IDBI mutual

Mafatlal Centre, 5th Floor, Nariman Point, Mumbai - 400 021
Website: www.idbimutual.co.in

Common Application Form

Distributor ARN	Sub Distributor ARN	Internal sub Code / SoI ID	Employee Code	EUIN@	Serial No. / Date, Time & Stamp
29333				E045902	

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. In case purchase/subscription amount is Rs. 10,000/- or more and the investor's Distributor has opted to receive "Transaction Charges" the same are deductable as applicable from the purchase/ subscription amount and payable to the distributor. Units will issued against the balance amount invested.

@ ☐ 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.

Signatures	First / Sole Applicant / Guardian	Second Applicant	Third Applicant

1. EXISTING UNIT HOLDER INFORMATION

Folio No. _____ **[Please fill in Folio No. & name of 1st unit holder and proceed to Investment Details]**

2. APPLICANT'S PERSONAL DETAILS (MANDATORY)

Mode of holding (Please ✓) ☐ Anyone or Survivor ☐ Single ☐ Joint (Default option is Anyone or Survivor for Joint holding)

Name of First/Sole Applicant/Minor*

(as appearing in ID proof) Gender **(Please ✓)** ☐ Male ☐ Female ☐ Other Date of Birth D D M M Y Y Y Y

PAN (Attach Proof) CKYC No.

Father's Name CKYC (Please ✓) ☐ Proof Attached

Status (Please ✓) **Please attach mandatory "Ultimate Beneficial Ownership (UBO) including additional FATCA & CRS information" Form]**

☐ Resident Individual ☐ NRI / PIO ☐ Trust ☐ HUF ☐ Bank / FIs ☐ Sole Proprietorship ☐ Minor ☐ Company/Body Corporate
☐ FIIs ☐ Partnership Firm ☐ AOP / BOI ☐ Society ☐ Other _____ (Please Specify)

Occupation (Please ✓) ☐ Private Sector Service ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Other (Please Specify)

Gross Annual Income Details (Please ✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ >5-10 Lacs ☐ >10-25 Lacs ☐ >25-1 Crore ☐ >1 Crore

Net-worth in ₹ _____ (* Net worth should not be older than 1 year) as on (date) D D / M M / Y Y Y Y (Not older than 1 year)

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors) ☐ I am PEP ☐ I am Related to PEP ☐ Not Applicable

Non-Individual Investors involved / providing any of the mentioned services ☐ Foreign Exchange/Money Changer Services ☐ Money Lending/Pawning ☐ Gaming/Gambling/Lottery/Casino Services ☐ None of the above

Correspondence Address (Please provide full Address)		**Overseas Address (Mandatory for NRI / FII Applicants)**	
HOUSE FLAT NO.		HOUSE FLAT NO.	
STREET ADDRESS		STREET ADDRESS	
CITY/TOWN	STATE	CITY/TOWN	STATE
COUNTRY	PINuCODE	COUNTRY	PINCODE

Tel. (Off.) Tel. (Res.)

EMail: Mobile

Name of the Guardian#/contact person for non-individual

PAN (Attach Proof) CKYC No.

Nationality CKYC (Please ✓) ☐ Proof Attached

Relationship with Minor Please (✓) ☐ Mother ☐ Father ☐ Legal Guardian

* If the first/sole applicant is a Minor, then please provide details of Natural / Legal Guardian. # In case first applicant is a minor

Name of Second Applicant

(as appearing in ID proof) Gender **(Please ✓)** ☐ Male ☐ Female ☐ Other Date of Birth D D M M Y Y Y Y

PAN (Attach Proof) CKYC No.

Father's Name CKYC (Please ✓) ☐ Proof Attached

Status (Please ✓) **Please attach mandatory "Ultimate Beneficial Ownership (UBO) including additional FATCA & CRS information" Form]**

☐ Resident Individual ☐ NRI / PIO

Occupation (Please ✓) ☐ Private Sector Service ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Other (Please Specify)

Gross Annual Income Details (Please ✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ >5-10 Lacs ☐ >10-25 Lacs ☐ >25-1 Crore ☐ >1 Crore

Politically Exposed Person (PEP) Status ☐ I am PEP ☐ I am Related to PEP ☐ Not Applicable

Name of Third Applicant

(as appearing in ID proof) Gender **(Please ✓)** ☐ Male ☐ Female ☐ Other Date of Birth D D M M Y Y Y Y

PAN (Attach Proof) CKYC No.

Father's Name CKYC (Please ✓) ☐ Proof Attached

Status (Please ✓) **Please attach mandatory "Ultimate Beneficial Ownership (UBO) including additional FATCA & CRS information" Form]**

☐ Resident Individual ☐ NRI / PIO

Occupation (Please ✓) ☐ Private Sector Service ☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Other (Please Specify)

Gross Annual Income Details (Please ✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ >5-10 Lacs ☐ >10-25 Lacs ☐ >25-1 Crore ☐ >1 Crore

Politically Exposed Person (PEP) Status ☐ I am PEP ☐ I am Related to PEP ☐ Not Applicable

Acknowledgement slip

Scheme Name : _____ Option: _____ Sub Option: _____

Received from Mr. / Ms. /M/s. _____

Cheque / DD No. : _____ Date : _____ Amount Rs.: _____

Stamp, Signature & Date

3. BANK ACCOUNT DETAILS OF FIRST / SOLE APPLICANT - MANDATORY (For multiple banks registration please submit the Multiple Bank Registration Form)

Name of the Bank		Branch Address	
		Bank Branch City	
State		Pin Code	
Account No.		A/C. Type (Please ✓) ☐ Savings ☐ NRE ☐ Current ☐ NRO ☐ FCNR	
9 digit MICR Code	11 digit IFSC Code		
Please attach a cancelled cheque OR a clear photo copy of a cheque		(Mandatory for credit via NEFT/RTGS)	

4. ☐ UNITS IN DEMAT MODE (Please ✓) ☐ NSDL ☐ CDSL

DP ID		Beneficiary Account No./Client ID	
DP Name			

Note: Please attach the depository transaction statement or DP master data indicating the DP account number of the applicant. Please ensure that sequence of Names as mentioned in the Application Form and matches with that of the account held with the DP.

5. POWER OF ATTORNEY (PoA)

POA Name

PAN | KYC ☐ Yes ☐ No - if investment is being made by a constitutional Attorney, please submit the notarized copy of the POA

6. INVESTMENT DETAILS AND PAYMENT DETAILS - Cheque/DD/RTGS/NEFT/Transfer (investors are requested to not to submit outstation cheque to avoid delay in processing the application). Please ✓ wherever applicable.

Scheme Name#: _____ **Plan:** ☐ Regular ☐ Direct **Option:** ☐ Growth ☐ Dividend

Sub-option / Frequency of Dividend: _____ **Mode of dividend:** ☐ Payout ☐ Re-investment ☐ Sweep

Sweep: To Scheme _____ Plan _____ Option

If you wish to choose Growth with Regular Cash Flow Plan (RCFP) option under IDBI Monthly Income Plan, please also fill in the separate form available on our website www.idbimutual.co.in

Only for IDBI Gilt Fund: Fixed Tenor Trigger (FTT) Plan : Automatic redemption after ☐ 1 year ☐ 3 years ☐ 5 years ☐ 7 years ☐ 10 years

Investment Amount (Rs.) _____ DD Charges if any (Rs.) _____ Net Amount (in words) _____

Mode of Payment (Please ✓) ☐ Cheque ☐ DD ☐ Funds Transfer ☐ RTGS/NEFT ☐ NACH (*Please refer to point No. 6 of General Instructions)*

UMRN *(Mandatory where mode of payment selected is 'NACH')*

Drawn on Bank			
Branch & City		Account No.	
Chq. /DD No.	Date D D M M Y Y Y Y	IFSC Code	

A/c Type - ☐ S/B ☐ NRE ☐ Current ☐ NRO ☐ FCNR*

*Kindly provide photocopy of the payment Instrument or Foreign Inward Remittance Certificate (FIRC) evidencing source of funds

Cheque / D.D. to be crossed "Account Payee" only and should be drawn payable to: - "IDBI Scheme Name A/C XXXXXXX" (Investor PAN) or "IDBI Scheme Name A/C XXXXXXX" (Name of the First holder)

7. NOMINATION DETAILS [Minor / HUF / POA Holder / Non Individuals Cannot Nominate]

I / We _____ do hereby nominate the undermentioned Nominee(s) to receive the units to my / our credit in this folio no. in the event of my / our death. I / We also understand that all payments and settlements made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustees.

No.	Nominee(s) Name	% of Share*	Date of Birth (in case of Minor)	Nominee(s) Signature
1			D D M M Y Y Y Y	
2			D D M M Y Y Y Y	

No.	Name of the Guardian (In case Nominee is Minor)	Nominee(s) Signature
1		
2		

* If the percentage of share is not mentioned then the claim will be settled equally amongst all the indicated nominee(s)

☐ I/We do not wish to nominate anybody on my/our behalf. | **Signature of the Declarant**

8. DECLARATION

I / We have read and understood the contents of the SID, SAI and Key Information Memorandum (KIM) of the Scheme and information requirements of this Form and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby apply to IDBI Mutual Fund for allotment of units of the Scheme, as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I /We hereby confirm and certify that the source of these funds is not directly / indirectly a result of "proceeds of crime" as defined in "The Prevention of Money Laundering Act, 2002" and I/we undertake to provide all necessary proof / documentation, if any, required to substantiate the facts of this undertaking. I/We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I / We authorize the Fund to disclose details of my/our account and all my/our transactions to Registrar and Transfer Agent whose stamp appears on the application form. I/We also authorize the Fund to disclose details as necessary, to the Fund's and investor's bankers for the purpose of effecting payments to me / us.

Applicable to NRIs only : 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 approved banking channels or from funds in my/our Non-Resident External / Ordinary Account / FCNR /NRSR Account.

Investment in the Scheme is made by me / us on: ☐ Repatriation basis ☐ Non Repatriation basis.

Applicable to Non Direct Investors only (investments routed through ARN Holders): 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.

Signature

First / Sole Applicant / Guardian

Second Applicant

Third Applicant

IDBI mutual

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REGISTRAR & TRANSFER AGENTS
Karvy Computershare Pvt. Limited, SEBI Registration Number: INR000000221
Unit: IDBI Mutual Fund, KARVY SELENIUM, Plot No.31 & 32, Tower B, Survey No.115/22, 24 & 25, Financial Dist., Gachibowli, Nanakramguda, Serlingampally Mandal, Hyderabad - 500 032, Ranga Reddy Dist., Telengana State. Phone: 040-3321 5121 to 040-3321 5123.
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