Distributor info					N APPLICATION FO		e Use Only		
Advisor ARN	Sub-brok	er/Branch Co	de Sub-b	roker ARN	Representative EUIN	Applicat	ion received	ł	
SMC GLOBAL ARN - 29345									
	sion on investn	nent made by th	e investor, if a	ny, shall be paid	to the ARN Holder (AMFI re	egistered distri	butor) direct	ly by the invest	or, based o
nvestor's assessmen I/We hereby confirm that listributor/sub broker or n	t of various fact the EUIN box ha otwithstanding the	ors including se s been intentionally advice of in-approp	ervice rendere left blank by me riateness, if any, p	d by the ARN H us as this transaction rovided by the emplo	to the ARN Holder (AMFI re folder. n is executed without any interaction of yee/relationship manager/sales person	or advice by the en of the distributor/s	nployee/relation sub broker."	ship manager/sales	person of the
Signatures First/Sole	Applicant/Guardi	an <b>X</b>		Second	Applicant <b>X</b>	Th	ird Applicant	X	
Transaction Cha			3 and tick the	appropriate op	tion)				
Applicable for transa	ctions routed th	ırough distribute	ors/agents/bro	kers who have o	pted to receive transaction cha	rges.			
□ I am a first time in	vestor in mutua	l funds (Rs.150	will be deduct	ed).	☐ I am an existing 1	mutual funds is	nvestor (Rs.1	00 will be deduc	ted).
Existing Unithol	ders (To be fi	led in Block Let	ters. Please p	rovide the follo	wing details in full; Please re	fer Instruction	2)		
First Applicant Nam	ie 💷								
Customer Folio No.				Acco	ount No.				
Unit Holder Info	ormation (To l	oe filled in Block	c Letters. Use	one box for one	e alphabet leaving one box b	lank between	name and s	urname)	
Name of First/Sole A	pplicant								
City & Country of bi	rth				Date of Birth   D   D   M	MYYY	Y   Y	Gender: □	Male □ F
PAN No. (Mandatory)				Enclosed: □	PAN Card Copy  KYC applica	tion*   KYC ac	cknowledgmen	t* □ Proof of Ide	entity & Ado
	351 51 1	1: :136							
Guardian details for	Minors: Kelati	onship with Min	ior** 🗆 Fa	ther 🗆 Mot	her 🗆 Legal Guardian	☐ (Please sp	pecity relation	nship)	1 1
Name of Guardian	. 1				Date of Birth DDM	13.6   37   37	1 37 1 37 1		77/1 07
City & Country of b	irth						I I		□ Male □ I
PAN No. (Mandatory)				Enclosed: □	PAN Card Copy   KYC applica	tion*   KYC ac	cknowledgmen	t* 🗆 Proof of Ide	entity & Ado
Power of Attorney (PO	A) Details: Nar	ne							
Status: 🗆 Resident I	ndividual 🗆 N	JRI/PIO □ O	thers (Please s	pecify)	Date of Birth D	D M M	YYY	Y Gender:	□ Male □ I
PAN No. (Mandatory)				Enclosed: [	☐ PAN Card Copy ☐ KYC applic	ation*   KYC a	ncknowledgmen	ıt* □ Proof of Ide	entity & Ado
Joint Holder Inf	ormation (If a	any)		Mode	of Operation :   Single	☐ Joint	☐ Eithe	r or Survivo	r(s) [Defo
Name of Second Ap							TTT	I I I	
City & Country of b	irth				Date of Birth DDDM	MYYY	YY	Gender:	□ Male □ I
PAN No. (Mandatory)				Fnclosed: □	PAN Card Copy   KYC applica			r* □ Proof of Ide	entity & Ado
							- Transmitted		
Name of Third App	licant								
City & Country of b	irth				Date of Birth DD M				□ Male □ F
PAN No. (Mandatory)				Enclosed: □	PAN Card Copy $\ \square$ KYC applica	tion* 🗆 KYC as	cknowledgmen	t* 🗆 Proof of Ide	entity & Ado
KYC/FATCA Det	ails (Mandator	y. Please Tick/	Specify. The	application is lia	ble to get rejected if details n	ot filled.)			
Status details for	1st Applicant	2 <sup>nd</sup> Applicant	3rd Applicant	Guardian	Occupation details for	1st Applicant	2nd Applicar	nt 3rd Applicant	t Guardi
Resident Individual					Private Sector				
NRI/PIO		-			Public Sector				
Sole Proprietorship Minor through		-		-	Government Service				
Guardian#		-	-	-	Business				
Non Individual	Company/Body				Professional				
	☐ Corporate ☐ Partnership				Agriculturist Retired				
	Trust	_			Housewife				
	☐ Society ☐ HUF	i -	-	_	Student				
	☐ Bank				Others (Please specify)				
	□ AOP □ FI/FII/FPI								
Others (Please specify)					FATCA / CRS details (Pleas your tax residency, if required)	e consult your p	rofessional tax	advisor for furthe	er guidance o
					For Individuals (including	sole proprieto	r) - Tax resid	ence declaratio	n
Gross Annual Incom					I am a tax resident of India				
Below 1 lac 1-5 lac					and not resident of any other country	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
5-10 lac					If No:				
10-25 lac					Please enclose FATCA form				
25 lac- 1 cr 1 -5 cr					Non individuals: Please enc	lose FATCA f	orm		
5 - 10 cr					Politically Exposed Person (	(PEP) details:	Is a PEP R	elated to PEP 1	Not Applic
> 10 cr					1st Applicant				
OR Networth in Rs. (Mandatory for					2 <sup>nd</sup> Applicant 3 <sup>rd</sup> Applicant				
Non Individual)	as on	1	as on	as on	Guardian				
(not older than 1 year)	[D [D [M [M [Y [Y [Y [Y [Y ]		D D M M IX IX IX IX IX		Authorised Signatories				
Ultimate Beneficiar		) Details (For I	Non individua	ls only)	Promoters				
(UBO Declaration a ☐ Applicant is the U		nyanter and /D f	au.lt)		Partners Karta				
☐ Applicant is the U	the UBO(s) of	nvestment (Det: f this investmen	auit) t		Whole-time Directors				
								-	
Acknowledgemen	nt Slip						Sl. No	)	
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	City		Sta	nte	Pinco	ode				
Overseas Address for NRIs/PIOs City	State		C	intry	Pin/2	7ip				
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Email   _	r account related comm	unication by amai	1 -	Mobile I/We do not wish to		undata	00.00	1 / 011	r mobile	n n h o
n case no option is selected the application will b Allowed only for investments through Micro acknowledgement issued by KRA (Mandatory identity proof is required to be submitted #Do provide following documents for evidencing th case of investments held in the name of a mi \$Mandatory if you have not completed your KY	o investment route in lieu of l for all Investors (including S ate of Birth and Document p te relationship:- Father/Motl	KYC and PAN. Also i Sikkim Resident) irre proof – mandatory fo her – Photocopy of th	n this case it is mandat spective of the amoun r investments through e certificate mentioni	tory to attach contact details it of investment).For investi h Minors and investments in ng the date of birth of the M	s slip available on wo ments through Mic n FIPEP (in FIPEF inor andParent's N	ebsite.*Pl ro investr only ind ame; Leg	ease pr nent ro ividual al Guar	ovide oute, a ls may	copy of tl ddress pr invest).* Court O	he KY oof ar *Plea rder. 1
Bank Details (Mandatory - For new inv	restors) - For payment thro	ough electronic mod	le, please attach a	cancelled cheque leaf or	a copy of the che	que.				
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F. D. 1	Savings □ Current	E-N-D-	I NIBO	□ NRE □ FCì	√R □ Othe	Pin				
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Investment Details: I/We would li	ke to invest in (Please	read Product labe	eling details availa	ble on cover page of K	M)					
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