COMMON APPLICATION FORM Application No.:



						Mutual Fund
lame & Broker Code / ARN	Sub Broker / Sub ARN Code		Employee l		ISC Date Ti	me Stamp Reference No.
		1401				
Bonanza - 0186						
nfront commission shall be notified the affect of	invoctor to the AMEL	liotributore based #- '	vootoro' cooc	t of various factors in 1	uding the persion rendered by "	o diotributor"
pfront commission shall be paid directly by the JIN is mandatory for all transactions routed through investor has to partify the following dealers.	ough a broker. For details on En	nployee Unique Identifica	tion Number (EUI)	V), please refer Point N	No.12 given in the instructions	in the KIM. If the EUIN box is left blank, then
e investor has to certify the following declar inager/sales person of the above distributor/su						nteraction or advice by the employee/relationship ne distributor/sub broker."
				<u></u>		
O' CARTA II LIV		0:	cond a li	0 1: /	6: 4	cord a reliation in the
Signature of 1st Applicant / 0 Authorised Signatory /Po.	Guardian / A/Karta		of 2 nd Applicant / orised Signatory			ure of 3 rd Applicant / Guardian / Authorised Signatory /PoA
(Please ✓)	m Investment	01	Micro Applica	tion		○ SIP Application
RANSACTION CHARGES (Please	e ✓ any one of the belo	ow. Refer Instruction	on No. 11)			
O I AM A FIRST TIME	E INVESTOR IN MUTUAL I	FUNDS	OR _	\bigcirc I	AM AN EXISTING INVEST	TOR IN MUTUAL FUNDS
Rs.150 will be deducted as transaction	on charges for transaction of	f Rs.10,000 and more		Rs.100 will be dedu	icted as transaction charge	es for transaction of Rs.10,000 and more
ease Specify Allotment Prefer	ence-Units in Physica	al Mode (Default (Option) - Plea	ase (✓) ○	OR Units in	Demat Mode* Please (✓) ○
Please provide details in sectio	n 7. In case of any am	biguity in the deta	ails provided,	the units shall b	e allotted in the phys	ical mode (Default option)
EXISTING UNIT HOLDER INF	ORMATION [Please fi	ll in your Folio N	umber, Name	, Section 2 & pro	oceed to Section 6 - In	vestment Details]
olio No.	Name of 1s	t Unit Holder				
APPLICANT(S) NAME AND INFO	ORMATION [Refer Instr	uction 2] If the 1st	/ Sole Applica	ant is Minor, the	n please provide detai	ls of natural/legal guardian
t / SOLE APPLICANT - Mr. Ms.	M/s.					
N Details		(YC Pls (✓) ☐ Proo	f Attached Pl	s indicate if US Po	erson/Resident of Canad	a - ☐ Yes ☐ No* (*Default if not ✓)
DATE OF BIDTU				Birth Cert		Leaving Certificate / Mark Sheet
(Mandatory if applicant is Minor)	D M M Y Y Y	Proof of Date of	Birth (Please√	Passport		•
UARDIAN (In case 1st Applicant is	s a Minor)				Relationship wit	th Minor Please (√)
r. Ms. M/s.					Mother Father [
ontact Person for Corporate Inve OA Details Name -	estor Name	DA1	N Details		Designation	
OA Details Name - de of Holding Anyone or Survivor	□ Single □	Joint 🗆	V Details (Please note)	that the Default ont	tion is Anyone or Survivor)	KYC Pls (✓) ☐ - Proof Attached
			•		•	ation Form - Refer Instruction 2(d)]
	Sole Prop NRI - NF		Bank / Fls 🗆		PIO Society/AOP	* **
RI-NRO HUF LLP	☐ Listed Company ☐	Unlisted Compa	any 🗆 Pa	artnership Firm 🗆	FOF - MF Schemes	Others Please specify
ccupation Details [Please tick (✓)]	☐ Service Private	Sector Dublic	Sector	Government Serv	rice 🗆 Student	☐ Professional ☐ Housewife
ross Annual Income (Rs.) [Pls tick (☐ Business ✓)1 ☐ Below 1 Lakh	☐ Retire		Agriculture 5-10 Lakh	☐ Proprietorshi ☐ 10-25 Lakh	ip ☐ Others(Please specify) ☐ >25 Lakh ☐ > 1 Crore
et-worth (Mandatory for Non-Individua	/a			on DDMM	and the second second second	
olitically Exposed Person (PEP) Stat	tus (Also applicable for aut	-			*	
on-Individual Investors involved/pro	viding any of the mention		☐ Foreign Exc☐ Money Lend	hange / Money Cha	_	aming/Gambling/Lottery/Casino Services one of the above
d APPLICANT Mr. Ms. M/s.	(Not A	pplicable in case of M		ilig / r awriilig		THE OF THE ADOVE
N Details		(YC Pls (✓) ☐ Proc		s indicate if US P	erson/Resident of Canad	la - ☐ Yes ☐ No* (*Default if not ✓)
ccupation Details [Please tick (✓)]	☐ Service Private	Sector Public	Sector	Government Serv	rice Student	☐ Professional ☐ Housewife
ross Annual Income (Rs.) [PIs tick (☐ Business ✓)] ☐ Below 1 Lakh	☐ Retin		Agriculture 5-10 Lakh	☐ Proprietorshi☐ 10-25 Lakh	ip ☐ Others(Please specify) ☐ >25 Lakh ☐ > 1 Crore
et-worth (Mandatory for Non-Individua	/-		akn 🗀	and the second second	The second secon	than 1 year)
litically Exposed Person (PEP) Stat		norised signatories/Pro			1 1 1 3	☐ I am Related to PEP ☐ Not Applicable
on-Individual Investors involved / pr	roviding any of the mention	nned services	_ ~	ange/Money Change		ning/Gambling/Lottery/Casino Services e of the above
d APPLICANT Mr. Ms. M/s.	(Not A	pplicable in case of M	Money Lendin	g/Pawning	INOTI	3 Of the above
AN Details		(YC Pls (✓) ☐ Prod		s indicate if US Pr	erson/Resident of Canad	a - ☐ Yes ☐ No* (*Default if not ✓)
ccupation Details [Please tick (✓)]	☐ Service Private	Sector Public	Sector	Government Serv	rice Student	☐ Professional ☐ Housewife
	□ Business □ Retired			☐ Agriculture ☐ Proprietorship ☐ ☐ 5-10 Lakh ☐ 10-25 Lakh ☐		•
oss Annual Income (Rs.) [PIs tick (t-worth (Mandatory for Non-Individua	/•	☐ 1-5 L		5-10 Lakh on D D M M	10-25 Lakh	□ >25 Lakh □ > 1 Crore than 1 year)
litically Exposed Person (PEP) Stat		norised signatories/Pro				• •
n-Individual Investors involved / pr	roviding any of the mention	nned services		ange/Money Change	_	ning/Gambling/Lottery/Casino Services
			Money Lendin	g/Pawning	Li None	e of the above
						For OLumpsum 'OR' OSIP
Received Application from Mr. / M				No.:		as per details below:
Scheme Name	and Plan	Option	Sub Option		Payment Details	Date & Stamp of Collection Centre / ISC
4 1			O	Amount (R	.01	I
		Growth	 Reinvestm 	ent Cheque/DI	D No.:	
Received Application from Mr. / M Scheme Name		Growth Dividend	O Reinvestm	Cheque/Di	D No.:	_

OR



4. MAILING ADDRE	SS [Please provide your E-mail II	and Mobile Number to help us	serve you better]		
Local Address of 1	st Applicant-				
City		State		Pin C	ode
Tel. Off.		Resi.		Mobile	
E - Mail^^					
^^Please Use Block	Letters. Investors providing email ID	would mandatorily receive all Con	nmunications, Statement of	Accounts and Abridged	Annual Report through e-mail only.
4a. Mandatory for N	RI / FII Applicant [F	lease provide Full Address. P. O. E	Sox No. may not be sufficien	t. For Overseas Investo	rs, Indian Address is preferred]
Overseas Correspo	ndence Address-				
5 BANK ACCOUNT	DETAILS - Mandatory [Refer Inst	ruction Nos. 3 & 41			
Name of the Bank	DETAILS Managery [Refer mot	1 dollor 1100. 0 d. 4]			
Core Banking A/c No.			A/c. Type	Pls. (🗸) NRE 🔾 CUI	RRENT SAVINGS NRO
Branch Name		Address	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Bank Branch City		State		Pin C	ode
MICR Code		Please attach a cancelled cheque OR	IFSC Code (Mandatory for	•	
	ND PAYMENT DETAILS (#For com	a clear photo copy of a cheque	Credit via NEFT/RTGS) t Details please refer to li	nstructions No. 6.)	
					patriation status of the amount invested. of be liable for any incorrect information
The AMC and the Reprovided by the applica	egistrar may ascertain the repatriation si nt(s). 3. In case the source of funds t	atus purely based on the details prov prough Non Domestic Account is r	rided under Investment and Pr not validated/provided, AMC	ayment details and will no will not be in a position	of the liable for any incorrect information to repatriate redemption proceeds.
Scheme Name:			an		Sub option
Investment	DD Charge	e# if No	et Amount	Mode of	Cheque / DD / Funds Transfer / Pay Order
Amount (Rs.)	any (Rs.)		s.)	Payment	Strike out whichever is not applicable
Chq. / DD No.	Date Dra	wn on Bank		Brai	nch & City
· · ·	of Funds:- *A/c Type - S/B 🔲 NR		Others(Please sp	Barile7 00 140	
*Kindly provide photo	copy of the payment Instrument or Fore	ign Inward remittance Certificate (FI	RC) or Account Debit Certifica	te from Bankers evidence	ng source of funds.
	Third	Party Cheque / Transfer w	ill not be accepted for	Investment	[Refer Instruction No. 6(e)]
EXCEPTION TO TH	IRD PARTY PAYMENT (i.e. payme	nt by Guardian, Employer or a	Custodian)		
•	tion (Please ✓): The details of the			•	☐ Yes ☐ No*
	nip with the bank account holder is	(Please specify)			formation may be rejected)
	NT DETAILS – Mandatory for units				
N	ational Securities Depositary Lin	nited (NSDL)	Central Dep	pository Services (In	dia) Limited (CDSL)
DP Name -			DP Name -		
DP ID _ I N	Benef. A/C No		16 Digit A/C No		
Enclosures - Please	(/) Client Masters Lis	(CML) Transac	tion cum Holding Statemen	nt O	Delivery Instruction Slip (DIS)
	ETAILS [Minor / HUF / POA Holde	<u> </u>			
I/WE DO NOT WISH	TO NOMINATE (OR) I / We, the Applicant(s) ts made to such Nominee(s) and Signature of the ge in Nomination and the AMC shall not be under a	do here by nominate the undermentioned Non Nominee(s) acknowledging receipt thereof, sha	ninee(s) to receive the units to my / ou Il be a valid discharge by the AMC / N	r credit in this folio no. in the eve futual Fund / Trustees. Nominati	ion in respect of the units stands rescinded upon
the indicated nominee(s).	ge in Normation and the Aivio Shail not be under a	ny obligation to transfer the drifts in layour of the	e erstwrite Northinee(s). The percen	mage of share is not mentioned	men the daint will be settled equally amongst all
No. Nomine	e(s) Name Date of Birth (in o	ase of Minor) Name of the Guardia	n (in case of Minor) Relations	ship [@] % of Share	Signature of Nominee / Guardian
1	D D M M	Y Y Y			
2	D D M M	/ Y Y Y			
3	D D M M	Y Y Y			
9. DOCUMENTS EN	ICLOSED (Please ✓)				
	Status Proof PAN Proof Cano		•		d □ Power of Attorney
☐ Partnership Deed	I ☐ MOA & AOA ☐ Resolution	/ Authorisation to Invest	ye-Laws List of Auth.	Signatories & Specimen	Signature(s)
10. DECLARATION	AND SIGNATURES / THUMB IMPI	RESSION OF APPLICANT(s) [Re	efer Instructions 2(e)]		
To The Trustees, Mirae Asse We understand that the invest declare that the amount invest Anti Money Laundering Laws come making this investment. If We or hereby declare that if the Nom Mirae Asset Mutual Fund. I We warket facility: If We have re disclosed to melus all the co have not made any other Mic for NRIs only: I We confirm Ordinary Account. I We undert We confirm that I We satisfy the fund declares that they have co of United States or resident(s)	It Mutual Fund - Having read and understood the conents are exposed to market risks. IW's confirm that din the scheme(s) is through legitimate sources only rate of the ready that the scheme (s) is through legitimate sources only rate may be seen that the format that the funds invested in the Scheme, legally thation section is left blank, it will be construed and confirm that IW's have read and understood the 'Kn d, understood and shall be bound by the terms & commissions (in the form of trail commission or any roapplication [including Lumpsum + SIPs] which at I amWe are Non-Resident of Indian Nationality/C ke that all additional purchases made under this folio Residency text so prescribed under FIMA provision might will all the laws, rules, regulations, guideline of Canada. Incase of change to this status, I' We shi	lents of the SID of the Scheme(s) applied for he lith er risks which the scheme is subject to; will be and does not involve and is not designed for the it of India from time to lime. I/We have understo doing to melus. I/We hereby nominate the above eemed that I do not wish to nominate for the abo w Your Customer (I/CT) omms as mentioned un titions of the PIN agreement available on the AM other mode), payable to him for the different ogether with the current application would re igin and I/We hereby confirm that the funds for vill also be from funds received from abroad throu I. We further declare that I/We anilare? Person I i. We cut as applicable to them. I/We confirm that th II notify the AMC, in which event the AMC reserv	eby apply for units of the scheme and a borne by melves and that there is no gus purpose of the contravention of any Act, do the details of the scheme(s) and IVIVe nominee to receive all the amounts to m ve investments. Signature of the nomin der the General Instructions in point 2(e C website for transacting online through competing Schemes of various Mutus sult in aggregate investments exceed backgripton have been remitted from abro gh approved banking channels or from fu kesident in India? and are allowed to inve- details provided by melva are true and set he right to redeem my / our investme set he right to redeem my / our investme set her is not set when the contractions of the details provided by melva are true and set he right to redeem my / our investme	gree to abide by the terms, condi- arantee given by the Fund of any; Rules, Regulations, Notifications is have not received nor have been your credits in the event of mylour ee acknowledging receipts of mylour ee acknowledging receipts of mylour the Mirae Asset e-fund market fat all Funds from amongst which the ing Rs.50,000-in a rolling twelvour owd through normal banking and unds in mylour NRE Account. App set into the Scheme as per the sail correct. I / We confir m that I am ints in the Scheme(s).	tions, rules and regulations governing the scheme. I/ returns including repayment of principal. I/We hereby or Directions of the Provisions of the Income Tax Act, induced by any rebate or gifts, directly or indirectly in redath and have read the instructions fornomination. I/ our credit will constitute full discharge of liabilities of ndum. Applicable to Investors availing the e-fund slibil. I/We further declare that "The ARN holder has be Scheme is being recommended to melus. I/We e month period or in a financial year", Applicable melios or from funds in myfour Non-Resident External/ licable to Foreign Resident's Residing in India: I/I d EMA regulations. The Companies investing ints / We are not United States person(s) under the laws
Signature	of 1s ^t Applicant / Guardian / sed Signatory /PoA/Karta	Signature of 2 nd Appli Authorised Sign	cant / Guardian /	Signature o	of 3 rd Applicant / Guardian / orised Signatory /PoA
Mutual Fund investments are subject to market risks, read all scheme related documents carefully.					
Cheque/DD shou	ld be Drawn in favour of the	Scheme Name Mirae A	Asset India Opportunitie	s Fund Mirae Asse	t Emerging Bluechip Fund

Cheque/DD should be Drawn in favour of the Scheme Name	Mirae Asset India Opportunities Fund	Mirae Asset Emerging Bluechip Fund
Mirae Asset India China Consumption Fund	Mirae Asset China Advantage Fund	Mirae Asset Global Comodity Stock Fund
Mirae Asset Ultra Short Term Bond Fund	Mirae Asset Short Term Bond Fund	Mirae Asset Cash Management Fund

For more information	E-mail us at customercare@miraeasset.com
visit us at www.miraeassetmf.co.in	Call us at 1800-2090-777 (Toll Free)