

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

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|-----------------------------------|----------------------------------|---|-----------------|
| Distributor Code ARN- 0186 | Sub-Distributor Code ARN- | Internal Code for Sub-broker/ Employee | EJIN No. |
|-----------------------------------|----------------------------------|---|-----------------|

I/We hereby confirm that the EJIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

| | | |
|--------------|---------------|--------------|
| First Holder | Second Holder | Third Holder |
|--------------|---------------|--------------|

TRANSACTION CHARGES (Please ✓ any one of the below) (Refer Instruction No. T)

| | | |
|--|-----------|---|
| <input type="checkbox"/> I am a first time investor in mutual funds (₹ 150 will be deducted) | OR | <input type="checkbox"/> I am an existing investor in mutual funds (₹ 100 will be deducted) |
|--|-----------|---|

Applicable for transactions routed through a distributor who has 'opted in' for transaction charges.

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investors' assessment of various factors including service rendered by the distributor.

1. INVESTOR DETAILS (Please refer to the Instruction No. A, C, D, S)

Existing Folio Number / ***Date of Birth** Existing Investor may not fill in Section 4, 5 & 6. *Mandatory for Minor

| | | | | |
|---|---|--------------------------------|--------------------------------------|--------------------------|
| FIRST HOLDER DETAILS (please ✓) <input type="checkbox"/> Individual <input type="checkbox"/> Non Individual (please refer instruction D for UBO) | | PAN/PERN (mandatory) | PAN/PERN Proof enclosed | KYC Compliance |
| Name | | | <input type="checkbox"/> | <input type="checkbox"/> |
| You must fill in | Mobile No. | Email ID | | |
| Status | <input type="checkbox"/> Individual (Indian National) <input type="checkbox"/> PIO <input type="checkbox"/> Minor (through Guardian) <input type="checkbox"/> HUF <input type="checkbox"/> FI / Sub-account <input type="checkbox"/> Sole-proprietor <input type="checkbox"/> Partnership Firm <input type="checkbox"/> LLP <input type="checkbox"/> Company (other than Bank/FI) <input type="checkbox"/> Bank <input type="checkbox"/> Financial Institution <input type="checkbox"/> Other Body Corporate <input type="checkbox"/> Government Body <input type="checkbox"/> Charitable / Religious / Non-profit organisation <input type="checkbox"/> Educational Institution <input type="checkbox"/> Mutual Fund <input type="checkbox"/> PF Trust <input type="checkbox"/> Gratuity Fund <input type="checkbox"/> NPS Trust <input type="checkbox"/> Pension / Retirement / Superannuation Fund <input type="checkbox"/> Private Trust <input type="checkbox"/> Co-op. Society <input type="checkbox"/> Society / AOP/ BOI <input type="checkbox"/> Other (Please specify) | | | |

Note for non-individual investor: Please attach the mandatory Ultimate beneficial Ownership (UBO) Declaration Form along with the Application Form.

Residential / Tax Status Resident Non-resident Repatriable (NRE) Non-resident Non-repatriable (NRO)

DETAILS UNDER FATCA / FOREIGN TAX LAWS

Country of birth _____ Are you a resident in any country other than India for tax purposes. Yes No

If yes, please indicate all countries in which you are resident for tax purposes and the associated Foreign Tax Identification Number below.

| Country of Tax Residency | Tax Identification Number |
|--------------------------|---------------------------|
| | |
| | |

For Non Individual Investor, Please tick the relevant box below, even if Country of Tax Residency is India *

Form W8 BEN-E / Specified declaration (Enclosed)
 Unable to Provide [IDFC Mutual Fund will contact you in due course to confirm your FATCA Status]

*Where no box is ticked, the second statement will be taken as the default implying that the applicant/investor currently is unable to confirm FATCA status and will confirm the same in future.

ADDITIONAL KYC INFORMATION

Gross Annual Income (Rs.) [Please tick(✓)] Below 1 Lacs 1 Lacs - 5 Lacs 5 Lacs - 10 Lacs 10 Lacs - 25 Lacs 25 Lacs - 1 Crore
OR 1 Crore - 5 Crore 5 Crore - 10 Crore above 10 Crore

Net-worth (Mandatory for Non-Individuals) Rs. _____ as on (Not older than 1 year)

Occupation (please tick any one and give brief details): Private Sector Service Public Sector Service Government Service Business Professional
 Agriculturist Retired Housewife Student Others _____ Please specify _____

In case of business / profession, indicate the details (including nature of goods/ services dealt in) _____

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee /Whole time Directors)

I am PEP I am a relative / associate of PEP None of these (for definition of PEP refer instruction X)

Non-Individual Investors involved/ providing any of the mentioned services

Foreign Exchange / Money Changer Services Gaming/Gambling/Lottery/Casino Services Money Lending / Pawning None of these

IDFC MUTUAL FUND - ACKNOWLEDGMENT SLIP (To be filled in by the investor.)

Application No.

Received, subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form.

From

| Instrument No. | Dated | Amount (Rs.) | Scheme |
|----------------|-------|--------------|--------|
| | | | |

Stamp & Signature

| SECOND HOLDER DETAILS | | PAN/PERN (mandatory) | | PAN/PERN Proof enclosed | | KYC Compliance | |
|-----------------------|--|----------------------|--|-------------------------|--|--------------------------|--------------------------|
| Name | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

DETAILS UNDER FATCA / FOREIGN TAX LAWS
 Country of birth _____ Are you a resident in any country other than India for tax purposes. Yes No

If yes, please indicate all countries in which you are resident for tax purposes and the associated Foreign Tax Identification Number below.

| Country of Tax Residency | Tax Identification Number |
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| | |
| | |

ADDITIONAL KYC INFORMATION

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OR 1 Crore - 5 Crore 5 Crore - 10 Crore above 10 Crore

Net-worth (Mandatory for Non-Individuals) Rs. _____ as on

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 (Not older than 1 year)

Occupation (please tick any one and give brief details): Private Sector Service Public Sector Service Government Service Business Professional
 Agriculturist Retired Housewife Student Others _____ Please specify _____

In case of business / profession, indicate the details (including nature of goods/ services dealt in) _____

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee /Whole time Directors)
 I am PEP I am a relative / associate of PEP None of these (for definition of PEP refer instruction X)

| THIRD HOLDER DETAILS | | PAN/PERN (mandatory) | | PAN/PERN Proof enclosed | | KYC Compliance | |
|----------------------|--|----------------------|--|-------------------------|--|--------------------------|--------------------------|
| Name | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

DETAILS UNDER FATCA / FOREIGN TAX LAWS
 Country of birth _____ Are you a resident in any country other than India for tax purposes. Yes No

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| Country of Tax Residency | Tax Identification Number |
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| | |

ADDITIONAL KYC INFORMATION

Gross Annual Income (Rs.) [Please tick(✓)] Below 1 Lacs 1 Lacs - 5 Lacs 5 Lacs - 10 Lacs 10 Lacs - 25 Lacs 25 Lacs - 1 Crore
OR 1 Crore - 5 Crore 5 Crore - 10 Crore above 10 Crore

Net-worth (Mandatory for Non-Individuals) Rs. _____ as on

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 (Not older than 1 year)

Occupation (please tick any one and give brief details): Private Sector Service Public Sector Service Government Service Business Professional
 Agriculturist Retired Housewife Student Others _____ Please specify _____

In case of business / profession, indicate the details (including nature of goods/ services dealt in) _____

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee /Whole time Directors)
 I am PEP I am a relative / associate of PEP None of these (for definition of PEP refer instruction X)

| Guardian/POA/Proprietor | | PAN/PERN (mandatory) | | PAN/PERN Proof enclosed | | KYC Compliance | |
|-------------------------|--|----------------------|--|-------------------------|--|--------------------------|--------------------------|
| Name | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

DETAILS UNDER FATCA / FOREIGN TAX LAWS
 Country of birth _____ Are you a resident in any country other than India for tax purposes. Yes No

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