

## PLEASE REFER TO THE PRODUCT LABEL SECTION ON PAGE 31 BEFORE FILLING THIS FORM

Common Application Form (except for Tata Retirement Savings Fund & Tata Young Citizens' Fund)

Sr.



I. DISTRIBUTOR INFORMATIO BROKER / AGENT CODE	N (Only empanelled Distributors / Br SUB-BROKER / BANK BRANCH CODE		to distribute Units of Tat	a Mutual Fund) refer instructi		FOR OFFICE USE ONLY (TIME STAMP
Bonanza - 0186						
						e by the employee/relationship manager/sager/sales person of the distributor/sub brol
Sole / 1st Unitholder Signature /	Thumb Impression	2nd Unitholder	Signature / Thumb Ir	npression	3rd Unitho	older Signature / Thumb Impression
RANSACTION CHARGES FOR A	PPLICATIONS THROUGH	DISTRIBUTORS (	ONLY (Refer Inst. A	AI5 and please tick (√	) any one)	
I confirm that I am a First time invest				rm that I am an existing in		
(Rs. 150 deductible as Transaction		•	,			e and payable to the Distributor)
case the purchase / subscription ambscription ambscription amount and payable to the stributors based on the investors' as	e Distributor. Units will be issu	ied against the balai	nce amount invested	<ul> <li>Upfront commission sl</li> </ul>	ne same are o nall be paid di	deductible as applicable from the purchase rectly by the investor to the AMFI register
. EXISTING UNITHOLDER INI	ORMATION (please fill in	your Folio Num	ber, Name & pro	ceed to Scheme Inve	stment Det	tails)
xisting Folio Number:		Name of Sole/1st	Applicant:			
KYC DETAILS (Mandatory) I	t Unitholder					
TATUS: Resident Indian NRI		Private Sector Service	Gross Annual Inco	me: Below I Lac	For Individ	uals: Politically Exposed Person
HUF Minor RI Minor I	NRI Public Sector Service I	Business Retired	☐ I-5 Lacs ☐ 5-10 I	Lacs 🗆 10-25 Lacs		Related to Politically Exposed Person
Trust Proprietorship LLP	Government Sector	Agriculturist	>25 Lacs-I crore	☐ > I crore	For Non-I	☐ Not Applicable Individual Investors (Companies, Trus
Partnership Public Ltd. Co.		Forex Dealer	Networth in (Manda	tory for Non-individual)		etc): Is the company a Listed Compa
Pvt. Ltd. Co. Non Profit Organisat	Housewife	Student	₹	as on		y of Listed Company or or Controlled by
Societies FOF Body Corpor	Othors	(please specify)		(not older than I year)		pany: (if No, please attach mandatory UE :   Yes  No
Others (please spe	cliy)	Forei	ign Exchange / Money C		· ·	Gambling / Lottery / Casino Services
on Individual investors involved/pro		L PIONE	ey Lending / Pawning	hox blank between two	□ None of t	the above ppears in your Bank A/c & KYC letter)
IAME OF FIRST / SOLE APPLIC				E OF HOLDING		
AND OF TIRST / SOLE AFFLIC	ANI Mr.	∟ Ms. ∟	M/s. MODI	L OI FIOLDING	Single   Jo	oint (Default) Anyone or Survivor(s)
						DIMIMIVIVIVI
t holder PAN/PEKRN	n d a t o r y	Y     KYC	Copy attached	Date of	Birth LLL	D   M   M   Y   Y   Y   Y
oof of DOB (Mandatory for min	nor) Birth Certificate	School Leavin	g Certificate	Passport Other		
ame of Guardian (In case of Mir	or) Contact Person/Design	ation (In case of I	non-individual Inve	stors) Mr.	Ms	i.
						Relation with Minor/Designation
uardian's PAN Mand	a t o r y		KYC Copy at	tached		
roof of relationship with minor (Ma	ndatory) Mother / Father / Le	gal Guardian B	irth Certificate	School Leaving Co	ertificate	Passport Other
SECOND APPLICANT DETAILS	☐ Mr.	☐ Ms				
Name						
	n   d   a   t   o   r	v I I	KYC	Copy attached		
nd holder PAN/PEKRN a		<i>y</i>				
Tilvate Sector Servi	ce Public Sector Service Gove					
				etworth in ₹	as on	O O O O O O O O O O O O O O O O O O O
	n Related to Politically Exposed Pe	erson   Not Applicable	e			#MANDATOF
HIRD APPLICANT DETAILS	☐ Mr.	☐ Ms				
lame						
rd holder PAN/PEKRN	n d a t o r	у	☐ KYC	Copy attached		
OCCUPATION: Private Sector Servi	ce Public Sector Service Gove	rnment Sector 🔲 Busin	ness Professional	Agriculturist 🗆 Retired 🔲 I	Housewife 🔲 St	tudent  Forex Dealer  Others
GROSS ANNUAL INCOME: Below	/   Lac     1-5 Lacs     5-10 Lacs	10-25 Lacs = >25 Lacs	s-I crore  > I crore; No	etworth in₹	as on	D   D   /   M   M   /   Y   Y   (not older than I ye
OTHERS: Politically Exposed Person	n Related to Politically Exposed Pe	erson 🗆 Not Applicable	e			# MANDATOR
MAILING ADDRESS AND CO	NTACT DETAILS OF SOLE	/ FIRST APPLIC	ANT (P.O. Box Ad	dress may not be suff	icient. Pleas	e provide your complete Address)
				City		
-	State			Country		
Pin O (STD C 1)	Julie					
hone O (STD Code)			Extn.	Fax		
hone O (STD Code)  R (STD Code)	Jtate		Extn.	Mobile		
Phone O (STD Code)  R (STD Code)  mail → (IN CAPITAL)		September 1.5		Mobile		1
Phone O (STD Code)		ner Statutory Inform		Mobile		].
hone O (STD Code)  R (STD Code)  mail → (IN CAPITAL)	rement / Annual Report / Oth			Mobile	r Inst. – C9)	<u> </u>
none O (STD Code)  R (STD Code)  mail → (IN CAPITAL)  you wish to receive Account State  CKNOWLEDGEMENT SLIP (T	ement / Annual Report / Oth	/ESTOR)	mation via Post inste	Mobile		
hone O (STD Code)  R (STD Code)  mail → (IN CAPITAL)  you wish to receive Account State	ement / Annual Report / Oth	/ESTOR)	mation via Post inste	Mobile	r Inst. – C9)	<u> </u>

Overseas Address (Mandatory in case	or INKI applicant in addition	to mailing address)		
Zip code	City			Country
. FIRST HOLDERS BANK ACCOUN	NT DETAILS (Mandatory)	Refer Instruction I and J		
All communication/payments will be made	to first applicant or to Karta	in case of HUF. Bank account det	ails of First Unitholo	der required without which the application would be re
Name of the Bank				
Branch			Account	Type Savings Current NRO NRNR
Account No. (in Fig.)				
Bank Address				
City		State		PIN
^MICR Code	*IFSC Code (RTGS)		*IFSC	Code (NEFT)
`(To be filled in only if dividend is to be paid th		it Number, kindly obtain it from your E		, ,
. SCHEME DETAILS Refer Instruction	D and Page 1 & 2			
cheme / Plan:	i D and rage i & 2			
Options: Growth Dividend	For Dividend option o	nly: Sub-Option:		Payout option: Payout Reinvest
. MY INVESTMENT GOAL (choose a	anvone (√) (Refer Instruction	F)		
☐ Marriage ☐ Vacation ☐ Dream	, , , ,	•	's Education	Children's Marriage.
Target Amount Rs.	arrione bream car	_ recircine _ Ciliden	2 Education	Cind cits Flatrage.
INVESTMENT DETAIL (Strike off v	whichever is not applicable)			
Gross Amount (A)	mineriever is not applicable)	DD Charges (if any) (B)	Net Amo	ount (Cheque / DD Amount)
₹		B	₹	A minus B
Mode of Payment				Dated
A/c NoA/	/с Туре	Cheque / DD No.		D D / M M / Y Y Y
Drawn on Bank				
Branch		Branch	City	
Please register nomination as requeste tached herewith) I do not wish to not we hereby nominate the person more pa	ominate. articularly described hereunde	er to receive the Units allotted to n	ne/us/credit in my/o	ominees (please strike out the form below & fill seperate ur folio in the event of my/our death. I/We understand t iid discharge of the AMC / Mutual Fund / Trustees.
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