

APPLICATION FORM (To be used/distributed along with Key Information Memorandum)

Investors must read the KIM, SAI and SID before completing this Form.

Please read the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required

Unifi Dynamic Asset Allocation Fund (An open-ended dynamic asset allocation fund)

Offer for Units of Rs. 10 each during the New Fund Offer and Continuous offer for Units at NAV based prices

This Product is suitable for investors who are seeking*	Scheme Riskometer	CRISIL Hybrid 50 + 50 Moderate Index (TRI) Riskometer
<ul style="list-style-type: none"> Income generation and Capital appreciation over medium to long term. Investment in diversified portfolio of debt, money market, equity and equity related instruments while managing risk through active asset allocation. 	<p>Investors understand that their principal will be at high risk.</p>	<p>Benchmark Risk-o-meter is High.</p>

*Investors should consult their financial advisers if in doubt about whether the product is suitable for them. (The product labelling assigned during the New Fund Offer is based on internal assessment of the Scheme Characteristics or model portfolio and the same may vary post NFO when actual investments are made)

New Fund Offer Opens on
03/03/2025Scheme re-opens on or before
21/03/2025New Fund Offer Closes on
07/03/2025Scheme Code
UNFI/O/H/DAA/25/01/0001

ISC Date Time Stamp Reference No.

Plan Details Direct Regular If regular, please fill in the below details.

Distributor's ARN/RIA Code/PMRN#	ARN / RIA / PM Name	Sub-Broker's ARN	Sub-Broker's Code**	EUIN***

** As allotted by ARN holder

*** Employee Unique Identification Number

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" transactions (only where EUIN box is left blank)

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.

#By mentioning RIA/PMS code, I/ We authorize you to share with the Investment Adviser/ Portfolio Manager the details of my/our transactions in the scheme(s) of Unifi Mutual Fund.

Unifi AMC has decided that no transaction charges will be deducted from the subscription amount, and hence no payment will be made to the distributors.

Signature(s) To be signed by all Applicants

Sole/First/Guardian/Authorized Signatory/POA_____
Second Applicant_____
Third Applicant

Section I

Mode of Operation (please tick) (For demat mode, sequence should be same as in demat account)

 Single Anyone or Survivor Joint (Default option if not selected)

Section II - Personal Information - Sole/First Applicant (PLEASE WRITE IN CAPITAL LETTERS)*

Name of Sole/ First Applicant ^ Mr/Ms/Mrs/M/s _____ ^Name as per PAN card/ITD records

Gender Male Female TransgenderPAN/ PEKRN

PAN Copy Mandatory

Date of Birth/ Incorporation* KIN (CKYC Identification No.)

Name of Guardian ^ (in case First Applicant is a Minor) _____ ^Name as per PAN card/ITD records

Relationship of Guardian with Minor Father Mother Legal Guardian (Attach proof of relationship with minor)Date of Birth of Guardian Mobile Belongs to Self Spouse Guardian Dependent Child Dependent Parent Custodian POA PMS

Tel (Res./ Off.)

Email Address

Email belongs to Self Spouse Guardian Dependent Child Dependent Parent Custodian POA PMSGO-GREEN INITIATIVE (For Annual Report/Abridged Summary) Opt-out - Email Opt-in - PhysicalGross Annual Income Details in INR (please ✓) < 1 lac 1-5 lacs 5-10 lacs 10-25 lacs 25 lacs-1 cr 1-5 crs 5-10 crs > 10 crs

OR Net-worth as on DD / MM / YYYY Rs. _____ (should not be older than 1 year)

Please tick, if applicable*, Politically Exposed Person (PEP) Related to PEP Not a PEP

*PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc.

Occupation of Applicant

 Private Sector Business Retired Professional Forex Dealer
 Public Sector Agriculturist Housewife Student Government Service
 Other _____

Non-Profit Organization [NPO]

Trust or Society Yes No

If yes, please fill Declaration form of Non-Profit Organization (NPO) separately

Tax Status of First Applicant

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Resident Individual | <input type="checkbox"/> Proprietorship | <input type="checkbox"/> Mutual Fund | <input type="checkbox"/> PF/ Gratuity/ Pension/ Superannuation Fund |
| <input type="checkbox"/> NRI on Repatriation Basis (NRE) | <input type="checkbox"/> Partnership Firm | <input type="checkbox"/> Body Corporate | <input type="checkbox"/> Person of Indian Origin (PIO) |
| <input type="checkbox"/> NRI on Non-Repatriation Basis (NRO) | <input type="checkbox"/> Private Limited Company | <input type="checkbox"/> Registered Society | <input type="checkbox"/> Trust/NGO |
| <input type="checkbox"/> On behalf of Minor | <input type="checkbox"/> Public Limited Company | <input type="checkbox"/> Foreign Institutional Investor | <input type="checkbox"/> AOP/ BOI |
| <input type="checkbox"/> HUF | <input type="checkbox"/> Government Body | <input type="checkbox"/> Bank | <input type="checkbox"/> Other _____ (Please Specify) |

LEI Number (Legal Entity Identifier) For Non individuals only:
Valid till
Guardian/POA /Contact Person if Non- Individual Applicant

Name	PAN	Country of Birth	Nationality	Tax Reference Number(For NRI)

Gross Annual Income Details in INR (please v) < 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1 cr-5 cr 5 cr-10 cr > 10 cr

Or Net-worth as on (date) DD / MM / YYYY Rs. _____ (should not be older than 1 year)

 Please tick, if applicable[§], **Politically Exposed Person (PEP)** **Related to PEP** **Not a PEP**
[§]PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc.

Second Applicant (PLEASE WRITE IN CAPITAL LETTERS)
Name of Second Applicant* ^ Mr/Ms/Mrs _____ ^Name as per PAN card/ITD records

Gender Male Female Transgender

PAN/ PEKRN* **PAN Copy Mandatory**
Date of Birth/Incorporation*
KIN (CKYC Identification No.)
Mobile Belongs to Self Spouse Guardian Dependent Child Dependent Parent Custodian POA PMS

Tel (Res./ Off.) **Email Address**

 Email belongs to Self Spouse Guardian Dependent Child Dependent Parent Custodian POA PMS

Gross Annual Income Details in INR (please v) < 1 lac 1-5 lacs 5-10 lacs 10-25 lacs 25 lacs-1 cr 1-5 crs 5-10 crs > 10 crs

OR Net-worth as on DD / MM / YYYY Rs. _____ (should not be older than 1 year)

 Please tick, if applicable[§], **Politically Exposed Person (PEP)** **Related to PEP** **Not a PEP**
[§]PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc.

Occupation of Applicant Private Sector Business Retired Professional Forex Dealer
 Public Sector Agriculturist Housewife Student Government Service
 Other _____

Tax Status Resident Individual NRE NRO PIO

Third Applicant (PLEASE WRITE IN CAPITAL LETTERS)
Name of Third Applicant* ^ Mr/Ms/Mrs _____ ^Name as per PAN card/ITD records

Gender Male Female Transgender

PAN/ PEKRN* **PAN Copy Mandatory**
Date of Birth/Incorporation*
KIN (CKYC Identification No.)
Mobile Belongs to Self Spouse Guardian Dependent Child Dependent Parent Custodian POA PMS

Tel (Res./ Off.) **Email Address**

 Email belongs to Self Spouse Guardian Dependent Child Dependent Parent Custodian POA PMS

Gross Annual Income Details in INR (please v) < 1 lac 1-5 lacs 5-10 lacs 10-25 lacs 25 lacs-1 cr 1-5 crs 5-10 crs > 10 crs

OR Net-worth as on DD / MM / YYYY Rs. _____ (should not be older than 1 year)

 Please tick, if applicable[§], **Politically Exposed Person (PEP)** **Related to PEP** **Not a PEP**
[§]PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state-owned corporations, important political party officials, etc.

Occupation of Applicant Private Sector Business Retired Professional Forex Dealer
 Public Sector Agriculturist Housewife Student Government Service
 Other _____

Tax Status Resident Individual NRE NRO PIO

Section X – Nomination

I /We hereby confirm that I /We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in nonappointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio

OR

I / We hereby nominate the following person(s) who shall receive all the assets held in my / our account / folio in the event of my / our demise, as trustee and on behalf of my / our legal heir(s)

Nomination Details								
	Mandatory Details						Additional Details ****	
	Name of Nominee	Share of Nominee (%)	Relationship	Postal Address	Mobile number & E-mail	Identity Number ***	DOB of nominee	Guardian
Nominee 1								
Nominee 2								
Nominee 3								

*** Provide only number: PAN or Driving Licence or Aadhaar (last 4). Copy of the document is not required.

**** to be furnished only in following conditions / circumstances:

- i. Date of Birth (DOB): please provide, only if the nominee is minor.
- ii. Guardian: It is optional for you to provide, if the nominee is minor.

Name(s) of holder(s)	Signature(s) of holder(s)	Witness Signature*
Sole / First Holder (Mr./Ms.)		
Second Holder (Mr./Ms.)		
Third Holder (Mr./Ms.)		

*Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

- You may nominate a maximum of 10 persons, to receive the Units/amounts standing to your credit payable in the event of death of the Unit Holder(s) in respect of investment under a folio. In case of more than 3 nominees, please fill a separate nomination form.
- The nomination may be made only by individuals applying for/holding units on their own behalf, singly or jointly.
- Non-individuals including society, trust, body corporate, partnership firm, Karta of HUF, holder of POA or a parent/guardian applying on behalf of a minor beneficiary cannot nominate.
- A minor can be nominated and in that event, the name and address of the guardian of the minor nominee shall be provided in the application. Nomination can also be in favour of the Central Government, State Government, and a local authority, any person designated by virtue of his office or a religious or charitable trust.
- The Nominee shall not be a trust (other than a religious or charitable trust), society, body corporate, partnership firm, Karta of Hindu Undivided Family or a Power of Attorney holder.
- A Non-Resident Indian can be a Nominee subject a to the exchange control regulations in force, from time to time.
- Transfer of units in favour of a Nominee shall be valid discharge by the AMC/Mutual Fund against the legal heir.
- The cancellation of nomination can be made only by the individual(s) who hold units on their own behalf singly or jointly and who made the original nomination. On cancellation of the nomination, the nomination shall stand rescinded and the AMC shall not be under any obligation to transfer the units in favour of the Nominee.
- In the event of the unit holders not indicating the percentage of allocation/share for each of the nominees, the AMC shall settle the claim equally amongst all the nominees
- It is recommended for the nominee/Guardian (in case the nominee is a minor) to provide the signature in the space provided.
- Investors should opt for the nomination facility to avoid hassles and inconveniences in case of unforeseen events in future. Every new nomination for a folio/account shall overwrite the existing nomination, if any.
- Nomination by a Unit holder shall be applicable for all the investments in all schemes held in a particular folio.
- Nomination shall not be allowed in a folio held on behalf of a minor Unit holder.
- Nomination shall be mandatory for all new singly held folios of individual investors.
- In case of multiple nominees, the percentage of allocation/share in whole numbers and without decimals in favour of each of the nominees should be indicated against the name of the nominees. Such allocation/ share should total to 100 percent. In the event of the Unit holder(s) fail to indicate the percentage of allocation/share for each of the nominees, the Fund/ AMC, by invoking default option shall settle the claim equally amongst all the nominees. In case you do not wish to nominate, kindly indicate by ticking in the space provided.

General Instructions:

- a) Please fill up the Application Form legibly in English in CAPITAL LETTERS.
- b) Please read the SAI/ SID/ KIM carefully before investing. Your application for allotment of units in the Scheme(s) is construed to have been made with a full understanding of the terms and conditions applicable to it and the same is binding on you in respect of your investment in the Scheme(s).
- c) Application Forms incomplete in any respect or not accompanied by a Cheque are liable to be rejected. In case your investment application gets rejected on account of the same being incomplete in any respect, your investment amount would be refunded without interest within 5 business days from the NFO closure date.
- d) Any correction / over writing in the application form must be signed by the investor.
- e) AMC shall not be responsible for direct credit rejects or / payout delays due to incorrect/ incomplete information provided by investor.
- f) In terms of SEBI Master Circular No. SEBI/HO/IMD/IMD-PoD-1/P/CIR/2024/90 dated June 27, 2024, no entry load will be charged on purchase / additional purchase / switch-in. The commission as specified in the aforesaid circular, if any, on investment made by the investor shall be paid by the investor directly to the Distributor, based on his assessment of various factors including the service rendered by the Distributor.
- g) The distributor shall disclose all commissions (in the form of trail commission or any other mode) payable to them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to the investor.

1. DISTRIBUTOR INFORMATION

- a. 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.
- b. Please mention 'DIRECT' in case the application is not routed through any one distributor.
- c. Pursuant to SEBI circular dated September 13, 2012, mutual funds have created a unique identity number of the employee/ relationship manager/ salesperson of the distributor interacting with the investor for the sale of mutual fund products, in addition to the AMFI Registration Number (ARN) of the distributor. This Employee Unique Identification Number is referred as "EUIIN". EUIIN aims to assist in tackling the problem of mis-selling even if the employee/relationship manager/salesperson leaves the employment of the distributor or his/her sub broker. Quoting of EUIIN is mandatory in case of advisory transactions.
- d. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided, in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIIN of the Sales Person (if any) in the "EUIIN" column.
- e. Distributors are advised to ensure that they fill in the RIA code, in case they are a Registered Investment Advisor.
- f. Investors are requested to note that EUIIN is applicable for transactions such as Purchases, Switches, Registrations of SIP / STP and EUIIN is not applicable for transactions such as Instalments under SIP/ STP / SWP / Reinvestments, Redemption, SWP Registration.
- g. EUIIN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ARN-14/12-13 dated July 13, 2012.
- h. Please tick the box provided for EUIIN declaration in this section in case the ARN is mentioned in the distributor section and the EUIIN is left blank.

2. MODE OF OPERATION (Section I)

Please select mode of Operations, if option left blank then default option of jointly will be considered for more than one applicant

3. PERSONAL INFORMATION (Section II)

a. Please furnish names of all applicants. The name of the Sole /First Applicant should be mentioned in the same manner in which it appears in the Income Tax Database. Please note the following:

- In case the applicant is a minor, the Guardian's name should be stated in the space provided (Name of Guardian). It is mandatory to provide the minor's date of birth in the space provided.
- In case the application is being made on behalf of a minor, he / she shall be the Sole Holder/ Beneficiary. There shall be no joint account with a minor unit holder.
- b. As per recent guidelines, Primary holders are required to provide their Email Address and Mobile number for ease of communications and to prevent fraudulent transactions.
- c. If there is more than one applicant but the mode of holding is not specified, the same would be treated as Joint.
- d. Please indicate the tax status of the sole/1st applicant at the time of investment. The abbreviations used in this section are: NRI: Non-Resident Indian, NGO: Non-Government Organization, AOP: Association of Persons, BOI: Body of Individuals, HUF: Hindu Undivided Family.
- e. Where the investment is on behalf of a Minor by the Guardian:
 - The Minor shall be the first and sole holder in the account.
 - No Joint holders are allowed. In case an investor provides joint holder details, these shall be ignored.
 - Guardian should be either a natural guardian (i.e. father or mother) or a court appointed legal guardian.
 - Guardian should mention the relationship with Minor and date of birth of the Minor on the application form.
 - A document evidencing the relationship and date of birth of the Minor should be submitted along with the application form. Photocopy of any one of the following documents can be submitted a) Birth certificate of the minor or b) school leaving certificate / mark sheet of Higher Secondary board of respective states, ICSE, CBSE etc. c) Passport of the minor d) Any other suitable proof evidencing the relationship.
 - Where the guardian is not a natural guardian (father or mother) and is a court appointed legal guardian, suitable supporting documentary evidence should be provided.
 - If the mandatory details and/or documents are not provided, the application is liable to be rejected without any information to the applicant.
 - The bank a/c to be in name of minor or guardian with minor as joint holder.

f. Unifi Mutual Fund has decided to restrict subscriptions from United States persons (U.S. person) as defined under the extant laws of the United States of America and Residents of Canada in the schemes of Unifi Mutual Fund, any individual who is a foreign national or any entity that is not an Indian Resident under the Foreign Exchange Management Act, 1999, except where registered with SEBI as an FPI, Non-Resident Indians residing in the Financial Action Task Force (FATF) Non-Compliant Countries and Territories (NCCTs) & Overseas Corporate Bodies.

g. KYC Requirements and Details: Please furnish PAN & KYC details for each applicant/unit holder, including the Guardian and/or Power of Attorney (POA) holders as explained in the below points.

- **PAN** It is mandatory for all investors (including guardians, joint holders, NRIs and power of attorney holders) to provide their Income Tax Permanent Account Number (PAN) and also submit a photocopy of the PAN card at the time of purchase of Units except for investors who are exempted from PAN requirement, please refer to KYC Form for exemption of PAN requirement.
- **KNOW YOUR CUSTOMER (KYC)** Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14-digit KYC Identification Number (KIN) in application form as per AMFI circular 135/BP/68/2016-17. To download Common KYC Application Form, please visit our website www.unifimf.com

Operationalisation of Central KYC Records Registry (CKYCR) Central Registry of Securitisation and Asset Reconstruction and Government of India to act as Central KYC Records Registry under Prevention of Money-Laundering (Maintenance of Records) Rules, 2005 ('PMLA Rules'). SEBI vide its circular ref. no. CIR/MIRSD/66/2016 dated July 21, 2016 and circular ref. no. CIR/MIRSD/120/2016 dated November 10, 2016 has prescribed that the Mutual Fund/ AMC should capture KYC information for sharing with CKYCR as per the KYC template prescribed by CERSAI.

In accordance with the aforesaid SEBI circulars and AMFI best practice guidelines for implementation of CKYC norms with effect from February 1, 2017:

- a) Individual investors who have never done KYC process under KRA regime i.e. a new investor who is new to KRA system and whose KYC is not registered or verified in the KRA system shall be required to provide KYC details in the CKYC Form to the Mutual Fund/ AMC.
 - b) Individual investor who fills old KRA KYC Form, should provide additional / missing information using Supplementary KYC Form or fill CKYC Form
 - c) Details of investors shall be uploaded on the system of CKYCR and a 14 digit unique KYC identifier ('KIN') will be generated for such customer.
 - d) New investors, who have completed CKYC process & have obtained KIN may quote their KIN in the application form instead of submitting CKYC Form/ Supplementary KYC Form.
 - e) AMC/ Mutual Fund shall use the KIN of the investor to download the KYC information from CKYCR system and update its records.
 - f) If the PAN of investor is not updated on CKYCR system, the investor should submit self certified copy of PAN card to the Mutual Fund/ AMC.
- The CKYC Form and Supplementary KYC Form are available at Investor Service Centre (ISC) of Unifi Mutual Fund and on its website www.unifimf.com.
- The AMC reserves the right to reject transaction application in case the investor(s) fails to submit information and/or documentation as mentioned above. In the event of non compliance of KYC requirements, the Trustee / AMC reserves the right to freeze the folio of the investor(s).

• Micro Investment

With effect from October 30, 2012, where the aggregate of the lump sum investment (fresh purchase & additional purchase) and Micro SIP instalments by an investor in a financial year i.e April to March does not exceed Rs. 50,000/- it shall be exempt from the requirement of PAN. However, requirements of Know Your Customer (KYC) shall be mandatory.

Accordingly, investors seeking the above exemption for PAN still need to submit the KYC Acknowledgement, irrespective of the amount of investment. This exemption will be available only to Micro investment made by the individuals being Indian citizens (including NRIs, Joint holders, minors acting through guardian and sole proprietary firms). PIOs, HUFs, QFIs and other categories of investors will not be eligible for this exemption.

h. Contact Information

a. Please note that all communication i.e. Account statement, Annual Report, News Letters will be sent via e-mail, if the e-mail id of the investor is provided in the application form. The Account statement will be encrypted with a password before sending the same to the registered email id. Should the unitholder face any difficulty in accessing/opening the Account Statements/ documents sent via email, the unitholder may call/write to the AMC/Registrar and ask for a physical copy.

i. Instructions for LEI

As per the RBI circular no RBI/2020-21/82, obtaining the Legal Entity Identifier is mandatory for all non-individuals and it should be quoted in any financial transactions of Rs.50 Crores and above routed through RTGS/NEFT w.e.f 1st April 2021. It is applicable for all purchases (inward remittance), redemption / brokerage payouts (outward remittance).

j. Go Green Initiative in Mutual Funds

- With respect to the directives issued by SEBI Master Circular No. SEBI/HO/IMD/IMD-PoD-1/P/CIR/2024/90 dated June 27, 2024 regarding Go Green Initiative in Mutual Funds regarding disclosing and providing information to investors through digital platform as a green initiative measure.
- In line with above initiative, Unifi Mutual Fund has adopted 'Go Green Initiative for Mutual Funds' and accordingly, the scheme Annual Reports /Abridged Summary will be hosted on our website www.unifimf.com in a downloadable format. Further, wherever email ids are registered in our records, the scheme Annual Reports / Abridged Summary will be sent via email.
- If you do not opt-in to receive a physical copy of the scheme Annual Report/ Abridged Summary, you can view the same on our website or alternatively contact our registered office to get a physical copy of the Annual Report/Abridged Summary.

4. DEMAT ACCOUNT DETAILS (SECTION-III)

- a. Investors can hold units in demat / non-demat mode. In case demat account details are not provided or details of DP ID / BO ID, provided are incorrect or demat account is not activated or not in active status, the units would be allotted in non-demat mode.
- b. Statement of Accounts would be sent to Investors who are allotted units in non-demat mode.
- c. Units held in dematerialized form are freely transferable with effect from October 01, 2011
- d. In accordance with SEBI Master circular no. SEBI/HO/IMD/IMD-PoD 1/P/CIR/2024/90 dated June 27, 2024, unit holders are given an option to hold units by way of an Account statement (physical form) or in Dematerialized (Demat) form.
- e. Unit holders opting to hold units in demat form must provide their demat account details in the specified section of the application form. The unit holder intending to hold the units in demat form are required to have a beneficiary account with the Depository Participant (DP) and will be required to indicate in the application the DP's name, DP ID number and the beneficiary account number of the applicant with the DP.

Guidelines for Filling Up The Application Form

- f. Applicants must ensure that the sequence of names and other details like Client ID, Address and PAN details as mentioned in the application form matches that of the account held with the Depository Participant. Only those applications where the details are matched with the depository data will be treated as valid applications. If the details mentioned in the application are incomplete/incorrect not matched with the depository data, then units will be allotted in the physical mode, and an account statement shall be sent to them.
- g. Unitholders opting to hold units in demat mode, can submit redemption/switch only through DP or through stock exchange platform.
- h. Unitholders opting for investment in demat mode cannot opt for facilities like STP, SWP & Top up.
- i. In case the unit holder desires to hold the units in a dematerialized/rematerialized form ignored, the request for conversion of units held in non demat form into demat form or vice versa should be submitted along with a demat/remat request form to their depository participant.
- j. Units held in demat form will be transferable.

5. CORRESPONDENCE DETAILS OF SOLE/ FIRST APPLICANT (SECTION-IV)

- Please furnish the full postal address of the sole/ first applicant with PIN/ Postal Code and complete contact details.
- Overseas address is mandatory for NRI/FII investors

6. FATCA & CRS TERMS & CONDITIONS: Details under FATCA & CRS (SECTION-V)

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with Unifi Mutual Fund. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information. Further, the fund shall update the FATCA/ CRS Information received from other SEBI registered intermediaries.

FATCA & CRS INSTRUCTIONS:

For Non-Individual investors, please fill in UBO form along with FATCA / CRS annexure and attach along with Application form available on our website www.unifimf.com

If you have any questions about your tax residency, please contact your tax advisor.

It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach it to the form.

- With effect from November 1, 2015 all investors will have to mandatorily provide the information and declarations pertaining to FATCA/CRS for all new accounts opened, failing which the application / transaction request shall be liable to be rejected.
- Investors are requested to provide all the necessary information / declarations to facilitate compliance, considering India's commitment to implement CRS and FATCA under the relevant international treaties.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below

FATCA & CRS Indicia observed (ticked) Documentation required for Cure of FATCA/ CRS Indicia

U.S. place of birth

- Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes;
- Non-US passport or any non-US government issued document evidencing nationality or citizenship; and
- Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth

Residence/ mailing address in a country other than India

- Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and
- Documentary evidence

Telephone number in a country other than India

If no Indian telephone number is provided

- Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and
- Documentary evidence

If Indian telephone number is provided along with a foreign country telephone number

- Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India;

OR

- Documentary evidence

Telephone number in a country other than India

- Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and
- Documentary evidence

7. RESOLUTION OF DISPUTES (SECTION-VI)

In accordance with SEBI circular no. SEBI/HO/OIAE/OIAE-IAD-1/P/CIR/2023/145 dated July 31, 2023 (updated on August 24, 2023) ("the circular") all disputes between institutional or corporate clients and AMC can be resolved at the option of the institutional or corporate clients.

- In accordance with the circular and by harnessing online conciliation and/or by online arbitration as specified in the circular OR
- by harnessing any independent institutional mediation, conciliation and/or online arbitration institution in India.

8. INVESTMENT DETAILS (SECTION- VII)

The AMC has a separate plan for direct investments (i.e. investments not routed through an AMFI Registration Number (ARN) Holder ("Distributor") (hereinafter referred to as "Direct Plan").

- Direct Plan is only for investors who purchase /subscribe Units in a Scheme directly with the Fund and is not available for investors who route their investments through a Distributor.
 - Investors may please note that the Direct Plan under the Schemes is meant for investors who understand the capital market, mutual funds and the risks associated therewith. The risks associated with the investments in the Schemes vary depending upon the investment objective, asset allocation and investment strategy of the Schemes and the investments may not be suited for all categories of investors. The AMC believes that investors investing under the Direct Plan of the Schemes are aware of the investment objective, asset allocation, investment strategy, risks associated therewith and other features of the Schemes and has taken an informed investment decision. Please note that Scheme Information Document(s), Statement of Additional Information, Key Information Memorandum or any other advertisements and its contents are for information only and do not constitute any investment advice or solicitation or offer for sale of units of the Schemes from the AMC.
 - All Options offered under the Schemes (hereinafter referred as "Regular Plan") will also be available for subscription under the Direct Plan.
 - Investors subscribing under Direct Plan of the Schemes should indicate the Scheme/ Plan name in the application form as "Scheme Name – Direct Plan" form for e.g. "Unifi Dynamic Asset Allocation Fund – Direct Plan". Investors should also indicate "Direct" in the ARN column of the application form.
- However, in case Distributor code is mentioned in the application form, but "Direct Plan" is indicated against the Scheme name, the Distributor code will be ignored and the application will be processed under Direct Plan.

Default Table

Scenario	Broker Code mentioned by the Investor	Plan mentioned by the Investor	Default Plan to be captured
1	Not Mentioned	Not Mentioned	Direct Plan
2	Not Mentioned	Direct Plan	Direct Plan
3	Not Mentioned	Regular Plan	Direct Plan
4	Mentioned	Direct Plan	Direct Plan
5	Direct Plan	Not Mentioned	Direct Plan
6	Direct Plan	Regular Plan	Direct Plan
7	Mentioned	Regular Plan	Regular Plan
8	Mentioned	Not Mentioned	Regular Plan

Applications will be processed as per the Guidelines for Processing of transactions received under Regular Plan with invalid ARN as detailed in SID/KIM.

- Please note investor needs to fill the Common Application Form and SIP Investment Form, if the investor needs to do a SIP investment.
- Payment may be made only by Cheque or Electronic Fund Transfer. Cheque should be drawn in favour of the "Scheme name" and crossed "Account Payee only".
- Please tick and fill in the appropriate section based on the Type of Investment i.e. LUMPSUM or SIP or LUMPSUM with SIP. Please fill SIP enrolment and OTM form.
- Third Party payment will not be accepted. In case of exceptions (as per AMFI Circular) to third party payment, please fill the 'Third Party Declaration Form'.
- 'Third Party Payment' shall mean payment made through an instrument issued from an account other than that of the beneficiary investor. In case of payment instruments issued from a joint bank account, the first named applicant/investor must be one of the joint holders of the bank account from which the payment instrument is issued. 'Related person/s' means such persons as may be specified by the AMC from time to time. The investors making an application under the exceptional cases are required to comply with the following, without which their applications for subscriptions for units will be rejected / not processed.
- Mandatory KYC compliance of the investor and the person making the payment, in order to determine the identity of the investor and the person issuing the payment instrument.
- Submit a separate, prescribed, 'Third Party Payment Declaration Form' and the person making the payment i.e., the Third Party, giving details of the bank account from which the payment is made and the relationship of the Third Party with the beneficiary. (The declaration form is available at www.unifimf.com)
- Submit a cancelled cheque leaf or copy of bank statement / pass book page mentioning bank account number, account holders' name and address or such other document as the AMC may require for verifying the source of funds to ascertain that funds have been remitted from the drawer's account only.

Guidelines for Filling Up The Application Form

For identifying Third Party Payments, investors are required to comply with the requirements specified below:

a. Payment by Cheque: An investor at the time of his/her purchase must provide the details of pay-in bank account (i.e. account from which a subscription payment is made) and pay-out bank account (i.e. account into which redemption proceeds are to be paid). Identification of third party cheques by the AMC / Registrars will be on the basis of either matching of pay-in bank account details with registered/pay-out bank account details or by matching the bank account number/name/signature of the first named investor with the name/account number/signature available on the cheque. If the name/bank account number is not pre-printed on the cheque and signature on the cheque does not match with signature on the application, then the first named applicant/investor should submit any one of the following documents:

- (i) a copy of the bank passbook or a statement of bank account having the name and address of the account holder and account number.
- (ii) a letter (in original) from the bank on the bank's letterhead certifying that the investor maintains an account with the bank, along with information like bank account number, bank branch, account type, the MICR code of the branch & IFSC Code (where available).

In respect of (ii) above, it should be certified by the bank manager with his/her full signature, name, employee code, bank seal and contact number. Investors should note that where the bank account numbers have changed on account of the implementation of core banking system at their banks, any related communication from the bank towards a change in bank account number should accompany the application form for subscription of units.

b. Payment by RTGS, NEFT, ECS, Bank transfer, etc: A copy of the instruction to the bank stating the account number debited must accompany the purchase application. The account number mentioned on the transfer Instruction copy should be a registered bank account or the first named unitholder should be one of the account holders to the bank account.

I. LUMP SUM INVESTMENT

Please enter the cheque Number and the investment amount.

II. INVESTMENT UNDER SIP

a. The following criteria should be met for an SIP investment as specified in the SID :

- Minimum amount per instalment
- Minimum number of instalments
- Aggregate investment via SIP

If the SIP period is not specified by the investor then the SIP enrolment will be deemed to be for 40 years and processed accordingly. The SIP facility will be available on the date/day as chosen by the investor. If any of the date/day happens to be a holiday/non business day then the SIP transaction will be processed on the next business day.

b. SIP Mode – Auto Debit (Direct Debit/NACH/OTM)

c. For SIP application, the first investment cheque is optional. However, an original cancelled cheque is mandatory to verify the SIP bank details.

d. The first instalment (in case investor wishes to make the first investment with the SIP application form) you may pay either through Auto Debit (Direct Debit/NACH/OTM)

e. The first instalment cheque should be dated with the date of submission of the Application Form. The first Instalment cheque and the subsequent Instalments should be for the same amount.

f. In case of SIP through Auto Debit, the Auto Debit Authorisation needs to be filled in and signed by the Bank Account holders in the same order and manner in which the Bank account is held by them.

g. In case of any mismatch between the 'No. of instalment' and the 'SIP period', the SIP period will be considered as per the Auto Debit Facility Form.

h. In case of any discrepancy between the Application Form and the Auto Debit Facility Form, the SIP details provided in the latter will be considered for investment.

Summary

Special Product/Facilities	Frequency	Minimum Amount & in multiples	Minimum Instalments	Dates
SIP	Monthly	Rs. 500 & in multiples of Re.1/	12	Any day except 29th, 30th and 31st as the date of instalment

NRI investors

NRIs and PIOs may purchase units of the scheme(s) on a repatriation and non-repatriation basis, while FIIs may purchase units only on a repatriation basis. They shall attach a copy of the cheque used for payment or a Foreign Inward Remittance Certificate (FIRC) or an Account Debit Certificate from the bankers along with the application form to enable the AMC to ascertain the repatriation status of the amount invested. The account type shall be clearly ticked as NRE or NRO or FCNR, to enable the AMC to determine the repatriation status of the investment amount. The AMC and the Registrar may rely on the repatriation status of the investment purely based on the details provided in the application form.

Repatriation basis

- FIIs may pay their subscription amounts either by way of inward remittance through normal banking channels or out of funds held in Foreign Currency Accounts or Non Resident Rupee Accounts maintained with a designated branch of an authorised dealer with the approval of RBI.
- NRIs shall also be required to furnish such other documents as may be necessary and as requested by the AMC/Mutual Fund/Registrar, in connection with the investment in the schemes.

Non-Repatriation basis

NRIs and PIOs may pay their subscription amounts by cheques drawn out of Non-Resident Ordinary (NRO) accounts/ Non-Resident Special Rupee (NRSR) accounts and Non Resident Non-Repatriable (NRNR) accounts payable at the city where the application form is accepted.

9. PAYOUT BANK DETAILS (SECTION-VIII)

a. Please furnish complete Bank Account Details of the Sole/First Applicant. This is a mandatory requirement and applications not carrying bank account details shall be rejected. Bank details provided in the application form will be considered as the default Bank Mandate for remitting redemption proceeds.

b. Please provide your complete Core Banking Account Number, (if applicable), in your Bank Mandate in the Application Form. In case you are not aware of the Core Banking Account Number, kindly check the same with your bankers.

c. Please attach an original cancelled cheque leaf if your investment instrument is not from the same bank account mentioned in the Application form.

d. Unifi Mutual Fund will endeavour to remit the Redemption proceeds through electronic mode, wherever sufficient bank account details of the unit holder are available.

10. DECLARATION AND SIGNATURES (SECTION- IX)

- All signatures should be handwritten in English or any Indian language. Thumb impressions should be from the left hand for males and the right hand for females and in both cases must be attested by a Judicial Magistrate or a Notary Public.
- If the application form is signed by a Power of Attorney (PoA) holder, the form should be accompanied by a notarised photocopy of the PoA. Alternatively, the original PoA may be submitted, which will be returned after verification. If the PoA is not submitted with the application, the Application Form will be rejected. The POA should contain the signature of the investor (POA Donor) and the POA holder.
- In case of corporates or any non-individual investors, a list of authorised signatories should be submitted along with Application form or in case of any change in the authorised signatory list, the AMC / Registrar must be notified within 7 days.
- In case of application under POA or by a Non-Individual (i.e. Company, trust, society, partnership firm etc.) the relevant POA or the resolution should specifically provide for/ authorize the POA holder/ authorized signatory to make application/ invest moneys on behalf of the investor.

11. NOMINATION (SECTION X)

Rights, Entitlement and Obligation of the investor and nominee:

- If you are opening a new demat account / MF folios, you have to provide nomination. Otherwise, you have to follow procedure as per 3.10 of the circular dated January 10, 2025, SEBI/HO/OIAE/OIAE_IAD-3/P/ON/2025/01650.
- You can make nomination or change nominee any number of times without any restriction.
- You are entitled to receive acknowledgement from the AMC / DP for each instance of providing or changing nomination.
- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account / folio.
- In case all your nominees do not claim the assets from the AMC / DP, then the residual unclaimed asset shall continue to be with the AMC in case of MF units and with the concerned Depository in case of Demat account.
- You have the option to designate any one of your nominees to operate your account / folio, if case of your physical incapacitation. This mandate can be changed any time you choose.
- The signatories for this nomination form in joint folios / account, shall be the same as that of your joint MF folio / demat account. i.e.
 - o 'Either or Survivor' Folios / Accounts – any one of the holder can sign
 - o 'Jointly' Folios / Accounts – both holders have to sign

Transmission aspects

- AMCs / DPs shall transmit the folio / account to the nominee(s) upon receipt of 1) copy of death certificate and 2) completion / updation of KYC of the nominee(s). The nominee is not required to provide affidavits, indemnities, undertakings, attestations or notarization.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the AMC / DP.
- In case of multiple nominees the assets shall be distributed pro-rata to the surviving nominees, as illustrated below.

% share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'			
Nominee	% share	Nominee	% initial share	% of A's share to be apportioned	Total % share
A	60%	A	0	0	0
B	30%	B	30%	45%	75%
C	10%	C	10%	15%	25%
Total	100%	-	40%	60%	100%

12. IMPLEMENTATION OF AMENDMENTS IN INDIAN STAMP ACT, 1899

Investors / Unit Holders of all the Scheme(s) of the Mutual Fund pursuant to Notification No. S.O. 4419(E) dated December 10, 2019 issued by Department of Revenue, Ministry of Finance, Government of India, read with Part I of Chapter IV of Notification dated February 21, 2019 and Notification dated March 30, 2020 issued by Legislative Department, Ministry of Law and Justice, Government of India on the Finance Act, 2019, a stamp duty @ 0.005% of the transaction value would be levied on mutual fund transactions with effect from July 1, 2020. Accordingly, pursuant to levy of stamp duty, the number of units allotted on purchase, switch-ins, SIP/STP instalments to the unitholders would be reduced to that extent.

One Time Bank Mandate (NACH/OTM/Direct Debit Mandate Form)



UMRN FOR OFFICE USE ONLY Date DDMMYY

Tick (✓)
 CREATE ✓
 MODIFY ✗
 CANCEL ✗

Sponsor Bank Code FOR OFFICE USE ONLY Utility Code

I/We hereby authorize Unifi Mutual Fund to debit bank a/c type (tick ✓) SB CA CC SB-NRE SB-NRO Other

Bank a/c number

with Bank Name of customers Bank IFSC or MICR

an amount of Rupees Amount in words ₹ In figures

FREQUENCY Mthly Qtly H-Yearly Yearly As & when presented DEBIT TYPE Yearly As & when presented

PAN Phone No. +91

Reference Folio Number/PAN Email ID

PERIOD DDMMYY

Signature of Primary Account Holder Signature of Account Holder Signature of Account Holder

1. Name as in Bank records 2. Name as in Bank records 3. Name as in Bank records

As per the NPCI circular dated October 31, 2023, effective April 1, 2024, the mandate can be for a maximum duration of 40 years from the date of application. I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank. This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorizing the User entity/Corporate to debit my account based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate of the bank where I have authorized the debit.

Systematic Investment Plan & Top Up Form



Distributor's ARN/RIA Code/PMRN ^z	ARN / RIA / PM Name	Sub-Broker's ARN	Sub-Broker's Code**	EUIN***

** As allotted by ARN holder *** Employee Unique Identification Number
 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" transactions (only where EUIN box is left blank)
 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.

[#]By mentioning RIA/PMS code, I/We authorize you to share with the Investment Adviser/ Portfolio Manager the details of my/our transactions in the scheme(s) of Unifi Mutual Fund.

Signature(s) To be signed by all Applicants

Sole/First/Guardian/Authorized Signatory/POA Second Applicant Third Applicant

FOLIO NO. Sole/First Applicant (Mr/Ms/Mrs): FIRST NAME MIDDLE NAME LAST NAME

Details of SIP Investment

Scheme : Unifi Dynamic Asset Allocation Fund Plan Regular Direct Option Growth

Investment Amount (in figure)^{*} (in words)

[‡] Minimum amount of Rs. 500/- and in multiples of Re.1/- thereafter

SIP Frequency Monthly SIP Date (Any day except 29th, 30th & 31st) of the month DD SIP Start Date[§] MMYY SIP End Date (Max duration of 40 years) MMYY

[§] Minimum 21 days from NFO Closure day
 If Start Date is not mentioned, next applicable SIP cycle date would be applied for processing considering the NFO closure date
Note: Please refer to scheme SID for SIP features

SIP Top-up (Optional)

TOP-UP Frequency Half Yearly Yearly (If Top-up frequency is not selected, then the default option will be Half Yearly)
 Fixed SIP TOP-UP Amount (Rs.):
 Minimum Top-Up Amount is Rs.500/- & in multiples of Rs.500/- only

Demat Account Information (Mandatory for crediting units in demat account)

If you wish to hold your investment in dematerialized mode, please furnish the below details and enclose a copy of the Client Master/Transaction Cum Holding Statement/ Cancelled delivery instruction slip that you may have received from your Depository.

DP Name
 NSDL DPID IN CDSL DPID

Signature(s) as per Unifi Mutual Fund Records (in case you have existing folio) (Mandatory)

Signature of Sole/First Applicant /Guardian Signature of Second Applicant Signature of Third Applicant

ISC Date Time Stamp Reference No.

ACKNOWLEDGEMENT - SIP + TOP-UP FACILITY FORM



Folio Number Name of the Investor

Scheme Name, Plan & Option SIP Amount ₹

Fixed SIP Top-Up Amount ₹ Top-Up Frequency Half Yearly Yearly

Instructions for One Time Mandate Form

Following fields need to be filled mandatorily

- | | |
|---|--|
| 1. Date: In format DD/MM/YYYY | 7. Reference : Mention Folio Number/PAN |
| 2. Bank A/c Type: Tick the relevant box | 8. Telephone Number (Optional) |
| 3. Fill Bank Account Number | 9. Email ID |
| 4. Fill name of customer's bank | 10. Period: Starting date and the ending date |
| 5. IFSC / MICR code: Fill respective code | 11. Signature as per bank account of NACH registration (not more than 40 years) in the format (DD/MM/YYYY) |
| 6. Mention Maximum Amount | 12. Name: Mention Holder Name as Per Bank Record |

One Time Mandate (OTM) is an authorization to the bank issued by an investor to debit their bank account up to a maximum limit as provided by the investor in the OTM mandate. This would facilitate debits for all purchases initiated by the investor up to maximum limit from the bank account provided in the section.

- To avail this facility the investor of the fund shall be required to submit one time mandate, filled in with all the details in the designated mandate form. Please attach a cancelled cheque copy.
- Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the one updated in the application form/ existing in the folio, the details provided on the mandate will be updated at the time of creation of folio/in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
- Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to third party verification.
- Investors are deemed to have read and understood the terms and conditions of OTM Facility, SIP registration through OTM facility, the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of Unifi Mutual Fund.
- Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
- Utility Code of the Service Provider will be mentioned by Unifi Mutual Fund
- Tick on the respective option to select your choice of action and instruction.
- The numeric data like Bank account number, Investors account number should be left padded with zeroes.
- Please mention the Name of Bank and Branch, IFSC / MICR Code also provide An Original Cancelled copy of the cheque of the same bank account registered in One Time Mandate.
- Amount payable for service or maximum amount per transaction that could be processed in words. The amount in figures should be same as the amount mentioned in words, in case of ambiguity the mandate will be rejected.
- For the convenience of the investors the frequency of the mandate will be "As and When Presented"
- Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking.
- Unifi MF may amend the above terms and conditions, at any time without prior notice to investors and such amended terms and conditions will there upon apply to and will binding on the investors.
- For period selection investor has option to mention end date.
- The validity of the mandates can be only for a maximum duration of 40 years or below from the Start Date.

Instructions for Sip Form

I. DISTRIBUTOR INFORMATION

- 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.
- Please mention 'DIRECT' in case the application is not routed through any one distributor.
- Pursuant to SEBI circular dated September 13, 2012, mutual funds have created a unique identity number of the employee/ relationship manager/ salesperson of the distributor interacting with the investor for the sale of mutual fund products, in addition to the AMFI Registration Number (ARN) of the distributor. This Employee Unique Identification Number is referred as "EUIN". EUIN aims to assist in tackling the problem of mis-selling even if the employee/relationship manager/salesperson leaves the employment of the distributor or his/her sub broker. Quoting of EUIN is mandatory in case of advisory transactions.
- Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided, in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIN of the Sales Person (if any) in the "EUIN" column.
- Distributors are advised to ensure that they fill in the RIA code, in case they are a Registered Investment Advisor.
- Investors are requested to note that EUIN is applicable for transactions such as Purchases, Switches, Registrations of SIP / STP and EUIN is not applicable for transactions such as Instalments under SIP/ STP / SWP / Reinvestments, Redemption, SWP Registration.
- EUIN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ARN-14/12-13 dated July 13, 2012.
- Please tick the box provided for EUIN declaration in this section in case the ARN is mentioned in the distributor section and the EUIN is left blank.

II. General Instructions

- SIP through NACH/OTM Facility is available on all dates except on 29th, 30th and 31st of the month. In case these days are non-business days for the scheme, then SIP will be processed on the next business day.
 - The investor agrees to abide by the terms and conditions of NACH facility of NPCL.
 - The end date of SIP registration for unitholders (other than Minor holders) will be considered as the end date of NACH mandate or the end date mentioned by the investor whichever is earlier.
 - Investor will not hold AMC / Trustee / Unifi MF and its service providers responsible if the transaction is delayed or not effected by the Investor's Bank or if debited in advance or after the specific SIP date due to various reasons or for any bank charges debited by his banker in his account towards NACH Registration / Cancellation / Rejections.
 - The AMC/ Trustee/ Unifi MF reserves the right to reverse allotments in case the NACH/OTM is rejected by the bank for any reason whatsoever.
 - The AMC/ Trustee/ Unifi MF shall not be responsible and liable for any damages/compensation for any loss, damage etc., incurred by the investor. The investor assumes the entire risk of using the facility of NACH/OTM and takes full responsibility for the same.
 - The AMC/Trustee reserves the right to discontinue or modify the SIP facility at any time in future on a prospective basis.
 - The AMC/ Trustee reserves the right to discontinue the SIP in case of Direct Debit through NACH routes are rejected by the investor bank for any reasons.
 - For scheme related details, please refer to the Scheme Information Document (SID) / Key Information Memorandum (KIM) and the addendum issued from time to time.
 - The AMC/ Trustee reserves the right to reject any application without assigning any reason thereof.
 - The AMC will endeavor to have the cancellation of registered SIP mandate within 2 business days from the date of receipt of the cancellation request from the investor. The existing instructions/mandate would continue till the date that when it is confirmed the SIP has been cancelled.
 - For intimating the change in bank particulars, please use the NACH/OTM Form to modify transaction limit or add / remove banks from the NACH/OTM facility. Also, fill-up all the relevant details as applicable. Requests for any changes / cancellation in the NACH Bank Mandate request should be submitted at least 30 Business days in advance.
 - Where a onetime mandate is already registered in a folio for a bank account, the Unit Holder(s) will have to fill only the SIP Registration Form and there is no need of a separate cheque to be given along with the SIP Registration Form.
 - SIP Frequency - Monthly (For Minimum amount of Rs. 500 and in multiples of Re.1 thereof, minimum No. of instalments is 12)
 - Any Day SIP:** Investors can choose any preferred date except for 29th, 30th and 31st of the month as SIP debit date.
 - SIP start date shall be at a gap of minimum 15 days from the NFO Closure Day.
- The following applications will be considered as **'Not In Good Order' (NIGO)** and are liable to be rejected:
- If folio number mentioned in the SIP & Top up form does not match Folio Number mentioned in NACH/OTM registration mandate Form.
 - If the folio number mentioned in the NACH/OTM mandate registration form does not match with our record, the NACH/OTM mandate will not be registered.
 - If the SIP period mentioned in SIP via NACH/OTM form is beyond the NACH/OTM validity period or NACH/OTM validity period expired.
- In case of minor application, AMC will register standing instructions till the date of minor attaining majority, though the instructions may be for a period beyond that date. Prior to minor attaining majority, AMC shall send advance notice to the registered correspondence address advising the guardian and the minor to submit an application form along with prescribed documents to change the status of the account to 'major'. The account shall be frozen for operation by the guardian on the day of minor attains the age of majority and no fresh transactions will be permitted till the documents for changing the status are received
 - SIP Top-up Facility**
 - Investors subscribing for this facility separately are required to submit the request at least 25 days prior to the SIP top up date
 - SIP Top-up facility can be availed at half yearly and yearly intervals. In case the frequency is not specified, the top up will be processed with the default Half-yearly frequency.
 - For Monthly SIP
 - Half yearly Top-up SIP under this option, the amount of investment through SIP instalment shall be increased by the amount chosen /designated by investor post every 6th (sixth) SIP instalment
 - Yearly Top-up SIP under this option, the amount of investment through SIP instalment shall be increased by the amount chosen /designated by investor post every 12th (twelfth) SIP instalment
 - The Minimum TOP up amount shall be in multiple of Rs 500/- and in multiple of Rs 500 thereafter.
 - The top up cap amount should not exceed the maximum amount as mentioned in the NACH mandate. In case the top up cap amount exceeds the maximum amount as mentioned in the NACH mandate, then the lesser amount shall be considered as the default cap amount.
 - The Top-up details cannot be modified once enrolled. In order to make any changes, the investor must cancel the existing SIP and enroll for a fresh SIP with Top-up option.

UNIFI MUTUAL FUND

Unifi Asset Management Pvt. Ltd.
11, Kakani Towers, 15 Khader Nawaz Khan Road, Nungambakkam, Chennai - 600 006

☎ 1800 309 2833
✉ services@unifimf.com
🌐 www.unifimf.com

R&TA - COMPUTER AGE MANAGEMENT SERVICES

Unit: Unifi Mutual Fund
Computer Age Management Services Limited
#158, Rayala Towers, Tower 1, Ground Floor, Anna Salai, Chennai - 600 002

☎ 1800 309 2833
✉ enq_ufi@camsonline.com
🌐 www.camsonline.com

Declaration Form of Ultimate Beneficial Ownership [UBO]/Controlling Persons



Investor details

Investor Name _____

Folio _____

PAN

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II. Category

Our company is a Listed Company on a recognized stock exchange in India / Subsidiary of a or Controlled by a Listed Company [If this category is selected, no need to provide UBO details].

Name of the Stock Exchange where it is listed#: _____

Security ISIN# _____

Name of the Listed Company (applicable if the investor is subsidiary/associate): _____

#mandatory in case of Listed company or subsidiary of the Listed Company

Unlisted Company
 Partnership Firm /LLP
 Unincorporated association /body of individuals
 Public Charitable Trust
 Private Trust
 Religious Trust
 Trust created by Will
 Others [please specify] _____

UBO/Controlling Person(s) details

Does your company/entity have any individual person(s) who holds direct / indirect controlling ownership above the prescribed threshold limit? (Refer Instructions A & B) Yes No

If 'YES' - We hereby declare that the following individual person holds directly / indirectly controlling ownership in our entity above the prescribed threshold limit. Details of such individual(s) are given below.

If 'NO' - declare that no individual person (directly / indirectly) holds controlling ownership in our entity above the prescribed threshold limit. Details of the individual who holds the position of Senior Managing Official (SMO) are provided below.

	UBO-1 / Senior Managing Official (SMO)	UBO - 2	UBO - 3																								
Name of the UBO/SMO#																											
UBO / SMO PAN#. For Foreign National, TIN to be provided]																											
% of beneficial interest#	<input type="checkbox"/> >10% controlling interest. <input type="checkbox"/> >15% controlling interest. <input type="checkbox"/> >25% controlling interest. <input type="checkbox"/> NA. N.A (for SMO)	<input type="checkbox"/> >10% controlling interest. <input type="checkbox"/> >15% controlling interest. <input type="checkbox"/> >25% controlling interest. <input type="checkbox"/> NA. N.A (for SMO)	<input type="checkbox"/> >10% controlling interest. <input type="checkbox"/> >15% controlling interest. <input type="checkbox"/> >25% controlling interest. <input type="checkbox"/> NA. N.A (for SMO)																								
UBO / SMO Country of Tax Residency#																											
UBO / SMO Taxpayer Identification Number / Equivalent ID Number#																											
UBO / SMO Identity Type																											
UBO / SMO Place & Country of Birth#	Place of Birth: Country of Birth:	Place of Birth: Country of Birth:	Place of Birth: Country of Birth:																								
UBO / SMO Nationality																											
UBO / SMO Date of Birth [dd-mmm-yyyy] #	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">D</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">M</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> <td style="width: 20px; height: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
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D	D	M	M	Y	Y	Y	Y																				
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UBO / SMO PEP#	<input type="checkbox"/> Yes – PEP <input type="checkbox"/> Yes – Related to PEP <input type="checkbox"/> N – Not a PEP	<input type="checkbox"/> Yes – PEP <input type="checkbox"/> Yes – Related to PEP <input type="checkbox"/> N – Not a PEP	<input type="checkbox"/> Yes – PEP <input type="checkbox"/> Yes – Related to PEP <input type="checkbox"/> N – Not a PEP																								
UBO / SMO Address [include City, Pin code, State, Country]	Address: City: Pin code: State: Country:	Address: City: Pin code: State: Country:	Address: City: Pin code: State: Country:																								

UBO / SMO Address Type	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residence <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
UBO/SMO Email			
UBO/SMO Mobile			
UBO/SMO Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others
UBO/SMO Father's Name			
UBO/SMO Occupation	<input type="checkbox"/> Public Service Business <input type="checkbox"/> Private Service <input type="checkbox"/> Others	<input type="checkbox"/> Public Service Business <input type="checkbox"/> Private Service <input type="checkbox"/> Others	<input type="checkbox"/> Public Service Business <input type="checkbox"/> Private Service <input type="checkbox"/> Others
SMO Designation#			
UBO/SMO KYC Complied?	<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.	<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.	<input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes,' please attach the KYC acknowledgement. If 'No,' complete the KYC and confirm the status.
<p># Mandatory column. Note: If the given columns are not sufficient, required information in the given format can be enclosed as additional sheet(s) duly signed by Authorized Signatory.</p> <p>* Participating Mutual Fund(s) / RTA may call for additional information/documentation wherever required or if the given information is not clear / incomplete / correct and you may provide the same as and when solicited.</p>			

Declaration

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false, untrue, misleading, or misrepresenting, I/We am/are aware that I/We may be liable for it including any penalty levied by the statutory/legal/regulatory authority. I/We hereby confirm the above beneficial interest after perusing all applicable shareholding pattern and MF/RTA/other registered intermediaries can make reliance on the same. I/We hereby authorize you [CAMS/Unifi Mutual Fund/ Unifi Asset Management Pvt. Ltd] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs (the Authorized Parties) or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries /or any regulated intermediaries registered with SEBI / RBI/ IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your / Fund's end or by domestic or overseas regulators/ tax authorities.

Authorized Signatory	Authorized Signatory	Authorized Signatory
Name:	Name:	Name:
Designation:	Designation:	Designation:

Place _____

Date

D	D	M	M	Y	Y	Y	Y
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Instructions on Controlling Persons / Ultimate Beneficial Owner

As per PMLA guidelines and relevant SEBI circulars issued from time to time, non-individuals and trusts are required to provide details of controlling persons [CP] / ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such CPs/ UBOS. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted and includes a person who exercises ultimate effective control over a legal person or arrangement.

A. For Investors other than individuals or trusts:

- i. The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
 - more than 10% of shares or capital or profits of the juridical person, where the juridical person is a company.
 - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership.
 - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- ii. In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- iii. Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

B. For Investors which is a trust:

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 10% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

C. Exemption in case of listed companies /foreign investors

The client or the owner of the controlling interest is a company listed on a stock exchange or is a majority-owned subsidiary of such a company, there is no need for identification and verification of the identity of any shareholder or beneficial owner of such companies and hence exempted from UBO declaration provided other requisite information is provided. Intermediaries dealing with foreign investors' viz, Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012 and other circulars issued from time to time, for the purpose of identification of beneficial ownership of the client.

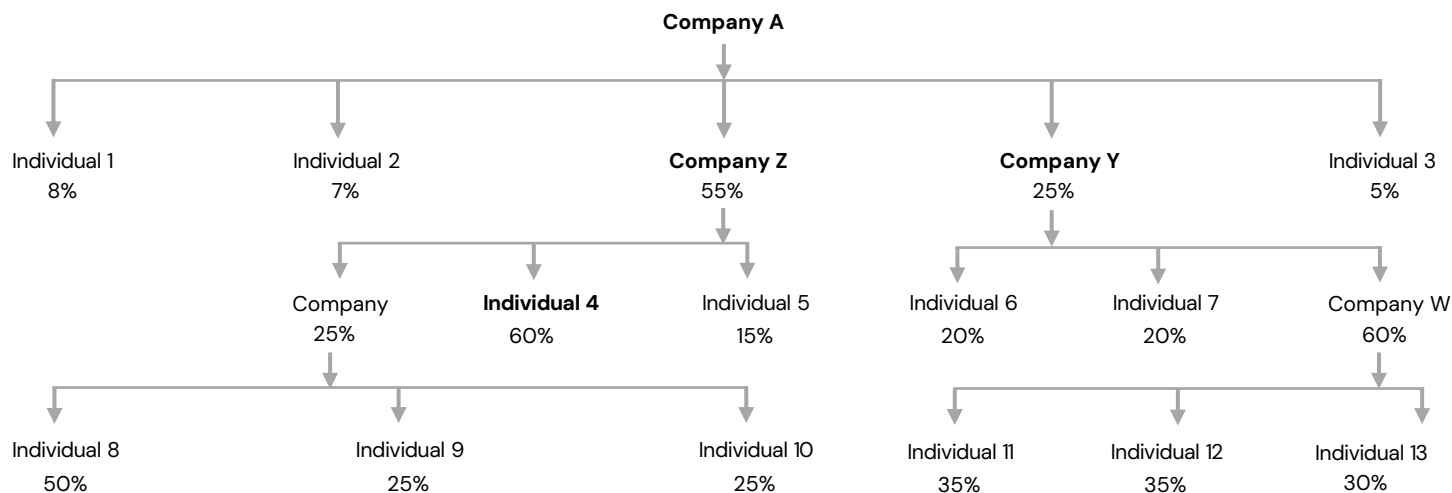
D. KYC requirements

Beneficial Owner(s) / Senior Managing Official (SMO) is/are required to comply with the prescribed KYC process as stipulated by SEBI from time to time with any one of the KRA & submit the same to AMC. KYC acknowledgement proof is to be submitted for all the UBO(s) / SMO(s).

E. Controlling Person Type [CP/UBO] Codes:

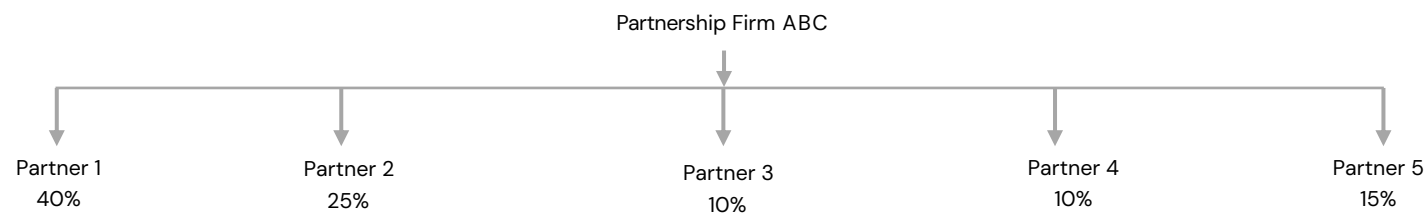
CP/UBO Code	Description	CP/UBO Code	Description
C01	CP of legal person-ownership [Refer A (i) above]	C08	CP of legal arrangement-trust-other [Refer B above]
C02	CP of legal person-other means [Refer A (ii) above]	C09	CP of legal arrangement-trust-other- settlor equivalent [Refer B above]
C03	CP of legal person-senior managing official [Refer A (iii) above]	C10	CP of legal arrangement-trust-other-trustee-equivalent [Refer B above]
C04	CP of legal arrangement-trust-settlor [Refer B above]	C11	CP of legal arrangement-trust-other- protector equivalent [Refer B above]
C05	CP of legal arrangement-trust-trustee [Refer B above]	C12	CP of legal arrangement-trust-other- beneficiary-equivalent [Refer B above]
C06	CP of legal arrangement-trust-protector [Refer B above]	C13	CP of legal arrangement-trust-other- other-equivalent [Refer B above]
C07	CP of legal arrangement-trust-beneficiary [Refer B above]	C14	Unknown

Illustration No. 1 – Company A



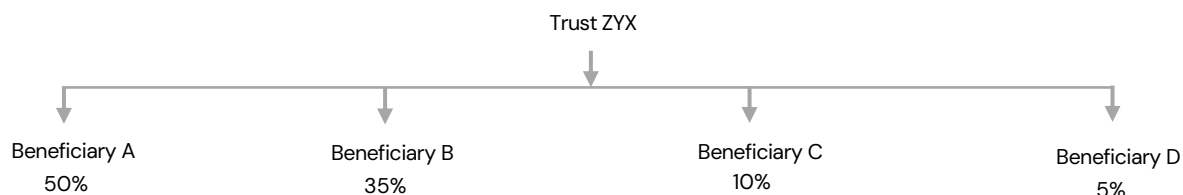
For Applicant A, Individual 4 is considered as UBO as it holds effective ownership of 33% in Company A. Hence details of Individual 4 must be provided with KYC proof, Shareholding pattern of Company A, Z & Y to be provided along with details of persons of Company Y who are senior managing officials and those exercising control.

Illustration No. 2 – Partner ABC



For Partnership Firm ABC, Partners 1, 2 and 5 are considered as UBO as each of them holds >=15% of capital. KYC proof of these partners needs to be submitted including shareholding.

Illustration No. 3 – Trustee ZYX



For Trust ZYX, Beneficiaries A, B and C are considered as UBO as they are entitled to get benefitted for >10% of funds used. KYC proof for these beneficiaries needs to be submitted. Additionally, if they have nominated any person or group of persons as Settlor of Trust / Protector of Trust, relevant information to be provided along with the proof indicated.

Please address all future communication(s) in connection with this application to the Registrar & Transfer Agent of the Scheme:

Computer Age Management Services Limited (CAMS)

Unit: Unifi Mutual Fund

Rayala Tower 3,

7th Floor, 158, Anna Salai, Chennai – 600 002.

Toll Free Number : 18003092833

E-mail: eng_ufi@camsonline.com

Website Address: www.camsonline.com

Unifi Asset Management Private Limited

11, Kakani Towers, 25 Khader Nawaz Khan Road,

Nungambakkam High Road,

Chennai, Tamil Nadu– 600006

Toll Free Number : 18003092833

E-mail: services@unifimf.com

Website Address: www.unifimf.com

Investor Name											
PAN	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>										

- I/We hereby confirm that above stated entity / organization is falling under **"Non-profit organization"** [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).
- Enclosed relevant documentary proof evidencing the above definition.

We further confirm that we have registered with DARPAN Portal of NITI Aayog as NPO and registration details are as follows:

Registration Number of DARPAN portal	<Unique ID provided by DARPAN portal should be provided>
--------------------------------------	--

If not, please register immediately and confirm with the above information. In absence of receipt of the Darpan portal registration details, MF/AMC/RTA will be required to register your entity on the said portal and/or report to the relevant authorities as applicable.

- I/We hereby confirm that the above stated entity / organization is **NOT** falling under Non-profit organization as defined above or in PMLA Act/Rules thereof.

I / We acknowledge and confirm that the information provided above is true and correct to the best of my / our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I / We am / are aware that I / We may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines / charges under intimation to me / us or collect such fines / charges in any other manner as might be applicable. I / We hereby authorize you [CAMS / The Fund / The AMC / Other participating entities] to disclose, share, rely, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to any of the Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me / us of the same. Further, I / We authorize to share the given information to other SEBI Registered Intermediaries or any other statutory authorities to facilitate single submission/ update & for regulatory purposes. I / We also undertake to keep you informed in writing about any changes/ modification to the above information in future within 30 days of such changes and undertake to provide any other additional information as may be required at your/ Fund's end or by domestic or overseas regulators / tax authorities.

Signature with relevant seal:

Authorized Signatory	Authorized Signatory	Authorized Signatory
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Place: _____

Date:

D	D	M	M	Y	Y	Y	Y
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1. Third Party Payment Declaration (Should be enclosed with each payment/SIP Enrolment)

Payments by : Parent/Grand-Parents/Related Persons other than the Registered Guardian

Payments to : Minor Folio only; In consideration of Natural love and affection or as gift only

Maximum Value : Not Exceeding Rs 50,000/- (each regular purchase or per SIP instalment)

Application and Payment Details (All details below are Mandatory, including relationship, PAN & KYC):

Folio No. _____ **Application Form No.** _____

Beneficiary name _____

Investment amount _____ Lumpsum SIP Auto debit

Bank Details Account no : _____

Bank name : _____ Branch _____

Cheque No. (Lump sum) _____ **Dated**

D	D	M	M	Y	Y	Y	Y
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Cheque Drawn on A /c No. _____

Declaration and Signatures

Parent/Grand-Parents/Related Persons other than the Registered Guardian

Guardian of Minor, as registered in the Folio

Name _____

Relationship with Minor _____

PAN _____

KYC Acknowledgement Attached (Mandatory for any amount)

Attached (Mandatory for any amount)

Declaration I hereby declare and confirm that the minor stated above is the beneficial owner of the investment details mentioned above and I am providing the funds for these investments on account of my natural love and affection or as gift from my bank account only.

I confirm that I am the legal guardian of the Minor, registered in folio and have no objection to receiving these funds on behalf of the Minor.

Signature _____

Contact Number _____

2. Payment by Employer on Behalf of Employee (under Systematic Investments Plans through Payroll deductions)

To whomsoever it may concern

We hereby declare that the Application Form No/s. _____ for subscription of units in _____ (Name of the Scheme / Plan / Option) is accompanied by

Cheque No. _____ Dated _____ Drawn on _____ (Name of the Bank / Branch).

We confirm that the beneficial owner(s) of the investment in these units is/are _____

_____ (Name of the Employee/s, with employee number/s),

who is / are my / our employee/s and am providing the funds for these investments through the payroll deduction.

Signature of Declarant(s) _____

Name of Declarant(s) _____

PAN _____ KYC Acknowledgement attached (Mandatory for any amount)

Address of Declarant(s) _____

City _____ State _____

Postal code _____ Country _____

Signature of Beneficiary (ies)

3. Custodian on Behalf of an FII or Client (Should be enclosed with each payment)

TO WHOMSOEVER IT MAY CONCERN

Application and Payment Details (All details below are Mandatory):

Folio No. _____ **Application Form No.** _____
Beneficiary name / Investor name _____
Investment amount _____
Payment Mode Cheque Fund transfer RTGS NEFT
Payment Cheque / UTR No. _____ **Dated**

D	D	M	M	Y	Y	Y	Y
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Payment from Bank _____
Payment from A/c No. _____

Signature of Beneficiary (ies)

We hereby declare that the Application Form No/s. _____ for subscription of units in _____ (Name of the Scheme / Plan / Option) is accompanied by
 Cheque No. _____ Dated _____ Drawn on _____ (Name of the Bank / Branch.
 We confirm that the beneficial owner(s) of the investment in these units is/are _____ (Name of the Employee/s, with employee number/s),
 who is / are my / our employee/s and am providing the funds for these investments through the payroll deduction.

Signature of Declarant(s) _____
 Name of Declarant(s) _____
 PAN _____ KYC Acknowledgement attached (Mandatory for any amount)
 Address of Declarant(s) _____

 City _____ State _____
 Postal code _____ Country _____