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Please refer to Product labelling details available on cover page and Your Guide To Fill The Application Form (pages 22-24) before proceeding

Channel Partner / Agent Informa	ation			Serial No:EQ
Distributor's ARN & Name Sub-b	roker Code (internal)	Sub-broker's ARN (code)	EUIN* (Employee Unique Idendification Number)	ISC's signature
ARN – 102841			E	& Time Stamping
* Declaration for "Execution only" f EUIN box has been intentionally left b the employee/relationship manager/s inappropriateness,if any, provided by	lank by me/us as this ales person of the ab	transaction is executed witho	ut any interaction or advice b notwithstanding the advice of	y f Transaction charges For Rs. 10,000 and above: ☐ Existing Investor-Rs.100 ☐ New Investor-Rs.150 L Infront commission shall be paid directly.
First/Sole Applicant/ Guardian	Second Applicant	Third Applicant		by the investor to the AMFI-registered distributors based on the investors' assessment of various factors including services rendered by the distributor.
 Existing Investor Information (I Please note that applicant detai KYC compliant Yes No (if notes that the second second	ils and mode of holdi	ng will be as per existing Fol	o Number. Folio No	
2. New Investor Information (re	fer instruction 2)			
Name of First/Sole Applicant Ge	nder 🗆 Male 🗆 Fer	nale 🗌 Others		
Permanent Account Number (PAN)		Date of	Birth D D M M Y Y	Y Y KYC Proof attached (Mandatory)
Name of Guardian (in case of Firs	t / Sole Applicant is	a Minor)/Contact Person-	Designation (in case of no	n-individual Investors) / POA Holder Name
Permanent Account Number (PAN)		Relation	onship	KYC Proof attached (Mandatory)
Father's name (mandatory if PAN	not provided)			
Go Green Services (Save The Futu	re): Please provide	Contact Details of First / S	ole Applicant	
E-Mail				
STD Code	Telephone		Mobile	
Default Communication mode is E-		•	ment(s) via physical mode:	Please tick (✓)
Mode of Holding [Please (✓)] □			e or Survivor	
Address of First / Sole Applicant	:			
TOWN	CITY/ DISTRICT		STATE	PIN CODE
Overseas Address (in case of NR	ls/Flls) (Mandatory)			
Name of Second Applicant				
Permanent Account Number (PAN)		Date of	Birth D D M M Y Y	Y Y G KYC Proof attached (Mandatory)
Name of Third Applicant				
Permanent Account Number (PAN)		Date of	Birth D D M M Y Y	Y Y G KYC Proof attached (Mandatory)

Application Form

Sa. Status of First/Sole Applicant (Please //) Listed Company Utilisted Company Individual Miner through guarders L.HUF IP Min-Paparatale Miner Manual Find LIP Miner Miner Miner Miner Miner Miner Manual Find LIP Miner Mine	3.	KYC details (Mar	ndatory) (r	efer instructi	ion 3) 🛛	Individual	[Non-Individual (Pleas	e attach mandato	ry Ultim	ate Beneficial Ownership	o (UBO) declaration form)
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City of birth				Registered	d Office)		Registered Offic	e		Registered Office)
		City of birth										
Country of birth		Country of birth										

\$ In case any of applicant being resident/ tax payer in more than one country, provide tax identification number for each such country separately.

Application Form

5.	Bank Account D	etails o	of First/	Sole Ap	plican	t (as po	er SE	BI Reg	julatio	ns it	is ma	ndat	ory) (r	efer i	nstru	ictio	n 5)							
			1 1	1	I I	1	1 1	1	1	1		1	1	1	I I	1	1	1	1	1	1	1	1	1

Account No																										
Name of the Bank												Bra	anch													
Branch Address												Ba	nk C	ity (re	demptic	n will b	e payabl	le at this	location	n)						
Cheque MICR No						Acc	ount	Туре	e [Plea	ase (/)]	Sav	vings	🗆 Οι	urrent	ΠN	RE* 🗆	NR	D* □	FCNF	R* 🗆 (Othe	rs			
RTGS / NEFT / IFSC	Coc	le									*If the	payme	ent is b	y DD o	or sour	ce of f	und is i	not clea	ar on th	ne Che	que lea	af, plea	se prov	vide a c	opy of	FIRC.
		-		 -	-	-						-			-	-	-									

6. Mode of payment of redemption/dividend proceeds via Direct credit/NEFT/Other Mode (refer instruction 6).

Direct Credit is now available with: Axis Bank, BNP Paribas Bank, Citibank, Deutsche Bank, HDFC Bank, HSBC Bank, ICICI Bank, IDBI Bank, IndusInd Bank, ING Vysya, Kotak Mahindra Bank, Royal Bank of Scotland, SBI, Standard Chartered Bank, YES Bank. If your bank falls in this list your Redemption/ Dividend proceeds will be directly credited to your account. Alternatively, you will receive the payment through NEFT mode based on the bank details available. Otherwise, payment will be made by way of a cheque/demand draft/warrant.

7. Payment Details: Please issue a separate cheque/Demand Draft favouring the scheme you wish to invest (refer instruction 7)

Scheme Name	Plan	Option	Amount Invested		Payment Details					
	T Idit	option	(less DD charges)	Paid	Cheque/DD Number	Bank/Branch				
	🗆 Regular 🗆 Direct									
	🗆 Regular 🗆 Direct									
	🗆 Regular 🗆 Direct									

In case of third party payment (refer instruction 7): Please download (www.sundarammutual.com) and attach the third party declaration form

8. DEMAT Account Details (refer instruction 8)

□ National Securities Depository Ltd.	Depository Participant
Central Depository Services (India) Ltd.	DP ID Number
Incompany willing the incometing Departmention	many many idea a series of the DD Otstamount analytical via to match the Demost details as stated in the series is formation formation.

Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the application form. 9. Please indicate details of your SIP (refer instruction 9) (skip this section if you wish to make a one-time investment)

Mode of SIP - Auto Debit (please submit SIP Auto Debit form) - Post-dated cheques (please provide the details below)

SIP Period (for po	st-dated cheques)	SIP Date		SIP Frequency								
SIP Starting M M Y Y Y		for Monthly/Quarterly frequency only 1 1 7 1 14 20 25	Monthly (Minimum amount R	s 1000 Every Wednesday. Minimum No of installments 5) Is 250 Minimum No of installments 20) Rs 750 Minimum No of installments 7)								
No. of PDCs	First SIP Cheque No		Last SIP Cheque	No								
Each SIP Amount Rs		Refer Gui	ide to investing through SIP									
10. Nominee (available	only for individuals) (ref	er instruction 10)	n to nominate the following	person(s)								
Address: Proportion (%)* in which nominee% If nominee is a minor: Date of birth: Name of Guardian: Address of Guardian: * Proportion (%) in which units will	Name: Name: Address: Addre											
1st / Sole App	olicant / Guardian	2nd Applica	nt	3rd Applicant								
Received From Mr./Mrs./M	ls	s Road, Chennai - 600 014. Toll Free 1800 100		Serial No: EQ								
Services Limited, Registra	ar and Transfer Agents, Unit:	Sundaram Mutual Fund, Central P 600 032, Toll Free 1800 103 7237 (rocessing Center, RR Towers,	ISC's Signature & Stamp								

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11. Declaration, Certification & Signature (refer instruction 11)

Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN exempt category of investors). 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.

Applicable to NRIs only: Please (\checkmark) \Box I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account on a \Box Repatriation Basis \Box Non-Repatriation Basis. I/We further declare that I/We am/are not a citizen of Canada.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities, other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

Certification: I/We have understood the information requirements of this Form (read along with the FATCA-CRS Instructions), stated in pages 1-30 and hereby certify 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.

I/We agree to indemnify Sundaram Asset Management Company Limited in respect of any false, misleading, inaccurate and incomplete information regarding my/our "U.S. person" status for U.S. federal income tax purposes. or in respect of any other information as may be required under applicable tax laws.

cond Applicant Name of Third Applicant
Second Applicant Signature of Third Applicant

Place:....

FATCA-CRS Instructions

Details under FATCA-CRS/Foreign Tax Laws: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income Tax Rules 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. 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/appointed agencies. If you have any questions about your tax residency, please contact your tax advisor. Should there be any *change in any information provided by you, please ensure you advise us* promptly, *i.e., within 30 days*. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

If you are a US citizen or resident or greencard holder, please include United States in the Country of Tax Residence field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation with supporting doucments and attach this to the form.

			Particulars	
Scheme Name / Plan / Option / Sub-option	Goal	Cheque / DD / Payment Instrument Number / Date	Drawn on (Name of Bank & Branch)	Amount in figures (₹) & Amount in words
	Lumpsum Purchase			