

Key Partner / Agent Information

Distributor / Broker ARN ARN - Bonanza - 0186	Sub-Broker Code	Internal Sub-Broker/Employee Code	Employee Unique Identification No. (EUIIN) <small>(Of Individual ARN holder or Of employee / Relationship Manager / Sales Person of the Distributor)</small>	For Office Use Only
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I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker. (Refer Instruction no.1(f)).

Sign Here Sole/First Applicant/Guardian	Sign Here Second Applicant	Sign Here Third Applicant
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Upfront commission, if any, shall be paid directly by the investor to the AMFI registered distributors based on the investors' assessment of various factors, including the service rendered by the distributor.

Existing Unitholder Details : Pl. fill in Folio Number below. Pl. furnish PAN details in section 1 and then proceed to section 2.

Transaction Charges (Please tick any one of the below. For details refer point no. 9 on Page No.14)

- I am a first time investor in Mutual Funds
(₹150/- will be deducted as transaction charges for subscription of Rs. 10,000/- and above)
- OR
- I am an existing investor in Mutual Funds (Default)
(₹100/- will be deducted as transaction charges for subscription of Rs. 10,000/- and above)

For details on transaction charges payable to distributors, please refer to KIM.

1. Applicant's Details

First/Sole Mr. / Ms. / M/s. Name

Gross Annual Income (✓) Below 1 lac 1-5 lacs (if not ✓, then default) 5-10 lacs
 10-25 lacs 25 lacs - 1 crore >1 crore

Net-worth⁴ in ₹ as on (Not older than 1 year)

Is the entity involved in any of the following services (✓)

- (i) Foreign Exchange/Money Changer Services Yes No (ii) Gaming/Gambling/Lottery/Casino Services/Betting Syndicates Yes No (iii) Money Lending/Pawning Yes No

Second Mr. / Ms. No Joint Holder where Minor is First Holder

Gross Annual Income (✓) Below 1 lac 1-5 lacs (if not ✓, then default) 5-10 lacs
 10-25 lacs 25 lacs - 1 crore >1 crore

Net-worth⁴ in ₹ as on (Not older than 1 year)

Third Mr. / Ms. No Joint Holder where Minor is First Holder

Gross Annual Income (✓) Below 1 lac 1-5 lacs (if not ✓, then default) 5-10 lacs
 10-25 lacs 25 lacs - 1 crore >1 crore

Net-worth⁴ in ₹ as on (Not older than 1 year)

Guardian/
Contact Person (if Sole / First applicant is a Minor) Contact Person (in case of Non-individual Investors only)

Relation Father Mother Court appointed Guardian

Gross Annual Income (✓) Below 1 lac 1-5 lacs (if not ✓, then default) 5-10 lacs
 10-25 lacs 25 lacs - 1 crore >1 crore

Net-worth⁴ in ₹ as on (Not older than 1 year)

POA
Holder (if the investment is being made by a Constituted Attorney, please furnish the details of POA Holder)

Gross Annual Income (✓) Below 1 lac 1-5 lacs (if not ✓, then default) 5-10 lacs
 10-25 lacs 25 lacs - 1 crore >1 crore

Net-worth⁴ in ₹ as on (Not older than 1 year)

Mailing Address: (Address should be as per KYC records, refer Instruction no. 14b)

City PIN
State
Tel. No. (Resident) Tel. No. (Office)
Mobile
E-mail

Mode of Holding (Only for non-demat mode) (✓) Single Joint Anyone or Survivor (Default)

PAN/KRN¹ Date of Birth²

For Individuals (✓) Politically Exposed Person (PEP) Enclosed (✓) KYC Proof³
 Related to a Politically Exposed Person (PEP) Not Applicable

Occupation (✓) Private Service Business Professional Agriculturist Housewife Retired
 Forex Dealer Student Public Sector/Govt. Service Others_____

For Individuals (✓) Politically Exposed Person (PEP) Enclosed (✓) KYC Proof³
 Related to a Politically Exposed Person (PEP) Not Applicable

Occupation (✓) Private Service Business Professional Agriculturist Housewife Retired
 Forex Dealer Student Public Sector/Govt. Service Others_____

For Individuals (✓) Politically Exposed Person (PEP) Enclosed (✓) KYC Proof³
 Related to a Politically Exposed Person (PEP) Not Applicable

Occupation (✓) Private Service Business Professional Agriculturist Housewife Retired
 Forex Dealer Student Public Sector/Govt. Service Others_____

For Individuals (✓) Politically Exposed Person (PEP) Enclosed (✓) KYC Proof³
 Related to a Politically Exposed Person (PEP) Not Applicable

Occupation (✓) Private Service Business Professional Agriculturist Housewife Retired
 Forex Dealer Student Public Sector/Govt. Service Others_____

For Individuals (✓) Politically Exposed Person (PEP) Enclosed (✓) KYC Proof³
 Related to a Politically Exposed Person (PEP) Not Applicable

Occupation (✓) Private Service Business Professional Agriculturist Housewife Retired
 Forex Dealer Student Public Sector/Govt. Service Others_____

Overseas Address: (Mandatory in case of NRI / FII applicant)

City State/Province
Country PIN

Status (✓)

<input type="checkbox"/> Individual	<input type="checkbox"/> Minor	<input type="checkbox"/> Minor - NRI Repatriable	<input type="checkbox"/> Minor - NRI Non-Repatriable
<input type="checkbox"/> HUF	<input type="checkbox"/> NRI Repatriable	<input type="checkbox"/> NRI Non-Repatriable	<input type="checkbox"/> Partnership
<input type="checkbox"/> LLP	<input type="checkbox"/> Listed Co.	<input type="checkbox"/> Unlisted Co.	<input type="checkbox"/> Non-Profit Entity
<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Society/Club	<input type="checkbox"/> Trust	<input type="checkbox"/> FII
<input type="checkbox"/> FPI	<input type="checkbox"/> AOP	<input type="checkbox"/> Others_____	

2. Investment Details (Cheque / DD should be drawn in favour of the Scheme. Investors applying under direct plan must mention "Direct" in the box provided below.) Refer Scheme Ready Reckoner

Scheme 1	Religare Invesco	Scheme Name	Plan	Option	Dividend Frequency ⁵
Scheme 2	Religare Invesco	Scheme Name	Plan	Option	Dividend Frequency ⁵
Scheme 3	Religare Invesco	Scheme Name	Plan	Option	Dividend Frequency ⁵

¹ PAN/KRN (Refer Instruction no. 3), ²Mandatory in case of Minor, additionally refer Instruction no. 2, ³KYC & ⁴Networth (Refer Instruction no. 14), ⁵ Not applicable in Growth option

Acknowledgement Slip (To be filled by the Applicant)

Application No :

Received from Date

Towards Subscription under below Schemes

Scheme 1	Religare Invesco	Scheme Name	Amount (₹)	Cheque/DD No.
Scheme 2	Religare Invesco	Scheme Name	Amount (₹)	Cheque/DD No.
Scheme 3	Religare Invesco	Scheme Name	Amount (₹)	Cheque/DD No.

Signature, Stamp & Date

Payment Details (Attach separate cheques for each Scheme. Refer instruction no. 5a)

Scheme Investment Amt. (Rs) Net Amt. (Rs) Cheque/DD No. Bank Name A/c. No.
1 Net of DD Charges
Account Type () Current () Savings () NRE () NRO () FCNR () SNRR () Others

Applicable in case of Third Party Payment: Payment on behalf of () Minor () Client () Employee () Distributor (Refer instruction no. 7). PAN/KRN 1
Name of the person making payment Enclosed () KYC Proof 3

3. For SIP / Micro SIP Refer instruction no. 6 & 7
() SIP () Micro SIP () SIP through Auto-Debit (ECS / Direct Debit/NACH) Subsequent
() SIP through Post Dated Cheques (PDCs) Installment Details Rs. Investment Amount X No. of Installments = Rs. Total Amount

First SIP Installment Cheque Details
Cheque No. Amount Dated DD MM YYYY Drawn on Bank
Branch Frequency () Monthly (Default) or () Quarterly SIP Date () 3rd () 10th () 15th (Default) () 20th or () 25th
SIP through Post Dated Cheques (Use CTS (Cheque Truncation System) Cheques only) Applicable in case of Third Party Payment: Payment on behalf of ()
Period From MM YYYY To MM YYYY () Minor () Client () Employee () Distributor
Chq. Nos. From To Name of the person making payment Enclosed () KYC Proof PAN

4. Demat Account Details Optional, Refer instruction no. 11
DP ID # Beneficiary Account No. DP Name () NSDL () CDSL
I N

(# Not applicable in case of CDSL). The details of the Bank Account linked with the Demat A/c as mentioned below should be provided under section 5.

5. Bank Account Details (Mandatory As Per SEBI Guidelines) Refer instruction no. 4

Account No. Account Type () Current () Savings () NRE () NRO () FCNR () SNRR () Others
Bank Name Branch
City Address
MICR Code (9 digit No. next to your Cheque No.) NEFT/RTGS/IFSC Code (11 digit character code appearing on cheque leaf) PIN

Please provide a cancelled cheque leaf of the same bank account as mentioned above. We will credit the redemption/dividend proceeds directly into investors' account through electronic means if the details provided by the investors are sufficient for the same. Mentioning your IFSC will help us transfer the amount to your bank account faster. To receive cheque payout, () () If you have provided multiple bank registration form () ()
Unit holders who have opted to hold Units in dematerialised form must provide Bank Account details linked with the Demat account, as mentioned under section 4. In case of discrepancy, bank details as per depository records will be final.

6. Nomination Details (Mandatory for investors who opt to hold units in non-demat form.) Refer Instruction no. 10

Name Date of Birth (for minor) % Share Relationship Signature
Nominee 1 DD MM YYYY Optional
Nominee 2 DD MM YYYY Optional
Nominee 3 DD MM YYYY Optional
Name of Guardian (If Nominee is Minor) Guardian's Relation (with the minor) Signature of Guardian
Mandatory
Address
I do not intend to nominate () the box, in case you do not wish to nominate ()

7. Declaration & Signature(s)

The Trustees, Religare Invesco Mutual Fund
Having read and understood the contents of the Statement of Additional Information / Scheme Information Document(s) of the respective schemes, I / We hereby apply to the Trustees of Religare Invesco Mutual Fund for units of the Scheme / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We have understood the details of the Scheme and I / We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We do not have any existing Micro Investments which together with the current Micro Investment application will result in aggregate investments exceeding Rs. 50,000/- in a year (applicable to Micro Investment investors only). The Distributor 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. I / We hereby authorise Religare Invesco Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my / our bank(s) / Religare Invesco Mutual Fund's Bank(s) and / or Distributor / Broker/ Investment Advisor and to verify my/ our bank details provided by me / us. I / We hereby declare that the particulars given above are correct. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I / We would not hold Religare Invesco Asset Management Company Pvt. Ltd. (Investment Manager to Religare Invesco Mutual Fund), their appointed service providers or representatives responsible. I / We will also inform Religare Invesco Asset Management Company Pvt. Ltd., about any changes in my/ our bank account. I / We hereby declare that the amount being invested by me / us in the Scheme of Religare Invesco Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.
I / We confirm that I / We are not United States person(s) under the laws of United States or residents(s) of Canada as defined under the applicable laws of Canada.
Applicable to KRN holders : I, the first / sole holder hereby declare that I do not hold a Permanent Account Number and hold only a single PAN exempt KRN issued by KRA and that my existing investment in schemes of Religare Invesco Mutual Fund together with current application will not result in aggregate investments exceeding Rs. 50,000/- in a rolling 12 months period or in a financial year i.e. April to March.
Applicable to NRIs only : I / We confirm that I am / we are Non-Residents of Indian Nationality / Origin and that the funds are remitted from abroad through approved banking channels or from my / our NRE / NRO / FCNR / SNRR Account. I / We confirm that the details provided by me / us are true and correct.
() Yes () No ()
If NRI () Repatriation basis () Non-Repatriation basis
Date DD MM YYYY Place

GET IN TOUCH
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