## **COMMON APPLICATION FORM** For all schemes of Bajaj Finserv Mutual Fund



## Application No.

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

Please read the instructions and refer to SID, KIM and Addendums issued for the respective schemes and SAI of Bajaj Finserv Mutual Fund.

1. DISTRIBUTOR INFORMATION*					(Please Refer instruction no. 1)
Broker Code/	Sub Broker /Agent's	Bank Branch Code	Internal Code for Sub - Agent / Employee	EUIN*	ISC Date Timestamp
ARN / RIA** / PMRN** Code	ARN Code		Sub - Agent / Employee		Reference No.
**By mentioning RIA/PMRN code, I/We authone scheme (s) of Bajaj Finserv Mutual Fund. ( N in the Declaration & Signatures section ov	rize you to share with the Investr Please ✓ if applicable) *In case th	nent Adviser / Portfolio M ne EUIN box has been left	anager the details of my/our blank, please refer the point re	transactions elated to	
n in the Declaration & Signatures section over ributor, based on the investor's assessment	of various factors, including the s	service rendered by the di	by the investor to the AMFI re stributor.		MODE (Default) DEMAT MODE* , please fill section 10 )
. TRANSACTION CHARGES FOR AF	PPLICATIONS THROUGH D	ISTRIBUTORS ONLY	/* (Please ✓ any one of t	:he below)	(Please refer instruction no. 2)
I confirm that I am a First time inve	stor in Mutual Funds. OR 🗌	I confirm that I am	an existing investor in M	utual Funds.	
S. MODE OF HOLDING	Leding should be some as	in Domot Account)			(Please refer instruction no. 6)
In case of Demat Purchase, Mode of	Holding should be same as	in Demat Account)	Single Jo	int (Default) 🗌 Anyoi	ne or Survivor
A APPLICANT'S NAME AND INFOR	MATION (Mandatory) to be	filled in block letters			(Please refer instruction no. 4)
Folio No.	(For Exi	sting unit holders)	Gender	Male 🗌 Female 🗌 Ot	hers
Name of Sole / 1st Applicant Mr. /	Ms / M/s	-			
PAN/PEKRN	CKYC No.			Date of Birt	h D D M M Y Y Y Y
Mobile No.		Email ID			
The Email ID belongs to (Mandatory Please 🗸)	Self Spouse Depe	ndent Children 🗌 De	ependent Siblings 🗌 Dep	oendent Parents 🗌 Guar	dian 🗌 PMS 🗌 Custodian 🗌 PO.
he Mobile No. belongs to (Mandatory Please		ndent Children 🗌 De	ependent Siblings 🗌 Dep	pendent Parents 🗌 Guar	dian 🗌 PMS 🗌 Custodian 🗌 PO
he default Communication mode is E-mail only,					ged summary Other Statutory Informatio
Ve would recommend you to choose an onl	ine mode to help us save paper a	& contribute towards a g	reener & cleaner environmer	nt.)	
			Valid upto D M	(Legal I M Y Y Y Y transac	Entity Identifier Number is Mandatory for tion value of INR 50 crore and above for
LEI Code				Non-Ind	dividual investors. Refer instruction no. 4a
Tax Status	dual NRI-Repatriatio	n 🗌 NRI-Non Repa	triation 🗌 Partnership	Trust 🗌 HUI	F AOP
(Mandatory, Please🗸 ) 🗌 Minor through	guardian Company		PIO		eiety/Club 🗌 Sole Proprietorship
🗆 Non Profit Urga	anisation 🗌 Financial Institu		Bank	Others	
GUARDIAN DETAILS (In case First /	Sole Applicant is minor) /	CONTACT PERSON	- DESIGNATION / POA	HOLDER (In case of No	on- Individual Investors)
Mr. / Ms.		Des	signation/Relationship	with Minor	
PAN	CKYC No.			Gender	_ Male Female Other
Mobile No.		Email ID			
Date of Birth Proof for minors (Any			<b>.</b>	<b></b>	
Birth Certificate Marks She	et (HSC/ICSE/CBSE) 🔄 S	School Leaving Cert	ificate Passport	Others	
5a. MAILING ADDRESS					
Local Address of 1st Applicant					
				Stata	
Pin Code				Tel. Off	
5b. OVERSEAS CORRESPONDENCE AI	DDRESS (Mandatory for NRI	/ Fll Applicant)			
Please provide Full Address. P. O. Bo	x address is not sufficient]_				
				2	Zip Code:
Fel. Resi.	Tel. Off.			Mobile No	
%					>%
Acknowledgement Slip (To be filled in BAJAJ FINSERV ASSET MANAGEME		Solitaire Rusiness Pa	rk (formerly Marvel Edge)	Viman Nagar, Pupe 411014	
Received from Mr. / Ms					
			Dale:	-//	Bajaj AMC Stamp & Signature
Application No.					

6a. SECOND APPLICANT'S DETAILS* (In case of Minor, there shall be no joint holders) [Name and DOB shall be as per PAN Card]										
Name Mr. / Ms.										
PAI	N		CKYC No.		Gender	] Male 🗌 Female 🗌 Others				
Mobile No. Email ID										
	The Email ID belongs to (Mandatory Please  ) Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian PMS Custodian POA         The Mobile No. belongs to (Mandatory Please  ) Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian PMS Custodian POA									
	Tax Status         (Mandatory, Please ✓)       □         Resident Individual       □         NRI-Repatriation       □         NRI-Non Repatriation       □									
6b.	. THIRD APPLICA	NT'S DETAILS* (In case of Mir	or, there shall be no joint ho	olders) [Name and DOB shall	be as per PAN Card]					
Na	me Mr. / Ms.									
PA	PAN									
Мо	bile No.			Email ID						
				· · · · · · · · · · · · · · · · · · ·	Dependent Parents 🗌 Guardia Dependent Parents 🗌 Guardi					
	Tax Status         (Mandatory, Please ✓)         □       NRI-Repatriation         □       NRI-Non Repatriation									
7. 1	<b>(YC Details</b> (Man	datory)			(1	Please refer instruction no. 4e)				
Fir	st Applicant:	<ul> <li>Private Sector Service</li> <li>Housewife</li> </ul>	Public Sector Service         Student		Business  Professional Chers (please specify)	Agriculturist 🗌 Retired				
Se	cond Applicant:	<ul> <li>Private Sector Service</li> <li>Housewife</li> </ul>	Public Sector Service		Business  Professional Chers (please specify)	Agriculturist 🗌 Retired				
Thi	ird Applicant:		Public Sector Service		Business Professional Dithers (please specify)	Agriculturist 🗌 Retired				
Gre	oss Annual Incon	ne								
Fir	st Applicant:		5 Lacs □ 5-10 La dividuals) ₹ (please specify)		>25 Lacs-1 crore as on D D M M Y Y	<ul><li>&gt;1 crore</li><li>(Not older than 1 year)</li></ul>				
Se	cond Applicant:		5 Lacs □ 5-10 La dividuals) ₹ (please specify)	cs 🗌 10-25 Lacs	>25 Lacs-1 crore as on D D M M Y Y	>1 crore       Y     Y       (Not older than 1 year)				
Thi	ird Applicant:		5 Lacs □ 5-10 La dividuals) ₹ (please specify)		>25 Lacs-1 crore	>1 crore Y Y (Not older than 1 year)				
Fo	r Individuals					Please refer instruction no. 4d)				
Fire	st Applicant:	I am Politically Exposed Per	rson (PEP) 🗌 I am Relate	ed to Politically Exposed Per	son (RPEP) 🗌 Not applicable					
See	cond Applicant:	I am Politically Exposed Per	son (PEP) 🗌 I am Relate	ed to Politically Exposed Per	son (RPEP) 🗌 Not applicable					
Thi	ird Applicant:	I am Politically Exposed Per	son (PEP) 🗌 I am Relate	ed to Politically Exposed Per	son (RPEP) 🗌 Not applicable					
Fo	r Non Individuals	, if involved in any of the below	w mentioned services, plea	ase $\checkmark$ the appropriate opti	on:					
(i)	Foreign Exchange	e / Money Changer Services 🗌 Y	es 🗌 No 🛛 (ii) Gaming / G	ambling / Lottery / Casino Se	ervices 🗌 Yes 🗌 No 🛛 (iii) Money	Lending / Pawning 🗌 Yes 🗌 No				
8.1	BANK ACCOUNT D	ETAILS FOR PAYOUT (Please a	ttach copy of cancelled che	que)		(Please refer instruction no. 5)				
Nar	ne of the Bank									
Account No.										
Bank Branch Address										
Bank City State Pincode										
міс	MICR Code (9 digits) STATE STA									
					Payment I	≫ Details				
Sr. No.	Scheme	Name /Plan	Option	Net Amount Paid (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch				
1	Bajaj Finserv	Direct	Growth IDCW Payout							

9. INVESTMENT & PAYMENT DETAILS* T	he name of the first/ sole applica	nt must be pre-printed	on the cheque.		(Please refe	er instruct	ion no. 7)	
Scheme Name	Plan			Option				
		Growth (Defau	ITJ					
	🗌 Regular Plan 🗌 Direct Pla	an DCW Reinvest	ment (Default f	or IDCW)				
		IDCW Frequency -		(Pi	ease refer to SID for the I	CW Frequence	y & Option)	
Payment Type ( Please √ )	🗌 Non-Thir	d Party	Third Party Payment (PIs fill third party declaration fo			tion form)		
Mode of Payment		sum			SIP*			
Amount (INR)								
Mode of Payment ( Please ✓ ) │ Cheque / DD │ NEFT / RTGS	Cheque / DD No	o. / UTR No.		Cheque / DD No. / UTR No.				
Drawn on Bank and A/c no								
Date								
Cheque/DD should be drawn in favour of scheme name e.g. "Bajaj Finserv Liquid Fund"								
*If you wish to register SIP, kindly fill the re	evant SIP Registration & OTM De	bit Mandate Form.						
Reason for investment House Ch		•		Others (please spec	ify)			
<b>Investment horizon</b> Please ( $\checkmark$ ) anyone			25 Years					
		EMAT MODE*			(Please refe			
*Demat Account details are mandatory if the applicants matches as per the Depository [							9	
National Securiti	es Depository Limited		Cer	ntral Depository Servi	ces (India) Limited			
DP Name		DP Name						
DP ID IN Beneficia	ary A/c No.	Beneficiar	y A/c No.					
Enclosures - Please (✓) □ Client Master	s List (CML) 🗌 Transaction cu	m Holding Statement	Delivery Ins	truction Slip (DIS)				
11. FATCA AND CRS DETAILS FOR INDIVI	DUALS (Including Sole Prop	rietor)			(Please refe	er instruct	ion no. 9)	
Non-Individual investors should mandatoril	y fill separate FATCA and Ultimate	e Beneficial Ownership (	UBO) Form. T	he below informatior	is required for all a	pplicants/	guardian	
Particulars Place/C	e/City of Birth Country of Birth Country of Citizenship / Nationality							
First Applicant / Guardian	.,		Indian U.S. Others (Please specify)					
Second Applicant			Indian U.S. Others (Please specify) Indian U.S. Others (Please specify)					
Third Applicant					(Flease specify)			
Are you a tax resident (i.e., are you assessed	I for Tax) in any other country out	tside India? 🗌 Yes 🗌	No [Please tick	< (√)]				
If 'YES' please fill for ALL countries (other th respective countries.	an India) in which you are a Resid	lent for tax purpose i.e.	where you are a	Citizen/Resident/Gr	een Card Holder/Ta	x Residen	t in the	
	Tax Identification Num		Idoptific	ation Type	If TIN is not available please tick $(\checkmark)$			
Particulars Country of		onal Equivalent		r please specify)	the reason A, B or			
First Applicant / Guardian					Reason : A	в	с□	
First Applicant / Guardian					Reason : A	В	с	
					Reason : A	в 🗌	с 🗆	
First Applicant / Guardian Second Applicant								
Second Applicant					Reason : A	В	с	
Second Applicant Third Applicant	ccount Holder is liable to pay tax c	does not issue Tax Ident	ification Numbers	s to its residents.	Reason : A	В	с□	
Second Applicant Third Applicant □ Reason A  → The country where the A					Reason : A	В	с□	
Second Applicant Third Applicant □ Reason A  → The country where the A □ Reason B  → No TIN required (Select t		of the respective countr	y of tax residence	e do not require the 1	Reason : A	В	с	
Second Applicant         Third Applicant         □ Reason A ⇒ The country where the A         □ Reason B ⇒ No TIN required (Select to the second	this reason only if the authorities or reason thereof:	of the respective countr	y of tax residence	e do not require the 1 	Reason : A	в в	с	

12. NOMINATION DETAILS* (To be filled i	n by individuals s	singly or jointly. №	landatory on	y for Investors w	ho opt to hold un	its in Non-Demat) (Pleas	e refer instruction no. 10)
I/We do hereby nominate the person(s) m the Units held in my/our Folio in the ever (Please fill the nominee details in the table If you do not wish to nominate (Opt Out)	nt of my/our death le given below)		C	UNITES HELD IN NON-APPOINTE DR NON-APPOINTE death of all th requisite docu required by th favour of the	ny/our mutual fund nent of any nomine e unit holders in th uments issued by th ne Mutual Fund/AM legal heir(s), based	not wish to appoint any nomin folio. I/We understand the imp e(s) and am/are further aware e folio, my/our legal heir(s) wo ne Court or such other compet C for settlement of death claim on the value of the units held	blications/issues involved in that in case of my demise/ uld need to submit all the ent authority, as may be n/transmission of units in in the mutual fund folio.
in you do not wish to hominate (opt of			o sigii as pei		Guardian's	•	Proportion (%) in which
Name and PAN of Nominee(s)	Relationship with	Date of Birth	Guardian Name rel		relationship with nominee	Signature of Nominee/ Guardian of Nominee (Optional)	the units will be shared by each Nominee (should
	Applicant	(to be furnished in case the Nominee is a minor)			(optional)	aggregate to 100%)	
Nominee 1		DD/MM/YYYY					
Nominee 2		DD/MM/YYYY					
Nominee 3		DD/MM/YYYY					
Signature(s) All Unit holders to mand	atorily sign irresp	pective of the mo	de of holding			2	
Sign of 1st Applicant / Guardian		Sign of 2nd Applicant			Sign of 3rd Applicant		
13. CONFIRMATION CLAUSE			14.1				
I/We hereby confirm to have read, understood and agre my/our personal data and hereby authorise to disclose							g, dealing, handling of disclosure of
14. DECLARATION AND SIGNATURES	S					(Pleas	e refer instruction no. 11)
/We hereby confirm and declare as under:- I/We have r he respective Scheme(s) and Addenda thereto, issued above and agree to abide by the terms, conditions, rules are authorised to make this investment and the amoun ther applicable laws enacted by the Government of Ind.	from time to time and t and regulations of the t invested in the Scher lia or any Statutory Aut	the Instructions. I/We, H relevant Scheme(s). I/N ne is through legitimate hority. The ARN holder	nereby apply to th We have neither re a sources only an has disclosed to r	e Trustee of Bajaj Finser ceived nor been induced d is not designed for the ne/us all the commission	v Mutual Fund for allot d by any rebate or gifts purpose of contraven ns (in the form of trail o	ment of units of the Scheme(s) of B , directly or indirectly in making this tion or evasion of any Act, Regulatic	lajaj Finserv Mutual Fund, as indicated investment. I/We declare that I am/We on, Rule, Notification, Directions or any able to him for the different competing

Autual Fund investments are subject to market risks, read all scheme related documents carefully

fulfilling the KYC process to the satisfaction of the AMC/Baiai Finsery Mutual Fund. I/We hereby authorise the AMC/Baiai Finsery Mutual Fund to redeem the units against the funds invested by me/us at the applicable NAV as on the date of turning the K to place to the key bags in the K who bags in the K who bags in the K who as on the bar of bags in the K who as on the bar of bag in the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the K who as on the key back and the k FOR Account (s). Entropy of the reby commendation of the reby commendat including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax /revenue authorities and other investigation agencies without any obligation of advising me/us of the same.

- Please  $\checkmark$ : if the EUIN space is left blank: I / We hereby confirm that the EUIN 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 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(s) should be as it appears in the Folio / on the Application Form and in the same order. In case the mode of holding is joint, all Unit holders are required to sign.

Documents

Points to remember

Individuals Comp

## Please ensure that:

- Your Application Form is complete in all respects & signed by all applicants.
- Name, Address and Contact Details are mentioned in full. Email id & Mobile number 2. should be provided along with the declaration whether it belongs to Self or a Family member.
- Bank Account Details are entered completely and correctly. IFSC Code & 9 digit 3. MICR Code of your Bank is mentioned in the Application Form. 4.
- Permanent Account Number (PAN) Mandatory for all Investors (Indian & NRI) Irrespective of the Investment amount. Know Your Client (KYC) Mandatory for irrespective of the amount of investment 5.
- (please refer the guideline 4(e) for more information) Your Investment Cheque / DD is drawn in favour of < Scheme Name > dated and 6.
- signed. For e.g "Bajaj Finserv Liquid Fund"
- Application Number is mentioned on the reverse of the cheque.
- 8. A cancelled Cheque leaf of your Bank is enclosed in case your investment cheque is not from the bank account that you have furnished in the Application Form Documents as listed are submitted along with the Application form (as applicable to your specific case)

Societies Partnership Investments Trust NRI FII(s)/ Sole Firms through PoA FPI Proprieto Resolution / Authorisation to invest ~ HUF / Trust Deed ~ Bye - Laws ~ Partnership Deed  $\checkmark$ SEBI Registration / Designated Deposito  $\checkmark$ Participant Registration Certificate 2 Proof of Date of birth  $\checkmark$ Notarised Power of Attorney ~ Foreign Inward Remittance Certificate, in ~ case payment is made by DD from NRE / FCNR a/c, where applicable KYC Acknowledgement √ ~ ~ ~ ~  $\checkmark$ ~ ~ Demat Account Details ~ ~ ~ ~ ~ ~ ~ (Client Master List Copy)3 FATCA CRS/UB0 Declaration ~  $\checkmark$  $\checkmark$ ~ ~

1. Self attestation is mandatory 2. Copy of SEBI registration certificate (for FII) or Designated Depository Participant registration certificate (for FPI) should be provided 3. In case Units are applied in Electronic (Demat) mode.