

APPLICATION NO.

COMMON APPLICATION FORM FOR EQUITY ORIENTED SCHEMES (Please fill in BLOCK Letters)																											
ARN	ARN & Name of Distributor Branch Code (only for SBI and										_		•	b-Broke			_	Reference No. (To be filled by Registrar)									
ARN					5	SH				ÉΑ														,		, -3	,
Upfront commission					_	_							d on	the in	rvesto	rs' ass	essmen	t of vari	ous fac	ctors in	cluding	the s	ervice ı	rendere	ed by th	e dist	ributor
1. PARTICULA									J																OTE 1		
EXISTING FOL	IO N	Ю.															itholdei procee								e and	PAN	
Name (Mr/Ms/M/s)																											
Date of Birth* *Mandatory in case of N	D	D	M	M	Υ	Υ	Υ	Υ		Email	ID																
Telephone No.																Me	obile N	о.									
Name of Father/																											
Guardian in case Name of Contact	Perso						l		ı		ı		Ī	T	-						Ī	ı					
(in case of Institutional Inves	stor)											Attac	hed	$\overline{\Box}$	PAN F	Proof		[Are ye	ou KY	C Con	npliant	Pleas	se (✔)		Yes		No]
2. PARTICULA	RS	OF S	ECOI	ND A	PPLI	CAN	Т											. ,			Ė		, ,	E NO	OTE 2		
Name Mr./Ms./M/s.										I		1			Т			1		I							
PAN												Attac	hed		PAN F	Proof		[Are ye	ou KY	C Con	npliant	Pleas	se (🗸)		Yes		No]
3. PARTICULA	RS (OF TI	HIRD	APP	LICA	NT																	(SE	E NC)TE 2))	
Name Mr./Ms./M/s.		Щ.	<u>L</u>	<u>L</u> .	<u>L</u> ,	L,	L,	<u>L</u> ,	L,	1.																	
PAN												Attac	hed		PAN F	Proof		[Are ye	ou KY	C Con	npliant	Pleas	, ,		Yes		No]
4. GENERAL II	NFOR	RMAT	ION -					r app	licab	ole				NA.	- d	f Llala	line /DI		()))oour			OTE 1 se (✔))		n)
☐ Individual ☐	PSU				s (Ple Partn					☐ Ba	nk		\dashv	Si		ПОІС	ling (Pl	ease ())	☐ Pro	ofessio		alion	•	Hou		e
	FII				Minor	r throu	ıgh Gu	ıardiar		☐ PIC)			Jo	-						siness	3			Reti		
	HUF Sole	Propr	ietor	R	Comp		Body C	Corpor	ate	□ NR	1			☐ Ar	y one	or S	urvivor			Stı					☐ Ser	vice	
5. CONTACT			10101		01.101																		(SE	E NO	TE 1)	
Local														Т	T	T											ī
Address of 1st Applicant										 				+	+	$^{+}$											
Landmark										T				Ť	Ť	T	Ť										
City																					Pin						
State																											
	Addre	ss for (Corres	oonder	nce for	NRI A	pplicar	nts onl	y (Ple	ease (🗸)) India	n by De	fault				Foreign	П —									
Foreign Address (NRI / FII Applicants)																											
										\perp			L		4	4	4			<u> </u>			Ш				
City										_				+	_	+											
Country	10111	ADO										<u> </u>	<u> </u>					Zip									
6. BANK PART	ICUL	ARS	(As p	er SE	BI Reg	ulatio	ns it i	s man	dator	y for In	vesto	rs to p	rovi	de the	eir bar	ık acc	ount de	tails)	1	1	ı		(SE	E NO	OTE 3)	
			<u> </u>	l	<u> </u>					<u> </u>			H	+	_	+					1			l			
Branch Name and Address												_		+	+	+		+	+								
City													\vdash	+							Pin						
Account No.										+		 		$^{+}$		$^{+}$			<u> </u>		_	coun	t Type	(Plea	ase ✓)		
9 digit MICR Cod																que nur	nber. Ple	ase prov	ide	Sav	ings	NR	0	FC	NR		
	le 					<u> </u>				a co	oy of ca	ancelled	cheq	ue leat)					Curr	rent	NR	E	Ot	hers		
IFS Code 7. DIRECT CR	EDIT	OF I	חועום	END/	REL	EME	TION																- (SEE	NOTE	6)	
Unit holders havir	ng cor	e banł	king a	ccount	with	select	ed bar	nks w	ill red	ceive th	eir re	dempt	ion/c	divide	nd pro	ceed	s (if any) direct	tly into	their l	bank a	ccoun					of a
Note: AMC, rese	e leaf.	. If you he riq	do no	ot wish use ar	to rec	ceive de of	divide:	nd/red ent as	empt dee	ion pro	ceeds	s throu	ıgh d	direct	cred	it , ple	ease ticl	(✓) th	e box								
I/We understand	that A	MC sh	nall no	t be i	espor	nsible	if tra	nsacti	on th	rough	ECS	/ Dire													t infor	matio	n.
SBI MUTUAL							k-			- — i	EAR	HERE	_	_			form c	ompul	Sorilly S	along	with a	ppiiCa	uon to	orm			
A partner to	r lite.	(A Join	ıt Ventu	re betw	een SB	81 & SG	AM)		Pvt. L	td.	ACK To b	NOV be filled	d in l	by the	EME e Inve	stor	SLIP	AP	PLIC	ATIO	N N	0.					
(To be filled in by Received from :	tne F	ırst ap	piicar	ıt/Auth	iorize	a Sigr	atory):						1				T	Ī						Si Signatu	tamp ire & I	Date
Scheme N	ame	•		(Option					Chequ	e/ DD	Amou	nt (R	Rs.)		Bank	and Bra	anch		Cheq	ue / D	D No.	& Dat	е			
				_	arowth Dividen		ividen nvestr	d Payo	out																		
Attachments					viuell	ia nei		HOIIL	_						M nur	chaco	s are sub	iect to r	ealicat	ion of a	heaue	/dems	and dra	ft			

8. INVESTMENT AND PAYMENT DETAILS: I/We would like to invest in the following Scheme of SBI Mutual Fund (SEE NOTE 5)																									
One time Invest		AYIVI	ENI	DEI	AILS	: I/W													th (One time & SIP)						
																		n (One time & SIP) ase fill in your investment details below and SIP details at SR No. 9							
Scheme Name																									
Options (Please ✓)	L Gr	owth					Divide	nd P	ayout	t	Ш	Divid	end F	Reinv	estme	nt									
Che	que / D	D Ar	nount	(Rs.)							D	rawn	on Ba	nk ar	nd Bra	nch				Cheque / D.D. No. & Date					
Investm	Investment Amount (Rs. in Words)																								
9. SYSTEMATIC I	SIP (SEE NOTE 12, 13, 14 &														E NOTE 12, 13, 14 & 15)										
SIP SBI CHOTA SI																						(A)) MICEO CIP			
									mou		ιο αρρι	ioutioi	110101	1411010	011 (1	1 1000) HOIL (✓)) MICRO SIP							
1. Payment Mechanis					Cheq												CS/Dire								
(Please ✓ any one only	r)			_		e provi	ide the c		elow)						(Please	complet	e enclo	sed SII	P ECS/	Direct D	Debit Facility Registration cum Mandate Form)			
				SIP Da				5 th		1:	5 th		25 ^t	th			No of	SIPs	i 🗀]			
2. Frequency (Please	✓ anv o	ne only		(Please ✓) Monthly SIP (Defau													Quarte	rly S	IP			-			
3. Enrolment Period		01119	<u> </u>	_	6 mor		,-0.4	/		1	2 mor	nthe					ate of	, ,	T		БТ				
(Please ✓ any one only)							-								C	omme	ncem	ent	D	D	IVI IVI Y Y Y			
4. Cheque(s) Details			<u> </u>	No	o. of C	neque	es	SII	SIP Amount (in figures)						Che	eque N	NOS		-			Cheques drawn on			
10. DOCUMENT D	ETAIL	S (ir	case	e of	micr	o SIF	P)															(SEE NOTE 14)			
Document Name:																									
Document Number (if a	ıny)																								
11. NOMINATION	,,	to no	ominat	te the	folloy	wing r	erson	body i	to rec	evive.	the a	mount	to m	v cre	dit in t	he ev	ent of	my de	aath			(SEE NOTE 10)			
Name of the Nominee	_	to m	Jimia	0 1110	TONO.	l e	013011	body	10 100	JOIVO	liic ai		10 111	y 0.0	ont in t	1000	Perce					(322 110 12 10)			
N				_													Feice	iilage				-			
Name of the Guardia	1*																								
Relationship											Date	of Bi	rth*	D	D	M	M	Υ	Υ	Υ	Υ	\otimes			
Address of Nominee/																						Signature of Guardian*			
Guardian*																						(*Mandatory in case of Minor nominee)			
Name of the Nominee																	Perce	ntage							
Name of the Guardia	*																1 0100								
	`-												Щ			_									
Relationship											Date	of Bi	rth*	D	D	M	M	Υ	Υ	Υ	Υ	\otimes			
Address of Nominee/ Guardian*																						Signature of Guardian*			
																						(*Mandatory in case of Minor nominee)			
Name of the Nominee																	Perce	ntage	•						
Name of the Guardian	1*																								
Relationship	+										Date	of Bi	rth*	_	Б	М	М	\/	\/	- \/	- \/				
· ·	+										Date	01 51		D	D	IVI	IVI	Υ	Υ	Υ	Y	⊗			
Address of Nominee/ Guardian*																						Signature of Guardian* (*Mandatory in case of Minor nominee)			
	000-6																					(SEE NOTE 4)			
12. SERVICES (Ple		PINI fe	orm to	view	accon	nt info	rmatio	n onlin	10							Words	Lliko to	rocci	VO 00	COURT	etator				
I would like to rec						THE HITC	mmali0	ii Oillif	ıc						ш,	would	i like to	rece	ive aci	count	oidien	ments by email			
13. DECLARATION			_			"I/\ <i>M</i> ^	have ro	ad and	ındere	tood +I	he cont	ents of	the off	er doo	ument o	ind the	details o	f the er	heme	and I/M	e have	not received or been induced by any rebate			
																						gitimate sources and is not held or designed			
																						ory authority from time to time." * I/We certify			
																						rised to enter into this transactions for and on itted from abroad through approved banking			
channels or from my/our No	n Reside	nt Exter	nal/Ordi	inary ac	ccount/	FCNR A	Account .	* Applic	able to	other t	than Inc	dividual	s/HUF	; ** Ap	plicable	to NRI;	I/We do	not hav	e any e	xisting I	Micro SI	IPs which together with the current Micro SIP			
																	ed to me/	us all th	ne comr	mission	s (in the	form of trail commission or any other mode),			
payable to him for the difference	и сопр	eury 5	unemes	oi varii	ous IVIU	iluai Fü	IIUN 6DII	among	or Milic	ii tile S	CHEINE	is nein	y recon	mielic	J€U (U ITI	c/us		\top							
SIGNATURE(S)									.	_									_						
Applicants must sign as per mode	⊗								⊗											⊗					
of holding	icant	nt / Guardian / Authorised Signator							ory 2nd Applicant / Authoris							ry		3rd Applicant / Authorised Signatory							
Date										Place															
										-TEA	AR HE	RE —		_											
All future commu	nicatio	n in	conne	ection	with	this							d to t	the F	Regist	rars t	o the	sche	me d	or SR	IMF (Corporate Office.			
				50011	. *******		~PP110	20011	J.10u		· uuu	. 5556	J 10		•		.5 .110	20110		. 00		co.porato omoo.			
Investment Mana SBI Funds Manag		t Pv	t. Ltd												egistr		re Mar	าลตอ	ment	Servi	ces P	Pvt. Ltd.,			
(A Joint Venture	etwee	en SE	31 & S	GAN	1)												ge ivial tration								
191, Maker Towe Mumbai - 400 00		Cuffe	Para	ıde,												_						o. Hotel Palmgrove,			
Tel.: 022-221802		18022	21, Fa	ax : (022 -	2218	0244							С	henna	ai - 6	00034	Pho	ne: 0)44 –	2828	33606/7/8, 39115501/2/3			
E-mail : partnerfo							-														_L@c	amsonline.com			
Website: www.sb	imf.co	m & '	www.s	<u>sbifur</u>	nds.co	om								W	/ebsite	: wv	vw.can	nsonl	ine.co	om					