

TATA MUTUAL FUND Mulla House, Ground Floor, M. G. Road, Fort, Mumbai - 400 001 Application Form For Tata Mutual Fund



Refer Sec. B

ALL THE DETAILS REQUESTED IN THE FORM ARE MANDATORY FOR EACH OF THE APPLICANTS $$$\rm Sr. No.: \ C$$

1. Advisor / Distributor Information

ARN / RIA [^] Code		Sub-Broker	ARN Code		Sub-Broker / Ba	ank Bran	ch Code	EUIN	Code	
Internal Code In case the subscription am other than First time mutual commission shall be paid dir ^ By mentioning RIA code, I	ount is ₹ 10,000 of fund investor) w ectly by the inves ⁄ we authorize yo	without any inte provided by the or more and yo ill be deducted tor to the AMF	ion for "execution-only" tran eraction or advice by the en employee/relationship mar our Distributor has op d from the subscriptio I registered Distributor n the SEBI Registered In	nployee/relati nager/sales po ted to rece n amount a rs based on	ionship manager/sales p erson of the distributor a ive transaction cha and paid to the distri the investors' asse	person of the and the distr rges, ₹ 15 ributor. Ur ssment of	above distribu ibutor has not o 0/- (for First nits will be is various facto	tor or notwiths tharged any adv time mutual ssued agains ors including	tanding the advice of in- risory fees on this transa I fund investor) or ₹ t the balance amour the service rendered	appropriateness, if any, ction. 100/- (for investor it invested. Upfront d by the distributor.
Sole / 1st Appl Thumb I	icant Signature mpression								pplicant Signatur numb Impression	
2. Applicant's In	formation	า							Re	fer Sec. A, C & J
	with 1 st applica under the US S	ant as a minor Securities Act	should be as mention r. Any applicants shou of 1933 and corporat se C-KYC No. is not a	uld not be tions or ot	a resident of Cana her entities organi	da or a pe sed unde	erson who fa r the laws of	alls within th f the U.S. Fo	ne definition of the r Investors New to	term "U.S. Person"
Ist Applicant's Det	ails						Folio	No.		
The first applicant » will be the primary holder and all	Mr. Ms	s. 🗌 M/s. 🛛	PAN / PEKRN			С	-KYC			
correspondence will be sent to him/her. Only the first holder	Name									
can be a minor. Existing Investors may mention the Folio no. and proceed to Sec. 4.	Date of Birth	(DOB) M M / Y		In ca	se of Minor: Proc	of of DOI	3: Birth o		School leavin	
Investors to ensure that PAN is linked to Aadhaar.	Mobile No.	, , , , , , , , , , , , , , , , , , , ,					iobile belo Self		Parent Child	
			ML/ TMF to send in	•					ı WhatsApp mobi	le number.
Contact Person - Design	nation (Non In	dividual Inv	/estors) / Power o	of Attorn	ey (POA) / Prop				inor applicant)	
Guardian Details	Mr. N	Ms.			PAN / PEKRN					
	Name									
For Non Individual \gg	Entity Identif	ier (LEl) Num	ber Mandatory for	Transact	ion Value of INR	50 crore	e and abov	e		
To be filled by » Guardian	· · ·				f Relationship	haallaa	ving cortifi	nata 🗌 Dag	sport Others	
Guardian	Mobile No.	Father	Legal Guardian	Date of	Birth		C-KYC		sport 🗆 Others	
Tax Status				DD	/ м м / ү ү					
	Resident II NRI-Repati NRI-Non-R Minor - Re Minor - NR Person of	riation epatriation sident Indivi II	idual Dartner Dompa	Undivideo rship any	d Family 🗌 Limit 🗌 Body 🗌 Socie	of Indiv ety / Clu Profit Or	lity Partner iduals b ganization	rship 🗌 F Q Q I F	Overseas Citizen o oreign National F Qualified Foreign oreign Portfolio I oreign Institutior	Resident in India Investor nvestor
3. Contact Detai	ls									Refer Sec. D
Mailing address is » required for initial communication. We										
will overwrite this address with the 1 st								City		
Applicants address as per the KRA	PIN			State				Country		
records	Residence Phone (prefix STD Code) Office Phone (prefix STD C				D Code)		Exti	n		
	Email Email belongs to Self					Parent				
			t have email addre rsical copy of the s	scheme-v	vise annual repo		-	nmary the	reof 🗌 Yes	□ No
TATA MUTUAL FUND				ledgemen	t Slip			. No.: C		
Fund Received from Mr./Ms./M/s.					PAN				₹	
for purchase in								Subject	to verification and i	ealisation.

Overseas address			
Mandatory for Non- Resident Individuals and Overseas Investors in addition to the mailing address.			
			City
	State	ZIP Code	Country

4. Investment Instrument Details

Refer Sec. E

Refer Sec. F & Product Labels

The name of the » first applicant	Gross Amount (₹) (A)	DD Charg (B)	es (₹) (if any)	Net Amount (₹) (Cheque / DD Amount) (A - B)
should be available on the investment				
Cheque.	Account Number		A/c Type	Dated
Cheque/ DD to be drawn in favour of 'Name of the Scheme'				
	Drawn on Bank			Cheque / DD No.
	Branch			Branch City

5. Investment Scheme Details

Scheme Name »	
Plan (select any one) ≫	Regular Direct
Option »	
Sub Option »	
Div. Payout Option (select any one) »	DCW Reinvestment DCW Payout

IDCW - Income Distribution cum Capital Withdrawal.

6. Bank Account Details

Refer Sec. G

The bank account details provided below will be held on record and considered as default bank mandate to pay redemption proceeds and IDCW payouts (if applicable).

This must be an Indian account. The 1 st applicant should be a holder in this	Bank Name			Branc	h
account.	Account number			A/C t	ype Savings Current NRO
					NRNR NRE
	MICR		IFSC for RTGS	IFSC	for NEFT
	Address				
	City		PIN	State	
	City	F	111	State	
%					%
Cheque Details					Acknowledgement Slip
Cheque/DD No	dated	A/c. No	Bar	1k	
Call (022) 6282 7777 (Monda	ay to Saturday 9:00 am to 5:30	pm)			Subject to realisation.

Mode of Holding	Single		Joint	Any one or Survivor	(Default)			
II nd Applicant's Detai	ls					Investors	to ensure that PAN	is linked to Aadhaar
Mr. Ms.				Status		PAN / PEK	RN	
				🗌 Resident Individual	NRI			
Name				I		1		
Mobile No.		Mobile belong	s to	Date of Birth		C-KYC		
		Self Spouse	Parent Child	D D / M M / Y	YYYY			
III rd Applicant's Detai	ils	· ·				Investors	to ensure that PAN	is linked to Aadhaar
Mr. Ms.				Status PAN / PEKRN				
				Resident Individual	🗌 NRI			
Name								
Mobile No.		Mobile belong	s to	Date of Birth		C-KYC		
		Self	Parent Child	 d d / m m / Y Y	Y Y Y			
8. Know Your Cı	ustomer (•						Refer Sec.
CATEGORIES		LICANT (Inclue		SECOND APPLICA	NT / GUAI	RDIAN	THIRD A	APPLICANT
Occupation >>	 Public Sec Governme Profession Housewife 	ent Sector	Business Agriculturist Forex Dealer Student	Private Sector Service Public Sector Service Government Sector Professional Housewife Others (please spect	e 🗌 Busii Agric Fore Stud	ness culturist x Dealer ent	 Private Sector Ser Public Sector Serv Government Sector Professional Housewife Others (please sp 	vice 🗌 Business
Gross Annual Income »	 5-10 Lacs >25 Lacs- Networth in 	1 crore		Below 1 Lac 5-10 Lacs >25 Lacs-1 crore Networth in	□ 1-5 □ 10-2 □ >1 c	5 Lacs rore	Below 1 Lac 5-10 Lacs >25 Lacs-1 crore Networth in	
	DD/ (not older than	•		₹on D D / M M (not older than 1 year)			₹ D D / M M (not older than 1 year)	ΙΥΥΥΥΥ
Others » Additional KYC De	Related to	Exposed Person Politically Expo	osed Person	Not Applicable Politically Exposed F Related to Politically		Person	Not Applicable Politically Expose Related to Politic	ed Person cally Exposed Person
For Non Individuals » only (Companies, Trust, Partnership etc.)	(if No, mand Non Individu Foreign Ex Money Lei	atory to attach al investors inv change / Money nding / Pawning	the UBO declara olved/providing v Changer Servic J	g any of the mentioned s es Gaming / Gambli None of the abo	services ing / Lotter ve			Yes 🗌 No
9. Foreign Accou		•	•	CA) & CRS Deta	ails			Refer Sec.
For Individuals	FIRST APP	PLICANT (inclue	ding Minor)	SECOND APPLICAN	NT / GUAR	DIAN	THIRD A	PPLICANT
Country of Birth ≫								
Place of Birth \gg								
Nationality \gg		ase specify)	U. S.	 Indian Others (Please specify 	U. S.	[Indian Others (Please spec	U. S.
Type of address given at KRA \gg	Residentia	l or Business	Residential Business	Residential or Busine	ss 🗌 Resid	dential [ness	Residential or Busin Registered Office	ness 🗌 Residential 🗌 Business
Are you also a resident in \gg any other country(ies) for tax	□ No		Yes	□ No	🗌 Yes	[No	Yes
purposes? Country of Tax Residency 1 >>	If yes, compl	ete section belo	w.					
Tax Identification Number 1 »								
Identification Type 1 >>								
If TIN is not available please »	Reason 🗌	A 🗌 B 🗌	С	Reason 🗌 A 🗌 B	C	F	Reason 🗌 A 🗌	ВС
tick the reason A, B or C * Country of Tax Residency 2 >>								
Tax Identification Number 2 \gg								
Identification Type 2 \gg								
If TIN is not available please \gg	Reason 🗌	A B	С	Reason 🗌 A 🗌 B	C	F	Reason 🗌 A 🗌	B C

only if the authorities of the respective country of tax residence do not require the TIN to be collected); Reason C: Others- Please state the reasons thereof FATCA & CRS Related Details for Non Individuals: Please submit Form W8 BEN-E / Specified declaration (Enclosed)

TU. NOIIIIIation	Delalis		Refer Sec.			
Mandatory for Individual(s) applying	You can nominate up to 3 persons to receive the Units allotted to you in your folio in the unfortunate event of death of all unit holders. All payments and settlements made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC/ Mutual Fund/ Trustees.					
singly or jointly. Select any one »	ninate.					
1 st Nominee	Nominee Name					
	Relationship with Nominee	Date of Birth \square \square $/$ M M $/$ Y Y Y				
	Address		City			
	State	PIN	Country			
	Guardian Name in case of Minor	Allocation (%)	Signature of Nominee / Guardian			

11. Demat Account Details

10 Nomination Dataila

2nd Nominee

3rd Nominee

Nominee Name

Nominee Name

Address

State

Address

State

Relationship with Nominee

Guardian Name in case of Minor

Relationship with Nominee

Guardian Name in case of Minor

Ensure that the sequence of names as mentioned in the application form	Depository participant Name					
account held with the account held with the Depository Participant. In case the details are found to be incorrect, Units will be allotted in	Central Depository Securities Limited Target ID No.	National Securities Depository Limited DP ID No.				
		I N Beneficiary Account No.				
physical mode.						

PIN

PIN

Allocation (%)

Allocation (%)

anu Signatures I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws. I / We hereby confirm and declare as under-

(1)I/We have read, understood and hereby agree to comply with the terms and conditions of the scheme related documents and apply for allotment of Units of the Scheme(s) of Tata Mutual Fund ('Fund') indicated in this application form. //We am/are eligible Investor(s) as per the scheme related documents and am/are authorised to make this investment. The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of (2)

I/we am/are eligible investor(s) as per the scheme related documents and am/are authorised to make this investment. The amount invested in the scheme(s) is through regulations related documents and am/are authorised to make this investment. The amount invested in the scheme(s) is through regulations for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India. The information given in / with this application form is true and correct and further agree to furnish such other further/additional information as may be required by the Tata Asset Management Limited (TAML)/ Fund and undertake to inform the AMC / Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished from time to time. That in the event, the above information and/or any part of it is/are found to be false/ untrue/misleading, I/We will be liable for the consequences arising therefrom. (3)

(4)

I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Mutual Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us. I/We hereby authorize you to share the account statement of the folio with the distributor /broker / advisor on record. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. (5) (6)

The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. (7)

(8) I/We hereby confirm that I/We have not been offered/ communicated any indicative portfolio and/ or any indicative yield by the Fund/AMC/its distributor for this investment

- I / We agree that the unit balance(s) reflecting in the account statement is subject to realisation of Cheque accompanying the purchase request, PAN validation and KYC compliance. (9)
- (10) For Foreign Nationals Resident in India only: I/We will redeem my/our entire investment/s before I/We change my/our Indian residency status. I/We shall be fully liable for all consequences (including taxation) arising out of the failure to redeem on account of change in residential status.

(11) For NRIS/ PIO/OCIs only: I/We confirm that my application is in compliance with applicable Indian and Foreign laws.

For NRIs/ PIO/OCIs only: I/We confirm that my application is in compliance with applicable Indian and Foreign Iaws. I/We hereby accord my/our consent to TATA AMC for receiving the promotional information/ material via email, SMS, telemarketing calls, etc. on the mobile number and email provided by me/us in this Application Form. Date: (12)

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

Refer Sec. L

Date of Birth

Citv

Country

Date of Birth

City

Country

D D / M M / Y Y Y

Signature of Nominee / Guardian

Signature of Nominee / Guardian

Refer Sec. M