## FORM 1 - FOR LUMPSUM / SIP INVESTMENTS



Application No.

Distributor ARN	Sub-Distrib	S		Employee Code					EUIN		S	Serial No., Date & Time Stamp									
ARN 102841										E											
Jpfront commission shall be paid		-			ed on the	invest	or's ass	essmer	nt of vario	us fact	ors inclu	ding the se	ervice rer	ndered b	y the (	distributo	or.				
"I/We hereby confirm that the EUII xecuted without any interaction or ac istributor/sub broker or notwithsta mployee/relationship manager/sales pe	I box has been intentionally lvice by the employee/relati nding the advice of in-ap rson of the distributor/sub bi	y left blank by me/u ionship manager/sal ppropriateness, if roker."	is as this tra les person of any, provid	ensaction is f the above led by the	Fi		ole Appl uardian	cant /		Se	cond Ap	plicant		Th	nird Ap	pplicant		P	ower	of Attor	ney Holde
RANSACTION CHARGES more and your Distributor has opted nits will be issued against the balance	to receive Transaction Cha															am a firs am an e					utual Fun Funds.
1 EXISTING INVEST	TOR'S FOLIO NU	IMBER (If you	ı have an exi	isting folio wit	h KYC vali	idated, p	olease me	ntion he	re and skip	to sectio	on 3/4.)				Т						
2 FIRST APPLICAN	T'S DETAILS (No	on-individual inverto	ors please fill	I in UBO annex	ure and a	ttach ald	ong with a	pplicati	ion form)										N	   Ir.	∕ls. □ N
Name (1st)								T							T		T				
Date of birth	M Y Y P	PAN Refer 9				+		+	Nat	ionali	v				Cou	intry of	Birth				
For Investments "On behalf			tificate [	School (	Certifica	ate 🗆	Passp	ort [			7	Guard	ian nam	ned belo		•		Moth	ner 🗆	Court	Appointe
Name of the Guardian if min											Gı	 uardian /	PoA PA	N							
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Correspondence / Overseas a	iddress (For FIIs/NRIs/F	PIOs)			+	+		$\pm$		$\overline{}$	_		+		$\pm$		+		$\dashv$	+	
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Email (Refer 15a)									Mobile								Tal				
Status 🗌 Resident Individu	Pronrietor	HIIF Minor		NDI 🗆	DIN 🗆	Partn	orchin I		L		Truet*	Comp	**	Non-P	Profit	Organiz	Tel.	(NPO) (	Ref 20	□ Ot	her Speci
Any other information						NON-INDIVIDUALS															
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THIRD APPLICANT'S	DETAILS							Na	tionality				Country	of Birth	n [					  r.	/Is.
Name (3 <sup>rd</sup> )								Т													
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3 DEBIT MANDATE	or Axis Bank A/c only.) To	be processed in CM	IS software	under client co	ode "AXIS	MF"	TO	BE DETA	ACHED BY KA	RVY & PF	ESENTED T	TO AXIS BANK	CCMS	Applic	ation	No.					
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4 INVESTMENT & P Payment type Non-Thir			ILS (Invest										2)															
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7 DECLARATION AN	D SIGN	ATURE																										
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enacted by the Government of India from Process is not completed by me/us to the Vith such funds that may be required by	e satisfaction the law.) The	of the Mutual I ARN holder ha	Fund, (I/we he as disclosed to	reby autl me/us a	horize the N II the comm	lutual Fund, issions (trail	to redeem th commission	e fund or any	ls invest other m	ed in the node), pa	e Schen ayable 1	ne, in favo to him for t	ur of the he diffe	applic rent co	ant, at t impetin	he appl g Schen	licable I nes of v	NAV pre arious l	evailing Mutua	j on the I Funds	date amon	of such gst wh	reden	nption a e Schem	nd und e is be	lertake s ing reco	uch oth mmend	er a
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