PLEASE REFER TO THE PRODUCT LABEL SECTION ON PAGE 1 BEFORE FILLING THIS FORM

TATA MUTUAL FUND
Expertise that's trusted

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

Sr. No.:

1. DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Tata Mutual Fund) refer instruction A16 & K

BROKER / AGENT CODE	SUB-BROKER / BANK BRANCH CODE	SUB-BROKER ARN CODE	EUIN CODE	FOR OFFICE USE ONLY (TIME STAMP)
ARN-109217			E150257	

☐ I/We hereby confirm that the EUIN 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.

Sole / 1st Unitholder Signature / Thumb Impression	2nd Unitholder Signature / Thumb Impression	3rd Unitholder Signature / Thumb Impression

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Inst. A15)

In case the purchase / subscription amount is Rs. 10,000 or more and your Distributor has opted to receive transaction charges, the same are deductible as applicable from the purchase / subscription amount and payable to the Distributor. Units will be issued against the balance amount invested. 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.

2. EXISTING UNITHOLDER INFORMATION (please fill in your Folio Number, Name & proceed to Scheme Investment Details)

Existing Folio Number: ______ Name of Sole/1st Applicant: ______

3. APPLICANT'S PERSONAL DETAILS

(Fill in Block Letters, use one box for one alphabet leaving one box blank between two words, as it appears in your Bank A/c & KYC letter)

NAME OF FIRST / SOLE APPLICANT ☐ Mr. ☐ Ms. ☐ M/s. **MODE OF HOLDING** ☐ Single ☐ Joint (Default) ☐ Anyone or Survivor(s)

1st holder PAN/PEKRN M a n d a t o r y ☐ KYC Copy attached **Date of Birth** D D M M Y Y Y Y

Proof of DOB (**Mandatory** for minor) ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Other ______

KYC DETAILS (Mandatory) 1st Unitholder

STATUS: ☐ Resident Indian ☐ NRI ☐ PIO ☐ HUF ☐ Minor RI ☐ Minor NRI ☐ Trust ☐ Proprietorship ☐ LLP ☐ Partnership ☐ Public Ltd. Co. ☐ Pvt. Ltd. Co. ☐ Non Profit Organisation ☐ Societies ☐ FOF ☐ Body Corporate ☐ Others .... (please specify)

OCCUPATION: ☐ Private Sector Service ☐ Public Sector Service ☐ Business ☐ Retired ☐ Government Sector ☐ Agriculturist ☐ Professional ☐ Forex Dealer ☐ Housewife ☐ Student ☐ Others .... (please specify)

Gross Annual Income: ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ > 1 crore
Networth in (Mandatory for Non-individual) ₹ .... as on D D / M M / Y Y (not older than 1 year)

For Individuals: ☐ Politically Exposed Person ☐ Related to Politically Exposed Person ☐ Not Applicable

For Non-Individual Investors (Companies, Trust, Partnership etc): Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (if No, please attach mandatory UBO declaration): ☐ Yes ☐ No

Non Individual investors involved/providing any of the mentioned services ☐ Foreign Exchange / Money Changer Services ☐ Money Lending / Pawning ☐ Gaming / Gambling / Lottery / Casino Services ☐ None of the above

DETAILS UNDER FATCA / FOREIGN TAX LAWS

Country of birth ______ Place of birth ______ Nationality ______

Type of address given at KRA : ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

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	Identification Type (TIN or other, please specity) ^

%To also include USA, where the individual is citizen / green card holder of the USA

^ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet been issued, please provide an explanation and attach this to the form.

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 [Tata 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.

ACKNOWLEDGEMENT SLIP (TO BE FILLED BY THE INVESTOR)

Sr. No.:

Received Subject to realisation and verification an application for purchase of units as mentioned in the application form.

from ______

Scheme	Cheque no.	Amount

Signature, Stamp & Date

Second applicant details ☐ Mr. ☐ Ms.

Name

2nd holder PAN/PEKRN M a n d a t o r y ☐ KYC Copy attached

#**OCCUPATION:** ☐ Private Sector Service ☐ Public Sector Service ☐ Government Sector ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others ....

#**GROSS ANNUAL INCOME:** ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore;

Networth in ₹ .... as on D D / M M / Y Y (not older than 1 year);

#**OTHERS:** ☐ Politically Exposed Person ☐ Related to Politically Exposed Person ☐ Not Applicable

MANDATORY

DETAILS UNDER FATCA / FOREIGN TAX LAWS

Country of birth ____________________ Place of birth ____________________ Nationality ____________________

Type of address given at KRA : ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

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	Identification Type (TIN or other, please specity) ^

%To also include USA, where the individual is citizen / green card holder of the USA. ^ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet been issued, please provide an explanation and attach this to the form.

Third applicant details ☐ Mr. ☐ Ms.

Name

3rd holder PAN/PEKRN M a n d a t o r y ☐ KYC Copy attached

#**OCCUPATION:** ☐ Private Sector Service ☐ Public Sector Service ☐ Government Sector ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others ....

#**GROSS ANNUAL INCOME:** ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore;

Networth in ₹ .... as on D D / M M / Y Y (not older than 1 year);

#**OTHERS:** ☐ Politically Exposed Person ☐ Related to Politically Exposed Person ☐ Not Applicable

DETAILS UNDER FATCA / FOREIGN TAX LAWS

Country of birth ____________________ Place of birth ____________________ Nationality ____________________

Type of address given at KRA : ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

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	Identification Type (TIN or other, please specity) ^

%To also include USA, where the individual is citizen / green card holder of the USA. ^ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet been issued, please provide an explanation and attach this to the form.

Guardian details

Name of Guardian (In case of Minor) Contact Person/Designation (In case of non-individual Investors) ☐ Mr. ☐ Ms.

Relation with Minor/Designation

Guardian's PAN/PEKRN M a n d a t o r y ☐ KYC Copy attached

Proof of relationship with minor **(Mandatory)** Mother / Father / Legal Guardian ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Other ______

Guardian / POA / Proprietor	PAN/PEKRN (mandatory)	PAN/PEKRN Proof enclosed	KYC Compliance
Name		☐	☐

DETAILS UNDER FATCA / FOREIGN TAX LAWS

Country of birth ____________________ Place of birth ____________________ Nationality ____________________

Type of address given at KRA : ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office

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	Identification Type (TIN or other, please specity) ^

%To also include USA, where the individual is citizen / green card holder of the USA. ^ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet been issued, please provide an explanation and attach this to the form.

CHECKLIST

Toll Free:1800-209-0101 (Open on all days). **Email:** kiran@tataamc.com**, Website:** www.tatamutualfund.com. Documents as listed below are submitted along with this application.

Document List		Document List		Document List	
1. KYC	☐	5. Bye-Laws	☐	9. Foreign Invest Remittance Certificate (FIRC)	☐
2. Resolution / Authorisation to invest	☐	6. Partnership Deed	☐	10. MICROSIP document	
3. Authorised Signatories List with Specimen Signature	☐	7. Overseas Auditor's Certificate	☐	11. Others ____________	
4. Trust Deed	☐	8. Notarised Power of Attorney	☐		

All documents in 3 to 8 above should be originals / true copies certified by the Director's / Trustee / Company Secretary / Authorised Signatory / Notary Public.

4. MAILING ADDRESS AND CONTACT DETAILS OF SOLE / FIRST APPLICANT (P.O. Box Address may not be sufficient. Please provide your complete Address)

City

Pin State Country

Phone O (STD Code) Extn. Fax

R (STD Code) **Mobile**

E-mail ➔ (IN CAPITAL)

[If you wish to receive Account Statement / Annual Report / Other Statutory Information via Post instead of Email ☐ (Refer Inst. – C9)].

Overseas Address (**Mandatory** in case of NRI applicant in addition to mailing address)

Zip code City Country

5. FIRST HOLDERS BANK ACCOUNT 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 details of First Unitholder required without which the application would be rejected.

Name of the Bank

Branch Account Type ☐ Savings ☐ Current ☐ NRO ☐ NRNR ☐ NRE

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 through ECS). * This is a 11 Digit Number, kindly obtain it from your Bank Branch. (Cancelled cheque is Mandatory)

6. SCHEME DETAILS Refer Instruction D and Page 1 & 2

Scheme / Plan: ____________________

Options: ☐ Growth ☐ Dividend **For Dividend option only:** Sub-Option: ____________________ Payout option: ☐ Payout ☐ Reinvestment

7. MY INVESTMENT GOAL (choose anyone (✓) (Refer Instruction E)

☐ Marriage ☐ Vacation ☐ Dream Home ☐ Dream Car ☐ Retirement ☐ Children's Education ☐ Children's Marriage.

Target Amount Rs. ____________________

8. INVESTMENT DETAIL (Strike off whichever is not applicable)

Gross Amount (A) DD Charges (if any) (B) Net Amount (Cheque / DD Amount)

₹ A B ₹ A minus B

Mode of Payment Dated

A/c No. ____________________ D D / M M / Y Y Y Y

A/c Type ____________________ Cheque / DD No. ____________________

Drawn on Bank

Branch Branch City

9. NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly) Refer Instruction M (MANDATORY)

Please select any one of the follows:

☐ Please register nomination as requested below (please fill the nomination form below) ☐ I wish to nominate multiple nominees (please strike out the form below & fill seperate form attached herewith) ☐ I do not wish to nominate.

I/We hereby nominate the person more particularly described hereunder to receive the Units allotted to me/us/credit in my/our folio in the event of my/our death. I/We understand that all payments and settlements made to such Nominee and Signature of the Nominee acknowledging receipt thereof, shall be a valid discharge of the AMC / Mutual Fund / Trustees.

Name .... Address ....

.... Nominee's relationship with 1st holder ....

If Nominee is Minor:

Date of Birth .... Proof of DOB ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Others ....

Name & Address of Guardian: ....

....

Relationship of the Nominee with the Guardian ☐ Mother ☐ Father ☐ Legal Guardian
Proof of relationship: ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Others ....

Sign of Nominee/Guardian (in case of minor nominee)

10. DEMAT ACCOUNT DETAILS: (Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with the Depository Participant). In case Unit holders do not provide their Demat Account details, Units will be allotted in physical form. (Refer Instruction L)

National Securities Depository Limited	Depository participant Name ______ DP ID No. I N Beneficiary Account No.	**Central Depository Securities Limited**	Depository participant Name ______ Target ID No.

11. DECLARATION AND SIGNATURES. Refer Instruction - C

The Trustee, Tata Mutual Fund

a.) Having read & understood the contents of the Scheme Information Document of the Scheme & reinvestment scheme, I/ We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I/ We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt. of India from time to time. I/ We have understood the details of the scheme & I/ We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. **b.) For NRIs:** I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I/ we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary. I/ We confirm that details provided by me / us are true & correct. **c)** The ARN holder 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. **d.)** I/We have read & understood the SEBI Circular no. MRD/DoP/Cir- 05/2007 dt. April 27, 2007 & SEBI Circular No. 35/MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/we are holding valid PAN card / have applied for PAN. **e.)** The ARN holder 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.

Date: ______________

1st Unitholder Signature / Thumb Impression	2nd Unitholder Signature / Thumb Impression	3rd Unitholder Signature / Thumb Impression