

360 COMMON APPLICATION FORM

m I						
Distributor Name & ARN No.	Sub-Broker Code	Employee Unique	Identification No.* RIA Name		RIA Code*	Date & Time of Receipt
wever, in case of any exceptional cases who	ere there is no such interaction, the been intentionally left blank by r dvice of in-appropriateness, if any	e investor can keep EUIN b ne/us as this transaction r, provided by the employee	oox blank and sign the follo is executed without any i e/relationship manager/sa	wing declaration; nteraction or advic es person of the dis	e by the employee/i	the transaction is "Execution only" or "Advisory relationship manager/sales person of the abov
First Unitholder/ Guardiar		nd Unitholder			Third Unitholder	
front commission shall be paid directly by	the investor to the AMFI register	ed Distributors based on the	he investor's assessment			<u> </u>
TRANSACTION CHARGES Please tick (*/)	(₹ 150 will be deducted)	vestor across Mutual d through a distributor who has ous factors including service rer	opted in' for transaction charge	(₹ 100 will be de	•	Mutual Funds by the investor to the AMFI register distributor based on
EXISTING UNITHOLDERS DETA	ILS					
isting Folio No.	Name o	f Sole/ First Unit Hold	der			
ote: All investor details like mode of holding registering different information, please		stor address and contact	details, will be captured a	s per existing info	mation under the gi	en folio. Proceed directly to section 7.
NEW APPLICANT'S DETAILS	(Please fill in BLOCK LETTERS	with black/blue ink and re	ead the instructions carefu	Illy, on page 1 to 4	before filling up the	form
Name of Entity/Sole/First Applican	Mr. Ms.					
N/PEKRN	KYC [Yes No Mo	ode of Ho l ding (Please ›) Sing l e [Joint E	ither/ Anyone or Survivor (Default Option : Join
te of Birth (Mandatory for Minor Applicant)	D D M M Y	YYY	Proof of Birth (Please) Passport	Birth Ce	ertificate Others
Resident Individual Company/Body Corpor Partnership Firm	PSU AOP/BOI ate Sole Proprietor Others A, CRS & Ultimate Beneficial Ownersi		ablishment PI	O Bank	/Charities / NGOs	
on-Individual Investors involved/pr ease (ii) (Applicable only for Non Individuals)		,	Foreign Excha	nge/ Money Cha	•	Money Lending/ Pawning None of the above
ame of Guardian / Contact Person	Mr. Ms.					
				🗆		
N/PEKRN for Guardian / Contact Pe	rson		Relationship with	Minor F	ather Mothe	rLegal Guardian (Refer instructions
NAME OF THE SECOND APPLICATE OF BIRTH	CANT Mr. Ms. PAN/PEKRN			Self-attested copy of	PAN/PEKRN along with	KYC acknowledgment should be attached
NAME OF THE THIRD APPLICA				1 .		
te of Birth DDMMY	Y Y Y PAN/PEKRN			Self-attested copy of	PAN/PEKRN along with	KYC acknowledgment should be attached
ADDRESS & CONTACT DETAIL	S OF F I RST/ SOLE APPLIC	ANT (P.O. Box Address	s is not sufficient. Refer	instruction no. 3)		
rrespondence Address (address detai	s will be updated as per your KYC rec	ords with CKYC / KRA.	Overseas Addre	SS (Mandatory for N	RI / FII Applicants)	
Н	OUSE / FLAT NO.				HOUSE / FLAT	NO.
	TREET ADDRESS				STREET ADDR	
CITY / TOWN		ETATE		CITY / TOWN		STATE
			_			
COUNTRY		PIN CODE		COUNTRY		PIN CODE
Fel. (Res.)	Tel. (Off	.)		Mobile No).	
Mobile No. provided pertains to	Self Spouse C	Dependent Children	Dependent Siblin	gs Depe	ndent Parents	A Guardian in case of a minor
Email ID (CAPITAL letters only)						
Email ID provided pertains to	Self Spouse C	Dependent Children	Dependent Siblin	gs Depe	ndent Parents	A Guardian in case of a minor
I hereby authorise 360 ONE MF (Formerly kr Investors providing Email ID would mandatorily I wish to receive physical copy of the scheme	eceive E - Statement of Accounts in li	eu of physical Statement of Ac		or abridged summary	on email.	
esset						
ACKNOWLEDGA (To be filled in by the			ARN No:			Application No.
eceived from						7
strument No.	Drawn	on Bank & Branch				
cheme/ Plan/ Option/ Sub-Option			Amount Rs.			Signature, Stamp & Date

Please Note: All purchases are subject to realisation of payment instrument. This acknowledgment slip is for your reference only. Information on the form will be considered final.

NT DETA I LS (Mandai	ory) (Details of	bank account in	which reder	nption, IDCW o	r other pa	yments to be cre	dited.)						
						Account Type (Please ✓)	Savings	Current	NRO	NRE FCNR			
				(Do n	ot abbrevi	ate)							
					City			Pir	n Code				
	MICR Code*						(IFSC/ NEFT cod	e required fo	r Direct credit)				
nall not be held responsit	le for delays or er	rors in processing	your request	if the information	provided	s incomp l ete or ina	ccurate.	en in Section	(9).				
S DETAILS For Indi	vidua l s (Manc	atory) Non Inc	dividual inv	estors includ	ing HUF	mandatorily fi	I separate FATCA	/CRS detai	i l s form				
First Applicant/Gua	rdian			2nd Appli	cant			3r	d Applicant				
Tax Payer [®] Ref. ID No			untry#	Tax Payer [®] Ref. ID No		Identification Type	Country#	- 7	rax Payer [®] Ref. ID No	Identification Type			
		1					1						
		2					2						
		3					3						
ntries in which you are a on Number is not availat	resident for tax le, kindly provide	ourpose, associa its functional eq	ted Taxpayer uivalent.	Identification Nu	mber and	it's Identification t	pe eg. TIN etc.						
				2nd Appli	cant			3r	d Applicant				
		Count	ry of Birth				Country of B						
lity				ality									
Residence is only India t	hen details of Co	untry of Birth & N	lationality nee	d not be provide	ed.		-						
YC DETAILS (Manda	tory. Please rea	d instructions r	o 5 & 6 un <u>d</u> e	r APPLICANT'S	INFORM	ATION.)							
Professional Agr	iculturist Hou	sewife Retire	ed Govern	ment Service	/Public	Sector Busine	ss Forex Dealer	Student F	Private Sector	Service Others			
NCOME DETAILS^	Below 1	Lac 1-5 Lacs	1-5 Lacs	5-10 Lacs	10-25 L	acs 25 Lacs	1 Crore >1 Crore	NET-W	/ORTH IN ₹	Date			
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			$\perp \Box$					tha	n 1 year)	DDMMYYYY			
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P DETAILS									Guardian				
Are you a Politically Exposed Person (PEP)			+=							Yes No			
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		(Details of acc	ount from wh	nich investmen	has beer	n done.)							
							ılar Direce	Ontion					
	D- · · ·												
				Fund ل	ransfei					ue/DD/UTR/UMR No.			
	A/c	Saving C	urrent	NRO NR	E FO	Others	Please specify	Instrume	nt Date D	D M M Y Y			
	·	·				Branch	·						
Lumpsun	Lum	osum + S I P	(for SIP pl	ease fill separat	e SIP cum	Mandate registrat	ion form)						
						Valid Upto	D M M Y	YY	Υ				
	n amount 50 c	s above for No	n individual	. LEI number o	of 360 Of	NE Mutual Fund	is 335800JVNCKE)JJFV1 [16					
ndatroy for transactio			Physical M	ode These o			tor wishes to hold the un						
OPTION	Demat												
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	nall not be held responsite bold units in demat form S DETAILS For Indi First Applicant/Gua Tax Payer® Ref. ID No Intries in which you are a son Number is not availate First Applicant/Gua Iity Residence is only India to YC DETAILS (Manda Professional Agri NCOME DETAILS^ Exposed Person (PE Politically Exposed of for income and occur VESTMENT DETAIL	nall not be held responsible for delays or er or hold units in demat form, please ensure the special point of the property of	ed cheque leaf of the same bank account as mentioned about all not be held responsible for delays or errors in processing to hold units in demat form, please ensure that the bank account as mentioned about all not be held responsible for delays or errors in processing to hold units in demat form, please ensure that the bank account is in demat form, please ensure that the bank account is in demat form, please ensure that the bank account is in demat form, please ensure that the bank account is independent of the processing of the processing in th	ed cheque leaf of the same bank account as mentioned above incase the hall not be held responsible for delays or errors in processing your request chold units in demat form, please ensure that the bank account linked with S DETAILS For Individuals (Mandatory) Non Individual invision demat form, please ensure that the bank account linked with S DETAILS For Individuals (Mandatory) Non Individual invision for Individuals (Mandatory) Individuals (Mandatory) Individuals (Mandatory) Individuals (Mandatory) Individuals (Mandatory) of Individuals Indiv	ed cheque leaf of the same bank account as mentioned above incase the bank account definal not be held responsible for delays or errors in processing your request if the information or hold units in demat form, please ensure that the bank account linked with the demat account in demat form, please ensure that the bank account linked with the demat account in demat form, please ensure that the bank account linked with the demat account in demat form, please ensure that the bank account linked with the demat account in the demat a	City MICR Code* ed cheque leaf of the same bank account as mentioned above incase the bank account details differ hall not be held responsible for delays or errors in processing your request if the information provided in bright on hold units in demat form, please ensure that the bank account linked with the demat account is ment S DETAILS For Individuals (Mandatory) Non Individual investors including HUF First Applicant/Guardian	(Please */) (Do not abbreviate) City MICR Code* ed cheque leaf of the same bank account as mentioned above incase the bank account details differ from investment bank all not be held responsible for delays or errors in processing your request if the information provided is incomplete or ina shold units in demat form, please ensure that the bank account linked with the demat account is mentioned here, *indice S DETAILS For Individuals (Mandatory) Non Individual investors including HUF mandatorly fit in the plant in the state of the plant in the plant in the state of the plant in t	Clay Clay	Character Char	(Please x y) Selvings Current NRC			



360 ONE Asset Management Limited (Formerly known as IIFL Asset Management Limited) 7th Floor, 360 ONE Center, Kamala Mills Compound, Lower Parel, Mumbai - 400013.

Email ID: service@360.one

Toll-free no. 1800-2108-606 | Website: www.iiflmf.com

PART B – NOMINATION OPT-IN We hereby Nominate the person(s) mo Details															
, , , ,															
Details	re particularly described	I hereunder to receive the	e Units held my/our Folio/s listed below i	the eve	nt of my /	our deat	h.								
	Nominee 1 Nominee 2				Nominee 3										
Nominee Name															
Nominee Address															
Relationship with the Investor															
Allocation % (Total to be 100%)															
Nominee PAN															
Mobile No.															
Email ID															
Date of Birth	(D D / M M / Y Y Y Y)		(D D / M M / Y Y Y Y	(D D / M M / Y Y Y)					(D D / M M / Y Y Y Y)						
		In case if Nomi	nee is a Minor (Mandatory)												
Guardian Name															
Guardian Address															
Guardian's Relationship with he Minor (attach Proof)															
Nominee/Guardian Signature															
12 POWER OF ATTORNEY (POA) HOLDER DETAILS						PAN									
rst Applicant POA Name											\top				
Second Applicant POA Name															
Third Applicant POA Name															
3 DECLARATION & SIGNATURES															
We have read, understood and agree to e Scheme(s), Foreign Account Tax Com ivacy Policy of 360 ONE Asset Manage d all applicable rules and regulations ar sclosed to me/us all the commissions (ir theme is being recommended to me/us hited States persons as per applicable Fasident External / Non-Resident Ordinar We hereby accord my/our consent and Ir ord party or another body corporate or an ithority of India ("UIDAI") by itself or throu e through any mode of communication. obile number and email provided by me/	pliance Act and Commo ment Limited (360 ONE d hereby confirm that I/I the form of trail commi . For NRIs / PIOs / FPIs Regulations or (ii) reside y / FCNR Account maint hereby authorize 360 O y person acting under a ugh its Registrar and Tra iii) I/We hereby accord	on Reporting Standards, AMC) (Formerly known We have not received no ssion or any other mode) only: I/We confirm that ents of Canada, and I/We ained in accordance with NE AMC/Fund for (i) coll lawful contract with 360 unsfer Agent ("RTA"). I he my/our consent to 360 O	statutory requirements prescribed by S as IIFL Asset Management Limited) av r been induced by any rebate or gifts, di , payable to him for the different compe I am / we are Non-Resident Indians / P e have remitted funds from abroad thro applicable RBI guidelines. ecting, receiving, possessing, storing, oNE AMC, in accordance with the Priva reby authorize the representatives of 36	EBI, AMF ailable or ectly or i ting Sche erson(s) ugh appr lealing, h cy Policy 0 ONE A	I, Prevel the web ndirectly, emes of v of Indian oved bar andling of (ii) validasset Man	ntion of lasite of 3 to make arious M Origin / hking chor discloating/au agemer	Money La 60 ONE Me this invest Mutual Fur Foreign Fannels or sure of me thenticatir	underin Mutual I Stment Inds from Portfolio from fu I/ our F Ing with Ind its I	g Act, Fund v The A n amo Inves nds in Person Unique	2002 www.ii RN ho ngst v stors b my / al Dar e Iden ates to	! (PML iflmf.co older which but no our N ata to ntifica				

11 NOMINATION (Mandatory) (Please ü and confirm the option selected)