

# COMMON APPLICATION FORM

For Resident Indians and NRIs/FIIs



**Birla Sun Life**  
*Mutual Fund*

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM)

Bonanza Portfolio Ltd.	Sub Broker Name / ARN No.	
0186		

Application No.

EUN is mandatory for "Execution Only" transactions. Ref. Instruction No. 9

## TRANSACTION CHARGES FOR APPLICATIONS ROUTED THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction 1 (viii))

In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

## EXISTING UNITHOLDER please fill in your Folio No., Name & Email ID and then proceed to Section 5 (Applicable details and Mode of holding will be as per the existing Folio No.)

Existing Folio No. \_\_\_\_\_

### 1. FIRST / SOLE APPLICANT INFORMATION (MANDATORY) (Refer Instruction No. 2,3,4) Fresh / New Investors fill in all the blocks. (1 to 10) In case of investment "On behalf of Minor", Please Refer Instruction no. 2(ii)

NAME OF FIRST / SOLE APPLICANT Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y ☐ KYC

NAME OF THE SECOND APPLICANT Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y ☐ KYC

NAME OF THE THIRD APPLICANT Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y ☐ KYC

\*\* Mandatory in case the First / Sole Applicant is Minor

### NAME OF THE GUARDIAN (In case First / Sole Applicant is minor) / CONTACT PERSON - DESIGNATION / PoA HOLDER (In case of Non-individual Investors)

Mr. Ms. M/s. \_\_\_\_\_

RELATIONSHIP OF GUARDIAN (Refer Instruction No. 2(ii)) \_\_\_\_\_

ISD CODE \_\_\_\_\_ TEL: OFF. S T D - \_\_\_\_\_ TEL: RESI S T D - \_\_\_\_\_

### TAX STATUS (Please tick (✓) )

☐ Resident Individual ☐ FII ☐ NRI - NRO ☐ HUF ☐ Club / Society ☐ PIO ☐ Body Corporate ☐ Minor ☐ Government Body  
☐ Trust ☐ NRI - NRE ☐ Bank & FI ☐ Sole Proprietor ☐ Partnership Firm ☐ QFI ☐ Others \_\_\_\_\_ (Please Specify)

### KYC DETAILS (Mandatory)

#### OCCUPATION (Please tick (✓) )

<b>FIRST APPLICANT</b>	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife
	<input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others ..... (please specify)
<b>SECOND APPLICANT</b>	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife
	<input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others ..... (please specify)
<b>THIRD APPLICANT</b>	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife
	<input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others ..... (please specify)

#### GROSS ANNUAL INCOME (Please tick (✓) )

<b>FIRST APPLICANT</b>	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore
	Net worth (Mandatory for Non - Individuals Rs. _____ as on D D M M Y Y Y Y [Not older than 1 year])
<b>SECOND APPLICANT</b>	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore OR Net Worth _____
<b>THIRD APPLICANT</b>	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore OR Net Worth _____

#### For Individuals

☐ I am Politically Exposed Person  
☐ I am Related to Politically Exposed Person  
☐ Not Applicable

#### For Non-Individual Investors (Companies, Trust, Partnership etc.)

Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: ☐ Yes ☐ No  
(If No, please attach mandatory UBO Declaration)  
Foreign Exchange / Money Charger Services ☐ Yes ☐ No  
Gaming / Gambling / Lottery / Casino Services ☐ Yes ☐ No  
Money Lending / Pawning ☐ Yes ☐ No

#### MODE OF HOLDING (Please tick (✓) ) (Please Refer Instruction No. 2(v))

☐ Joint ☐ Single ☐ Anyone or Survivor (Default option is Anyone or survivor)

MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O.Box Address is not sufficient. Please provide full address.) (Indian Address in case of NRIs/FIIs)

CITY	STATE	PIN CODE

### ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

### COMMON APPLICATION FORM

Application No.



## Birla Sun Life Asset Management Company Limited

One India Bulls Centre , Tower 1, 17th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai 400 013

Toll Free : 1-800-270-7000/ 1-800-22-7000 | sms 'GAIN' to 56161 | Email: connect@birlasunlife.com

Collection Centre /  
BSLAMC Stamp & Signature

Received from Mr. / Ms. \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

(Please tick (✓)) **ENCLOSED** ☐ PAN Proof ☐ KYC Complied ☐ NECS Form ☐ Yes ☐ No

STATE										COUNTRY										CITY										PIN CODE									
-------	--	--	--	--	--	--	--	--	--	---------	--	--	--	--	--	--	--	--	--	------	--	--	--	--	--	--	--	--	--	----------	--	--	--	--	--	--	--	--	--

☐ SMS Transact      ☐ Online Access

Mobile No.	I/ We would like to register for my/our SMS Transact and/ or Online Access																								
Email Id																									

Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: **(Please tick (✓))**

☐ Account Statement      ☐ Annual Report      ☐ Other Statutory Information

Account No.											Account Type <small>(Please tick (✓) )</small>	<input type="checkbox"/> SAVINGS	<input type="checkbox"/> CURRENT	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> FCNR	<input type="checkbox"/> OTHERS	<small>(please specify)</small>	
IFSC CODE <sup>***</sup>											MICR CODE								
Name of the Bank																			
Branch Address																			
Pin Code						City													

<sup>^</sup>This is an 11 Digit no. available in Cheque copy. ^^This is a 9 digit number next to your Cheque Number. Please attach an extra blank cancelled cheque or a clear photocopy of a cheque. If MICR and IFSC code for Redemption/Dividend Payout is available all payouts will be automatically processed as Electronic Payout-RTGS/NEFT/Direct Credit/NECS.

Separate cheque / demand draft must be issued for each investment, drawn in favour of respective scheme name. Please write appropriate scheme name as well as the Plan / Option / Sub Option.

S. No.	*Cheque / DD Favouring Scheme Name (refer Instruction 5)	Plan / Option	Sweep to (applicable only for Dividend option)	Amount Invested (₹)	^DD Charges	Net Amount Paid (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch and Account Number
1.	BSL		Scheme Name Plan / Option					
2.	BSL		Scheme Name Plan / Option					

# (Type of Account : Saving / Current / NRE / NRO / FCNR / NRSR) \*All purchases are subject to realization of funds ^Refer to Instruction No. 5 (vi)

<b>NSDL:</b> Depository Participant Name: _____	DPID No.:	<input type="text"/> I <input type="text"/> N <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Beneficiary A/c No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>CDSL:</b> Depository Participant Name: _____			Beneficiary A/c No. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Enclosed: ☐ Client Master    ☐ Transaction/ Statement Copy/ DIS Copy

☐ I/We wish to nominate      ☐ I/We DO NOT wish to nominate and sign here ..... 1st Applicant Signature (Mandatory)

	Nominee Name and Address	Guardian Name (in case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				
			Total = 100%	

To, The Trustee, <b>Birla Sun Life Mutual Fund</b>	Date	D	D	M	M	Y	Y	A	A
Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/we hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/we hereby declare that the amount invested in the scheme is through legitimate means and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/we have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.									
<b>For Non-Individual Investors:</b> I/we hereby confirm that the object clause of the constitution document of the entity (viz. MOA / AOA / Trust Deed, etc.), allows us to apply for investment in this scheme of Birla Sun Life Mutual fund and the application is being made within the limits for the same. I/we are complying with all requirements / conditions of the entity while applying for the investments and I/we, including the entity, if the case may arise so, hereby agree to indemnify BSLAMC / BSLMF in case of any dispute regarding the eligibility, validity and authorization of the entity and/or the applicants who have applied on behalf of the entity.	First Applicant / Authorised Signatory								
<b>For NRIs only:</b> I/we confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/us Non-Resident External /Non-Resident Ordinary /FCNR account. (Refer Inst. No. 6)									
I/we confirm that details provided by me/us are true and correct.	Second Applicant								
"I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Birla Sun Life Asset Management Company Ltd. (Investment Manager of Birla Sun Life Mutual Fund) and confirm of having read, understood and agree to abide the terms and conditions for availing of the internet facility particularly mentioned on the website www.birlasunlife.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.									
The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.	Third Applicant								

S. No.	Scheme Name	Plan / Option	Net Amount Paid (₹)	Payment Details	
				Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch
1.	BSL				
2.	BSL				