MUTUAL FUNDS Aditya Birla Sun Life Mutual Fund



PROTECTING INVESTING FINANCING ADVISING

Common Application Form For Resident Indians and NRIs/FIIs/FPIs (Please read the instructions before filling up the form. All sections to be completed in english in black / blue coloured ink and in block letters.) Distributor Name & ARN/ RIA No. Sub Broker Name & ARN/ RIA No. Sub Brol er Code Employee Unique ID. No. (EUIN) Application No. 17337619 EUIN is mandatory for "Execution Only" transactions. Ref. Instruction No. 9 L/we hereby confirm that the EUIN box has been intentionally left blank my me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriat eness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker. First Applicant / Authorised Signatory Second Applica Transaction Charges for Applications routed through Distributors/agents only (Refer Instruction 1 viii)) In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor) o Existing Unitholder please fill in your Folio No., Name & Ernall JD and then proceed to Section 5 (As plicable details and Mode of holding will be as per the existing Polio No.) Existing Folio No. 1. FIRST / SOLE APPLICANT INFORMATION (MANDATORY) (Refer Instruction No. 2,3,4) Fresh / New Investor fill in a I the blocks (8) In case of investment "On behalf of Mipor", Please Refer Instruction no. 2(ii) Mr. Ms. M/s (as per PAN/ Aadheer Card)# PAN / PEKRN (Mandatory) Birth* Card Number Name of the Second Applicant Ms. M/s. (as per PAN/ Aadhaar Card)# PAN / PEKRN (Mandatory) Date of Birth* AADHAR CK C Card Number Name of the Third Applicant Mr. Ms. M/s. (as per PAN / Aadhaar Card)# PAN / PEKRN (Mandatory) Date of Birth AADHAR CKYC Card Number Number Name of the Guardian (as per PAN/ Aadhaar Ca rd)# (In case First / Sole Applicant is minor) Poa Holder (In case of Non-individua Ms. M/s. PAN / PEKRN (Mandatory) ate of Birth** AADHAR KYC Numbe Relationship of Quardiar (Refer Instruct (HY) ISD CODE #The application is liable to get rejected if TELL RESI does not match with PAN card/ Aadhar card Proof of the Relationship with Minor** ** Mandatory in case the First / Sole Applicant is Minor Tax Status [Please tick (/)] (Applicable for First / Sole Applicant) NRI - NRO Resident Individual HUF Club / Society ☐ PID Body Corporate ☐ Minor Government Body ☐ Trust ☐ NRI - NRE Bank and FI Sole Proprietor Partnership Firm □ OF Prevident Fund Others Acknowledgement Stip (To be filled in by the investor) Common Application Form Application No. Collection Centre / 17337619 ABSLAMC Stamp & Signature Received from Mr. / Ms. Date : NECS*Form ☐ Yes ☐ No

Aditya Birla Sun Life AMC Limited

(Formerly known as Birla Sun Life Asset Management Company Limited)

Regn. No.: 109. Regd Office: One Indiabulls Centre, Tower 1, 17th Foor, Jupiter Mill Compbund, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai - 400013
+91 22 4556 7000 | care.mutualfunds@adityabirlacapital.com | www.adityabirlesunlifemf.com | CIN: U65991 MH1994PLC080811

Contact Us: 1800-270-7000

adityabirlacapital.com



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DECLARATION(S) & SIGNATURE(S) (Refer Instruction No. 1)



The Trustee,

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, 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 Ltd. 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 Ordinary/FCNR account. (Refer inst. No. 6)

I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Aditya Birla Sun Life AMC Ltd. (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.adityabirlacapital.com and hereby undertake to be 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

"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

I/We hereby provide my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA.

I/We hereby provide my/our consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios.

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. 14)

पालान अही

Signature of First Applicant / Authorised Signatory

Signature of Second Applicant

Signature of Third Applicant

CONFIRMATION CLAUSE

I/We hereby give consent to the Company or its Authorized Agents and third party service providers to use information/data provided by me to contact me through any channel of communication including but not limited to email, telephone, sms, etc. and further authorise the disclosure of the information contained herein to its affiliates/group companies or their Authorized Agents or Third Party Service Providers in order to provide information and updates to me on various financial and investment products and offering of other services. I/We agree that all personal or transactional related information collected/provided by me can be shared/transferred and disclosed with the above mentioned parties including with any regulatory, statutory or judicial authorities for compliance with any law or regulation in accordance with privacy policy as available at the website of the Company. 🔲 Yes 🔲 No

PRINT period oral.

VALUE ADD

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

- 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.
- 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

* 4 पालान 241019-41 EUR 2 पालामा Point देश असे माम्ययुं. * 2018 21184: - a) Aadhal Cand 2noi Pan card Copy
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b) Form (c) d) cheque histog. (FORM- B)

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are man	latory fields	KYC Type* [Normal (page)
1. Identity Details (Please	refer instruction A at the en	KYC Type* Normal (PAN is nandatory) PAN Exempt Investors (Refer instruction K)
PAM*		
		Please enclose a duly attested copy of your PAN Card
Name* (same as ID proof)	Prefix	First Name Middle Name Lock Name
Maiden Name (If any*)		Middle Name Last Name
Father / Spouse Name*		
Mother Name*		
Date of Birth*	DD-MM-XT	VIV.
Gender*	M- Male	Photo
Marital Status*		F- Female Transgender
	Married	Unmarried Others
Citizenship*	L IN- Indian	Others - Country
Residential Status*	Resident Individual	Non Resident Indian
Occupation Type*	Foreign National	Person of Indian Origin
occupation Type		e Sector Public Sector Government Sector
	O-Others Profess B-Business	Self Employed Retired Housewife Student
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(Certified copy of any one of the	re following Proof of Identify in	X-Not Categor sed If PAN card copy not provided) (Please refer instruction C & K at the end)
A- Passport Number		
B- Voter ID Card		Passport Expiry Date D D M M Y Y Y Y
D- Driving Licence		Manufacture Lands and Land
E- Aadhaar Card		Driving Licence Expiry Date D D M M Y Y Y Y
F- NREGA Job Card		
Z- Others (any documer	t notified by the central of	and a second
3. Proof of Address (PoA)*	/ January	(dentification Number
	Overseas A.I.I.	
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Line 2		
Line 3:		
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State/UT*		State/UT Code as per Indian Motor Volvida
Address Type* Res	idential / Business	Country Code Country Code
Certified copy of any one of	the following Proof of Arle	Residential Business
	1	Idress [PoA] needs to be submitted) Registered Office Unspecified
Passport Number		
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Aadhaar Card		Driving Licence Expiry Date D D M M Y Y Y Y
NREGA Job Card		
Others (any document not	fied by the central govern	roment)
J 3.2 Correspondence / Local	Address Datellat (D)	identification Number
ame as Current / Permaner	t / Overseas Address det	Atails (In case of multiple correspondence / local addresses, please fill 'Annexure A1', Submit relevant documentary prod
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ne 3		+++++++++++++++++++++++++++++++++++++++
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ate/UT*		State/OT Gode 14 1 as a set at
ate/UT*		Country* Code as per Indian Motor Vehicle Act, 1988 Country Code as per ISO 3166

	a communications will be sent on provided Mobile no. / Emi	ail-ID) (Please refer instruction F at the e	end)
. Contact Details (A CAMPALINICATIONS WILL BE SELLE OF PROVIDED WHEELER		
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Additional Catalis	Remarked* (Mandatory only if above option (5) is ticked	Country Code of Jurisdiction of Re	sidence as per ISO 3166
Country of Jurisdi	ction of Residence*	TITITITI	
Tax Identification	humber or equivalent (If issued by jurisdiction)		Country Code as per ISO 310
Place / City of Bir		m L L d 2 d d d d d d d d d d d d d d d d	
Address	- FILLER CITY		
Line 1*			LIVIU - SON
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State/UT*	on (Optional) (please refer instruction G at the end)	(in case of additional related persons,	rease fill 'Annexure B1')
o. Dotains	KYC Num	iber of Related Person (il available)	Land I militaria and a second a
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Related Person Ty	Prefix First Name	Middle Name	
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/	(If KYC number and name are provided, below details of	e end)	
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I hereby contact	Principle of the state of the s		Signature / Thumb Impression of Applicant
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