

COMMON APPLICATION FORM FOR LUMP SUM CUM SIP

Application No. _____



Distributor / RIA Code#	ARN- Sub-Distributor Code	EUN No.	Internal Code for Sub-broker/ Employee
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#By mentioning RIA code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of IDFC Mutual Fund.
 Declaration for "execution-only" transaction (only where EUN box is left blank) (Refer Instruction No. XIII). – I/we hereby confirm that the EUN box has been intentionally left blank by me/ us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Signature of First / Sole Applicant /
Guardian / Authorised Signatory

TRANSACTION CHARGES (Please any one of the below) (Refer Instruction No. S)

I am a first time investor in mutual funds (₹ 150 will be deducted) OR I am an existing investor in mutual funds (₹ 100 will be deducted)

Applicable for transactions routed through a distributor who has 'opted in' for transaction charges. Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investors' assessment of various factors including service rendered by the distributor.

1 EXISTING FOLIO NO. _____ **2 MODE OF HOLDING / OPERATION** Single Anyone or Survivor Joint (Default option is anyone or survivor)

3 APPLICANT'S DETAILS (Please refer to the Instruction No. A, C, D, R) All fields are mandatory. **Gender** Male Female

1st APPLICANT Mr Ms M/s _____ Date of Birth** D D M M Y Y

PAN/PEKRN* _____ Aadhaar No. _____ KIN* Proof Attached _____

GUARDIAN NAME IF MINOR/CONTACT PERSON (FOR NON INDIVIDUALS)/POA HOLDER Mr Ms _____ Date of Birth D D M M Y Y

PAN/PEKRN* _____ Aadhaar No. _____ KIN* Proof Attached _____

Relationship with Minor applicant Natural guardian Court appointed guardian

2nd APPLICANT Mr Ms M/s _____ Date of Birth D D M M Y Y

PAN/PEKRN* _____ Aadhaar No. _____ KIN* Proof Attached _____

3rd APPLICANT Mr Ms M/s _____ Date of Birth D D M M Y Y

PAN/PEKRN* _____ Aadhaar No. _____ KIN* Proof Attached _____

*Mandatory information - If left blank, the application is liable to be rejected.** Mandatory in case the Sole/First applicant is minor. * Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14 digit KYC Identification Number (KIN).

4 CORRESPONDENCE DETAILS OF SOLE/FIRST APPLICANT (AS PER KYC RECORDS)

<p>Correspondence Address</p> <p>HOUSE / FLAT NO. _____</p> <p>STREET ADDRESS _____</p> <p>CITY / TOWN _____ STATE _____</p> <p>COUNTRY _____ PIN CODE _____</p> <p>Tel. No. Office _____ Residence _____ Mobile No. _____</p> <p>Email ID _____</p>	<p>Overseas Address (Mandatory for NRI / FII Applicants)</p> <p>HOUSE / FLAT NO. _____</p> <p>STREET ADDRESS _____</p> <p>CITY / TOWN _____ STATE _____</p> <p>COUNTRY _____ PIN CODE _____</p>
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All communications will be sent by default to the registered E-mail ID / Mobile No. In case you wish to receive physical communication (please here)

5 TAX STATUS (Please)

<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Foreign National	<input type="checkbox"/> Public Limited Company	<input type="checkbox"/> Government Body	<input type="checkbox"/> AOP/BOI	<input type="checkbox"/> Defence Establishment
<input type="checkbox"/> On behalf of Minor	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Private Limited Company	<input type="checkbox"/> Financial Institution	<input type="checkbox"/> Trust / Society / NGO	<input type="checkbox"/> Other _____ Specify _____
<input type="checkbox"/> HUF	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> FI	<input type="checkbox"/> Non Profit Organization/Charities	
<input type="checkbox"/> NRI	<input type="checkbox"/> LLP	<input type="checkbox"/> Bank	<input type="checkbox"/> Foreign Portfolio Investor	<input type="checkbox"/> QFI	

6 DEMAT ACCOUNT DETAILS (OPTIONAL)

NSDL: Depository Participant (DP) ID (NSDL only) _____ Beneficiary Account Number (NSDL only) _____ CDSL: Depository Participant (DP) ID (CDSL only) _____

7 BANK DETAILS (Mandatory)

Mandatory information – If left blank the application is liable to be rejected. (Mandatory to attach proof, in case the pay-out bank account is different from the source bank account.) For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

Account Number _____ Account Type Current Savings NRO NRE FCNR Others (please specify) _____

Bank Name & Branch _____

Branch City _____ IFSC Code _____ (11 digit) MICR Code _____ (9 digit)

IDFC MUTUAL FUND - ACKNOWLEDGMENT SLIP (To be filled in by the investor.) **Application No.** _____

Received, subject to realisation, verification and conditions

From _____ Stamp & Signature _____

8 FATCA AND CRS DETAILS FOR INDIVIDUALS (including Sole Proprietor) (Mandatory)

Non-Individual investors should mandatorily fill separate FATCA Form (Annexure II). The below information is required for all applicants / guardian

Table with columns: Place/City of Birth, Country of Birth, Country of Citizenship / Nationality. Rows for First, Second, and Third Applicant.

Are you a tax resident (i.e. are you assessed for tax) in any other country outside India? YES NO (please tick ✓)

If "YES" please fill for ALL countries (other than India in which you are a Resident for tax purpose i.e. where you are a Citizen/ Resident/ Green Card holder/ Tax Resident in the respective countries.

Table with columns: Country of Tax Residency, Tax Identification Number or Functional Equivalent, Identification Type (TIN or other please specify), Identification Type (TIN or other please specify). Rows for First, Second, and Third Applicant.

- Reason A -> The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.
Reason B -> No TIN required (Select this reasons Only if the authorities of the country of tax residence do not require the TIN to be collected)
Reason C -> Others please state the reasons thereof:

Table with columns: Address Type of Sole /1st Holder, Address Type of 2nd Holder, Address Type of 3rd Holder. Options: Residential, Registered Office, Business.

Annexure I and Annexure II are available on the website of AMC i.e. www.idfcmf.com or at the Investor Service centres (ISCs) of IDFC Mutual Fund

9 INVESTMENT & PAYMENT DETAILS (Please refer to the Instruction No. E & J) (Please refer SID for Plans and Sub-options)

Scheme IDFC Plan Option
Mode of payment Self Third Party Payment Payment mode Cheque DD IDFC OTM Fund Transfer RTGS/NEFT
Amount (figures) Cheque/DD/UTR/UMR No. Cheque Date
Account No. Account Type Saving Current NRO NRE FCNR Others
Bank & Branch Name

10 NOMINATION DETAILS Individuals (single or joint applicants) are advised to avail Nomination facility. I/We wish to nominate I/We DO NOT wish to nominate and sign here

Table with columns: Nominee Name & Address, In case of Minor Guardian Name & Address Date of birth Allocation % Relationship with Investor Nominee/ Guardian sign. Rows for Nominee 1, 2, 3.

11 KYC DETAILS (Mandatory)

OCCUPATION [Please tick ✓]

Table with columns: Private Sector Service, Public Sector Service, Government Service, Business, Professional, Agriculturist, Retired, Housewife, Student, Forex Dealer, Others. Rows for First, Second, and Third Applicant.

GROSS ANNUAL INCOME [Please tick ✓]

Table with columns: Gross Annual Income options (Below 1 Lac, 1-5 Lacs, 5-10 Lacs, 10-25 Lacs, >25 Lacs-1 crore, >1 crore), OR Net worth (Mandatory for Non-Individuals) ₹ as on. Rows for First, Second, and Third Applicant.

OTHERS [Please tick ✓]

Table with columns: First Applicant / Guardian, Second Applicant, Third Applicant. Options: Politically Exposed Person (PEP)^, Related to Politically Exposed Person (RPEP), Not applicable.

12 DECLARATION & SIGNATURES (Please refer to the Instruction No. K)

I/ We have read, understood and agree to comply with the terms and conditions of the Statement of Additional Information, Scheme Information Documents and Key Information Memorandum of the Scheme(s), Foreign Account Tax Compliance Act and Common Reporting Standards, statutory requirements prescribed by SEBI, AMFI, Prevention of Money Laundering Act, 2002 (PMLA) and all applicable rules and regulations and hereby confirm that I/We have not received nor been induced by any rebate or gifts, directly or indirectly, to make this investment.

Table with columns: First / Sole Applicant / Guardian / Authorised Signatory, Second Applicant, Third Applicant.

Table with columns: Instrument No., Dated, Amount (Rs.), Scheme.