

## STP / SWP ENROLMENT FORM

Enrolment form no.

(Please read instructions overleaf)

| 1. DISTRIBUTOR INFORMATION (  | Please read the instructions  | before investing)                                   |  |  |
|---|-------------------------------|---|--|--|
| Broker code   | Sub-broker cod                | e esn   |  |  |
| ARN-109217  |                               | For office use                                      |  |  |
| Upfront commission 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. Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor.  "I/We hereby confirm that the EUIN 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 and the distributor has not charged any advisory fees on this transaction."  Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.  |                               |   |  |  |
| The Trustee   | · v                           |   |  |  |
| JPMorgan Mutual Fund India Private Limited  I / We have read and understood the contents of the Scheme Information Document of the following scheme(s) and the terms & conditions overleaf. I / We hereby apply for enrolment under the STP / SWP of the following scheme(s) / plan(s) / option(s) and agree to abide by the terms and conditions of the following scheme(s) / plan(s) / option(s).   |                               |   |  |  |
| 2. APPLICANT INFORMATION  |                               |   |  | , and the second   |
| Folio no. (for existing Unit holder) / Application no. (for new investor)   |                               |   |  |  |
| Mr. Ms. M/s.  |                               |   |  |  |
| PAN No. M A N D A   | T O R Y Mandator              | y Please tick (✔)                                   | KYC compliant                                  |  |
| Name of guardian (in case First / Sole a  | applicant is a minor)         |   |  | j  |
| PAN No. M A N D A   | T O R Y Mandator              | ry Please tick (✔)                                  | KYC compliant                                  |  |
| Mr. Ms. M/s.  |                               |   |  |  |
| PAN NO. M A N D A   | T O R Y Mandator              | y Please tick (✔)                                   | O KYC compliant                                |  |
| Name of third applicant Mr. Ms. M/s.  |                               |   |  |  |
| PAN No. MANDA   | T O R Y Mandator              | y Please tick (✓)                                   | KYC compliant                                  |  |
| 3. SYSTEMATIC TRANSFER PLAN   | (STP) DETAILS (This applica   | ation form needs to accompany the a                 | pplication form of the scheme                  | in case a new applicant opts for Systematic Transfer Plan) |
| From Scheme JPMorgan  | Option (Please                | Growth (default option)  Dividend reinvestment (def | Dividend  Dividend payor                       | ut   |
|   |                               |   |  | Yearly* O Bonus* O Annual Dividend* *as applicable         |
| To Scheme JPMorgan  | Option (Please                |   | 2  |  |
| Oaily* Weekly* Fortnightly* Monthly* Yearly* Bonus* Annual Dividend* *as applicable   |                               |   |  |  |
| 1st STP date Fixed Amount per instalment (₹) Frequency (Please ✓ any one only)  |                               |   |  |  |
| Enrolment period From M M V V To M M V V To Total amount of transfer (₹)  |                               |   |  |  |
| 4. SYSTEMATIC WITHDRAWAL PLAN (SWP) DETAILS (This application form needs to accompany the application form of the scheme in case a new applicant opts for Systematic Withdrawal Plan)   |                               |   |  |  |
| Scheme  JPMorgan  Option (Please   Dividend reinvestment (default) Dividend payout   |                               |   |  |  |
| SWD datas (Disease ()   | ) 1-t (d-flt)                 | -   |  |  |
| SWP dates (Please ✓)  Frequency (Please ✓ any one only)   | _                             |   | unt of withdrawal per instal<br>of instalments | ment (c)   |
| Enrolment period Fro  | [-1-1-1-1-1                   | _ l = i = t = t = l                                 | l withdrawal amount (₹)                        |  |
| 5. DECLARATION AND SIGNATURE  | ES                            |   |  |  |
| Applicable to NRI / FII / PIO: 1 am / we are not U.S. or Canadian person(s) or resident(s) in or citizen(s) of the United States of America or Canada. I / We confirm that I am / we are Non-Resident(s) of Indian nationality / origin and that I/we have remitted funds and undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my / our NRE / FCNR account. In case of non residents (please tick as appropriate): The units issued to me / us will be held as O a) investment O b) business asset  Corporate applicants only: (A corporation should affix its company stamp or seal, if any.) I am / we are duly authorised to execute and deliver this Master Account Agreement. The corporation is not organised or incorporated under the laws of the United States of America.  By signing this form, I / we explicitly warrant that I / we remain in full compliance with all the declarations set out in section 10 of the Common Application Form previously completed by me / us and these declarations are deemed repeated in full for this and all future transactions in JPMorgan Mutual Fund.  If you have any doubt as to the content of these declarations, please contact 1800-200-5763 (JPMF) before signing this form. |                               |   |  |  |
| (These signatures will be matched against the signatures in the repurchase or other transactions and in case of improper match or difference in the signatures, investors will be requested to get their signature verified by their banks.)  |                               |   |  |  |
| Date SIGNATURE(S)   |                               |   |  |  |
|   |                               | SIGNATURE(S)  |  |  |
| Sole / First applica  | nt                            | Second applicant                                    |  | Third applicant  |
| Please note : Signature(s) should be as they  |                               |   |  | plicants are required to sign.                             |
|   |                               |   |  |  |
| ACKNOWLEDGEMENT SLIP (To  | be filled in by the investor) |   |  | Enrolment form no.   |
| Received from: Mr. / Ms. / M/S.   |                               |   |  | ST   |
| (please ✓)  |                               |   |  |  |
| OSTP From Scheme JPMorgan To Scheme JPMorgan  |                               |   |  |  |
| OSWP From Scheme JPMorgan   |                               |   |  |  |
| Total STP /SWP amount (₹)   |                               | early O Weekly O Fortnightl                         |  | Office Signature, stamp & date                             |