

1. DISTRIBUTOR INFORMATION (Please read the instructions before investing)

Broker Name & ARN code	Sub-broker ARN code	Sub-broker code	Employee Unique Identification No.	For office use
24863			E043887	

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

Declaration for "execution only" transaction (only where EUIN box is left blank) (Refer instruction 1(h) on page 57)
I/We hereby confirm that the EUIN box has been intentionally left blank by 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-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Sole / First applicant	Second applicant	Third applicant	Third party cheque issuer

2. INFORMATION OF EXISTING UNIT HOLDER (For existing investor. Unless details in sections 3 - 4 have changed, please go directly to section 5. Note that applicant details and mode of holding will be as per existing folio number)

Folio no. _____ Employee SID _____
(for employees of J.P. Morgan only)

3. APPLICANT INFORMATION

Gross Annual Income Details [Please tick (✓)]: Below ₹ 1 Lac ₹ 1-5 Lacs ₹ 5-10 Lacs ₹ 10-25 Lacs > ₹ 25 Lacs
[OR] Net-worth in ₹ _____ Net-worth should not be older than 1 year as on (date) _____ D D M M Y Y Y Y

Please tick if applicable (✓): Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)

Occupation [Please ✓]: Private Sector Service Public Sector Service Business Professional Agriculturist Retired Housewife Student Doctor
 Forex Dealer Government Service Others [Please specify] _____

Status [Please ✓]: Resident Individual Resident Minor (through Guardian) HUF Non-Resident (Repatriable) Non-Resident (Non-Repatriable) Non-Resident - Minor (Repatriable) Non-Resident - Minor (Non-Repatriable) FII FPI Sole-Proprietor Private Limited Company Public Limited Company Body Corporate Partnership Firm Trust Fund of Fund Gratuity Fund NPS Trust Pension and Retirement Fund FIs AOP Bank Government Body NGO BOI Society LLP PIO Non Profit Organisation Global Development Network Others [Specify] _____ Foreign Nationals [Specify category] _____

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY [Please refer instruction 1(l) on page 57 and (✓) any one]
 I confirm that I am a **First time** Investor across Mutual Funds (₹150 deductible as Transaction Charge and payable to the Distributor).
 I confirm that I am an **Existing** investor in Mutual Funds (₹100 deductible as Transaction Charge and payable to the Distributor).

In case the purchase / subscription amount is ₹10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the investment amount and payable to the Distributor. Units will be issued against the balance amount invested.

Name of first applicant _____ Date of Birth* _____
Mr. Ms. M/s. _____ D D M M Y Y Y Y

Name of guardian (in case of minor) **Relationship:** Father Mother Legal Guardian *In case where PAN is not provided, providing date of birth is mandatory or else the application is liable to be rejected.
Mr. Ms. _____

Name of Contact person (In case of institutional investors)
Mr. Ms. _____

Designation of the contact person _____

Name of second applicant
Mr. Ms. _____

Name of third applicant
Mr. Ms. _____

Address of sole / first applicant (Please provide full address) (In case of NRIs/FIIs please provide overseas address - **Mandatory** P.O. box no. may not be sufficient)

City _____ Pin _____
State _____ Country _____

Overseas address (Please provide full address. P.O. box no. may not be sufficient) (**Mandatory for NRIs / FIIs / PIO**)

City _____ Pincode _____ Country _____

Communication
Tel. (R) / Mobile no. _____ Tel. (O) _____ Fax no. _____
E-mail _____ R E Q U I R E D

I/We would like to receive the following documents through post instead of e-mail (Kindly ✓)
 Account statement Newsletter Quarterly review & annual report Other statutory information

Mode of holding [Please tick (✓)]
 Single Joint Anyone or survivor (default)

Permanent Account Number (PAN) [Mandatory]

First applicant	M A N D A T O R Y	<input type="radio"/> KYC compliant	Guardian	M A N D A T O R Y	<input type="radio"/> KYC compliant
Second applicant	M A N D A T O R Y	<input type="radio"/> KYC compliant	Third applicant	M A N D A T O R Y	<input type="radio"/> KYC compliant

4. BANK ACCOUNT DETAILS (Mandatory. The application will be rejected if this section is left blank. Please provide the details of the sole / first applicant). (Refer instruction no. 3 on page 58)

Bank particulars (Name of the bank) _____ Branch _____

Branch address _____ City _____

Account number _____ **Account type** Current Savings NRO NRE FCNR

RTGS or NEFT - IFSC code _____ 9 digit MICR code _____

Direct credit facility (please refer to the list of banks that offer direct credit facility on page 58). However, if you wish to receive a cheque payout, please tick here (✓)

Electronic Clearing Services (ECS) facility is available for receiving dividends. If you wish to avail of this facility, please tick here (✓)

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Received from: Mr. / Ms. _____

Application for units of: **JPMorgan** _____ Plan _____

Option (please ✓): Growth Dividend reinvestment Dividend payout Daily* Weekly*
 Fortnightly* Monthly* Yearly* Bonus* Annual Dividend* * as applicable

Cheque / D.D. no. _____ for ₹ _____ dated _____

Drawn on bank _____

Application no.