letters only) (For Receiving Transaction Alerts Via Email)

Email ID provided pertains to

Second Holder

Mobile No. (For Receiving Transaction Alerts via SMS)

Mobile No. provided pertains to

Email ID (CAPITAL letters only) (For Receiving Transaction Alerts Via Email)

Email ID provided pertains to

Third Holder

Mobile No. (For Receiving Transaction Alerts via SMS)

Mobile No. provided pertains to

Email ID (CAPITAL letters only) (For Receiving Transaction Alerts Via Email)

Email ID provided pertains to

4. Change of Mode Of Operation (Applicable only if there are more than one applicant in the Folio)

Joint Any One or Survivor(s)

5. Power of Attorney (POA) Registration Cancellation *Please refer the instructions for the documents to be submitted.

Name of POA Holder: PAN No. of POA

6. Change of Income Distribution cum capital withdrawal Option

Scheme Option Payout to Reinvestment Reinvestment to Payout

7. Release Unclaimed Amount

I would request you to kindly release the unclaimed amount in the folio to the registered bank account.

Received from Mr./Mrs. Folio/Account No:

☐ Date of Birth ☐ Consolidation Of Folios ☐ Update/Change of Contact Details ☐ Change of Mode Of Operation

☐ Power of Attorney (POA) ☐ Change of Income Distribution cum capital withdrawal Option ☐ Release Unclaimed Amount ☐ KYC Updation

☐ Revalidation of IDCW/ Redemption cheque ☐ Updation/Correction of PAN ☐ Nominee Updation ☐ FATCA Updation

☐ First / Sole applicant ☐ Guardian (In case of Minor) ☐ Second Applicant ☐ Third Applicant

☐ I/We are in receipt of Redemption/ Income Distribution cum capital withdrawal(IDCW) warrant as below.

Cheque No.:		Cheque Date:	
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I/ We are herewith enclosing the warrant as I/ We could not deposit the same due to the below reason:

1. Bank details incorrectly mentioned 2. Warrant validity period has expired

☐ I request to reissue the said warrant after necessary revalidation without change in bank Mandate.

First / Sole applicant	PAN No.										PAN Proof Enclosed	☐
Guardian (In case of Minor)	PAN No.										PAN Proof Enclosed	☐
Second Applicant	PAN No.										PAN Proof Enclosed	☐
Third Applicant	PAN No.										PAN Proof Enclosed	☐

Nominee Name & Address	PAN of Nominee / Guardian (Optional)	Allocation (%)	Date of Birth of Nominee	Nominee Relation With Investor	Guardian Name (in case Nominee is Minor)	Guardian Relation with Nominee	Sign of Nominee / Guardian (in case Nominee is Minor)
			DD MM YYYY				
			DD MM YYYY				
			DD MM YYYY				

FOR NOMINATION OPT-OUT: ☐ I/We **DO NOT** wish to make a nomination. (Please tick (✓) if the unit holder does not wish to nominate anyone)

I / We, the undersigned applicant(s)/unitholder(s) hereby confirm that I / we do not wish to appoint any nominee(s) in respect of the mutual fund application(s) / units held in my / our mutual fund folio(s) and understand the implications / issues involved in non-appointment of any nominee(s) and am/ are further aware that in case of my demise / death of all the unit holders in the folio, my / our legal heir(s) would need to submit all the requisite documents issued by the Court or such other competent authority, as may be required by the Mutual Fund / AMC for settlement of death claim / transmission of units in favour of the legal heir(s), based on the value of the units held in the mutual fund folio/s.

Country of Birth _____ Place of Birth _____ Nationality _____

Are you a tax resident of any country other than India? ☐ Yes ☐ No

If Yes, please mention all the countries in which you are resident for tax purposes and the associated Taxpayer Identification Number and its identification type in the column below

Country	Tax-Payer Identification Number	Identification Type

SIGN HERE	First / Sole Applicant / Guardian/ Authorised Signatory	Second Applicant/ Authorised Signatory	Third Applicant/ Authorised Signatory
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Note: All Unit holder's signature is mandatory irrespective of mode of holding.