

Common Application Form - Lumpsum Cum SIP Application Form (Form 1) Application No.

	tor Code AR	[№] 1897	Sub-Distributor Code ARN-		ode for Sub-broker Employee	7/	EUIN No.	E031562
			eft blank by me/us as this is an "execution- ne above distributor or notwithstanding the a butor and the distributor has not charged an	only" transaction without any interaction or advice of in-appropriateness, if any, provided y advisory fees on this transaction.	First Holder	Second Hol	der	Third Holder
TRANS/	ACTION CHA	ARGES (Please ✓ any o	one of the below) (Refer Instruc	ction No. T)				
l am	a first time inv	restor in mutual funds (₹ 1	50 will be deducted) OR I a	ım an existing investor in mutual fun	ds (₹ 100 will be dec			ns routed through for transaction charges
		, , ,	nvestor to the AMFI registered distr Instruction No. A, C, D, S)	ibutor based on the investors' asses	sment of various fac			
Existing	g Folio Num	ber	1	*Date of Birth	D M M	Y Y Existing Inve	-	t fill in Section 4, 5 & 6
FIRST	T HOLDER D	ETAILS				PAN/PERN	-	PAN/PERN KYC
Name)					(mandatory)		enclosed Complianc
You m	nust fill in	Mobile No.		Email ID	! !			!
Status	s	Resident Individu	ıal 🗌 HUF 🗌 Propriet	or Society Bank	☐ NRI-NRE	☐ NRI-NR0 ☐] PIO [Trust FII
		Partnership Firm	Company On Beha	alf of Minor relationship of min	or with the guardian	Govt. Entity	Others (Specify)
Occup	pation	Service	Professional Proprie	torship Housewife	Retired	Student] Agricultu	ıre
		Business	Others (Specify)					
JOINT	T HOLDER DI	ETAILS (In case of Mine	or, there shall be no joint holder	rs)		PAN/PERN		PAN/PERN KYC Proof Compliance
See.	nd Holder		Name			(mandatory)		enclosed Complianc
	Holder					+	+++	
	n/POA/Proprietor							
	of holding	Anyone or Surv	ivor Joint	(Default option is anyone or s	urvior)			
2. INVE	ESTMENT &	PAYMENT DETAILS (PI	ease refer to the Instruction No	o. E. J. N)	·			
Type of	f Investment	(refer to instruction A).	Lumpsum SIP	Micro SIP (Refer to point J / v	of the instructions) Dh	noto ID No (for N	icro SIP)	
Dayres -					or rue instructions) LII	1010 ID 110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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•	•• "	ase ✓): Self	Third Party Payment (plea		,	10t0 ID 140.	Plan	_
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Scheme

Stamp & Signature

Amount (Rs.)

Dated

Instrument No.

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Overseas <i>l</i>	Addres	s for N	RIs / PI	0s / F	lls (I	Vlandat	ory)																		
Tel Office					Τ	T		Te	el Home							Fax									
5. BANK D	ETAILS	(Mano	atory) Re	demptio	n / Div	vidend /	Refund pa	youts wil	be credited	I into this	s bank ac	ount in ca	e it is in the	current lis	t of banks	with whor	ı IDFC M	IF has I	DC fac	ility (Please	refer to	the Ins	struction	No. I
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ECS Autosave & Standing Instructions Form for Systematic Investment Plan (SIP) (Form 2)

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