

Common Application Form for Equity, Monthly Income and Balanced Schemes

(For Lumpsum / Systematic Investments)



Sr. No.: **A**

Please refer the instructions while filling the Application Form. Tick (✓) whichever is applicable. (Strike out which is not required)

I. DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Tata Mutual Fund)

Distributor / Broker ARN	ARN - 83535 SHAN WEALTH	Sub-Broker Code	
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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.

Existing Folio Number: **SIP Form Attached**

MICRO SIP - Refer instruction E

For Micro SIP please mention 'MICROSIP' in 'PAN area' for 1st applicant / Guardian / 2nd applicant / 3rd applicant wherever applicable. Mentioning the date of Birth in section 4 below mandatory for Micro SIP applications. Micro SIP document submitted (any one mentioned in the instruction {E.2} :

	Document Enclosed	Document Id	Validity of document
First			
Second			
Third			

I/We hereby declare that I/We do not have any existing Micro SIP's which together with the current application will result in aggregate investments exceeding Rs.50,000/- in a year.

MANDATORY [Please tick (✓)] (Refer Instruction - F)

APPLICANT DETAILS	PAN * please attach proof	Know Your Client (KYC)	STATUS
FIRST APPLICANT	<input type="text"/>	<input type="checkbox"/> Proof <input type="checkbox"/> KYC Complied	<input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI/NRO <input type="checkbox"/> NRI/NRE <input type="checkbox"/> Trust <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others _____ <input type="checkbox"/> Partnership <input type="checkbox"/> Public Ltd. Co. <input type="checkbox"/> Pvt. Ltd. Co. <input type="checkbox"/> FII <input type="checkbox"/> On behalf of Minor Please specify _____ <input type="checkbox"/> Societies <input type="checkbox"/> HUF <input type="checkbox"/> PIO <input type="checkbox"/> Body Corporate <input type="checkbox"/> FOF
SECOND APPLICANT	<input type="text"/>	<input type="checkbox"/> Proof <input type="checkbox"/> KYC Complied	
THIRD APPLICANT	<input type="text"/>	<input type="checkbox"/> Proof <input type="checkbox"/> KYC Complied	
GUARDIAN/POA HOLDER	<input type="text"/>	<input type="checkbox"/> Proof <input type="checkbox"/> KYC Complied	

2. SOLE / FIRST APPLICANT'S PERSONAL DETAILS (Please fill in Block Letters use one box for one alphabet leaving one box blank between two words, as it appears in your Bank Account)

Name	Mr Ms M/s																						
Date of Birth	<input type="text"/>	Status: (✓)	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																			
Guardian Name (in case of Minor) Contact Person - Designation (non individual) / PoA Holder (investments made of constitutional attorney).																							
Name	Mr Ms M/s																						
Date of Birth	<input type="text"/>	Status: (✓)	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																			
Address [P. O. Box Address is not sufficient] (Indian address in case of NRI's / FII's)																							
<input type="text"/>																							
<input type="text"/>																							
<input type="text"/>																							
City																				Pin code Mandatory			
State																				Country			

Contact Details

Phone	<input type="text"/>	Extn.	<input type="text"/>	Fax	<input type="text"/>	Mobile	<input type="text"/>
e-mail	<input type="text"/>						

I/We wish to receive the following via e-mail in lieu of physical document(s) (Please ✓) Account Statement Annual Report Other Communication

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

<input type="text"/>																						
<input type="text"/>																						
<input type="text"/>																						
State																				Country	City	Zip code

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 NRE/FCNR Account.

Occupation (please ✓) Agriculture Business Service Professional Housewife Retired Student Other

3. JOINT APPLICANT'S DETAILS

Second Applicant

Name	Mr Ms M/s																						
Date of Birth	<input type="text"/>	Status: (✓)	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																			

Third Applicant

Name	Mr Ms M/s																						
Date of Birth	<input type="text"/>	Status: (✓)	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																			

Mode of Holding (please ✓) Single OR Joint OR Anyone or Survivor **Default Option: Joint**

ACKNOWLEDGEMENT SLIP (To be filled by the investor)

Sr. No.: **A**

Received from Mr. / Ms. / M/s.

an application for Units of

Plan Option Sub-option

alongwith Cheque / DD No. Dated Drawn on (Bank)

Amount (Rs.)

Signature, Stamp & Date

Subject to realisation of cheque / Demand Draft and verification of mandatory information / document.

4. FIRST HOLDERS BANK ACCOUNT DETAILS (Mandatory) Refer Instruction G

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 No. (in Fig.)											
Account No. (in words)											
Bank Address											
City						State					
PIN	MICR Code					(To be filled in only if dividend is to be paid through ECS).					
* IFSC Code for NEFT											
Ac. No.		9	7	4	6	1	5	2			
In words		Nine	Seven	Four	Six	One	Five	Two			

Example for filling the Account No. *** This is a 11 Digit Number, kindly obtain it from your Bank Branch. (Please attach copy of cancelled cheque)**

5. DIRECT CREDIT FACILITY FOR REDEMPTION / DIVIDEND / REFUND PAYOUTS

Tata Mutual Fund directly credits the Redemption/Dividend/Refund payout into the investor's Bank Account in case the account is with **ICICI Bank Ltd./HDFC Bank Ltd./Axis Bank/IDBI Bank/Standard Chartered Bank/Kotak Mahindra Bank/HSBC Bank/Deutsche Bank/ABN Amro Bank/Oriental Bank of Commerce/ Centurion Bank of Punjab/State Bank of India (Core banking centers only - subject to validation).**
 I/We understand that the instruction to the bank for Direct Credit/NEFT/ECS will be given by the Mutual Fund & such instruction will be adequate discharge of Mutual Fund towards redemption/dividend/refund proceeds. In case of bank not crediting my/our bank account with/without assigning any reason thereof or if the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Tata Mutual Fund responsible. I/We understand that in case account number furnished by me/us, if found incorrect, I/We would not hold Tata Mutual Fund responsible for the credit going to the wrong account. Further, the Mutual Fund reserves the right to issue a demand draft/payable at par cheque in case it is not possible to make payment by DC/NEFT/ECS.
If however you wish to receive payouts by cheque, please tick here

6. SCHEME DETAILS Refer Page 3 & 4 for correct scheme name

Scheme Name _____ Plan _____
 Options _____ Dividend Frequency _____

[A] INVESTMENT DETAILS (Strike off whichever is not applicable)

Gross Amount (A) _____ DD Charges (if any) (B) _____ Net Amount (Cheque / DD Amount) _____
 Rs. _____ A minus B _____
 Mode of Payment _____ Dated _____
 A/c No. _____ A/c Type _____ Cheque / DD No. _____
 Drawn on Bank _____ Branch _____ Branch City _____

[B] SYSTEMATIC INVESTMENT

Installment Amount (Rs.) _____ No. of Installments _____ Total Amount _____ SIP Period _____
 Rs. _____ x _____ = Rs. _____ From _____ To _____
First SIP Installment Cheque Details :
 Cheque No. _____ Rs. _____ Dated _____
 SIP Date (Please ✓) 1st OR 07th OR 10th OR 20th OR 25th SIP Frequency (Please ✓) Monthly OR Quarterly
 Drawn on Bank _____ Branch _____ City _____

SIP THROUGH AUTO-DEBIT (ECS)

Please fill up enclosed SIP Auto Debit (ECS) Facility Form and submit it together with this Application Form.

SIP THROUGH POST-DATED CHEQUES

Please fill attached SIP form for Post Dated Cheques (PDCs)

7. NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly) Refer Instruction - J

Name and Address of the Nominee(s)	Nominee's Relationship with the 1st unitholder	Proportion (%) by which the units shared by will be shared by each nominee (% to aggregate to 100%)	Date of Birth	Name & Address of Guardian	Signature of Guardian
Nominee 1				(to be furnished in case the nominee is minor)	
Nominee 2					
Nominee 3					

8. DECLARATION AND SIGNATURES. Refer Instruction - C

The Trustee, Tata Mutual Fund
 a) Having read & understood the contents of the Offer Document of the 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. **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 confirm that details provided by me / us are true and correct. **e)** 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. **f) For Micro SIP:** I/We hereby declare that I/We do not have any existing Micro SIP's which together with the current application will result in aggregate investments exceeding Rs.50,000/- in a year.
 Date: _____

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

CHECKLIST

Tata Mutual Fund: Toll Free No. 1800-209-0101 (Open on all days). **Email:** kiran@tataamc.com, **Website:** www.tatamutualfund.com.
Checklist: Documents as listed below are submitted along with this application .

Document List	Document List	Document List
1. PAN <input type="checkbox"/>	5. Memorandum & Articles of Association <input type="checkbox"/>	9. Overseas Auditor's Certificate <input type="checkbox"/>
2. KYC <input type="checkbox"/>	6. Trust Deed <input type="checkbox"/>	10. Notarised Power of Attorney <input type="checkbox"/>
3. Resolution / Authorisation to invest <input type="checkbox"/>	7. Bye-Laws <input type="checkbox"/>	11. Foreign Invest Remittance Certificate (FIRC) <input type="checkbox"/>
4. Authorised Signatories List with Specimen Signature <input type="checkbox"/>	8. Partnership Deed <input type="checkbox"/>	12. MICROSIP document <input type="checkbox"/>
		13. Others _____

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