

Common Application Form for Equity, Monthly Income and Balanced Schemes

(For Lumpsum / Systematic Investments)



Expertise that's trusted

Sr. No.:

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

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

Distributor / Broker ARN	8801	Sub-Broker Code	
Existing Folio Number:		<input type="checkbox"/> SIP Form Attached	

PAN AND KYC COMPLIANT STATUS DETAILS (MANDATORY)

	PAN # (Refer Instruction - E)	KYC Compliant Status** (If yes attach proof) KYC Mandatory for investment of Rs. 50,000 and above. (Refer Instruction - F)
First Applicant / Guardian*		<input type="checkbox"/> Yes <input type="checkbox"/> No
Second Applicant		<input type="checkbox"/> Yes <input type="checkbox"/> No
Third Applicant		<input type="checkbox"/> Yes <input type="checkbox"/> No

*If the First Applicant is a Minor, then please state the details of Parent / Guardian. # Please attach PAN proof. **Refer Instruction - E

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	D D M M Y Y Y Y	Status: (✓) <input type="checkbox"/> RI <input type="checkbox"/> NRI

Name of the Contact Person in case of Non-Individual

Guardian Name (if sole / First applicant is a Minor)

Name	Mr Ms M/s	
Date of Birth	D D M M Y Y Y Y	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)

City	Pin code Mandatory
State	Country

Contact Details

Phone	O	Extn.	Fax	Mobile
R				
e-mail				

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)

City	Zip code
State	Country

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

Are you applying as (please ✓)	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Trust	<input type="checkbox"/> BOI	<input type="checkbox"/> Pvt. Ltd. Co.	<input type="checkbox"/> Societies	<input type="checkbox"/> Body Corporate
	<input type="checkbox"/> NRI/NRO	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> AOP	<input type="checkbox"/> FII	<input type="checkbox"/> HUF	<input type="checkbox"/> FOF
	<input type="checkbox"/> NRI/NRE	<input type="checkbox"/> Partnership	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> On behalf of Minor	<input type="checkbox"/> PIO	Others _____

3. JOINT APPLICANT'S DETAILS

Second Applicant

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

Third Applicant

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

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

Name of Power of Attorney holder (POA) if investment is being made by a Constituted Attorney:

Name	Mr Ms M/s	
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PAN* * Refer Instruction - E. Kindly enclose copy of the proof of PAN. In case of a joint holding, PAN of all the joint holders should be mentioned in the application form.

ACKNOWLEDGEMENT SLIP (To be filled by the investor)

Sr. No.:

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.

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

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

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).

If however you wish to receive payouts by cheque, please tick here ☐

Scheme Name	Plan
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[A] INVESTMENT DETAILS	(Strike off whichever is not applicable)
1. Name of the investment:	
2. Nature of the investment:	
3. Date of acquisition:	
4. Cost of acquisition:	
5. Current market value:	
6. Expected return:	
7. Risk factor:	
8. Other details:	

[illegible]

[B] SYSTEMATIC INVESTMENT

Rs.

 x

 = Rs.

 From

 To

☐ SIR THROUGH AUTO DEBIT (ECS) ☐ SIR THROUGH POSTAL NOTE CHEQUES

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

the Nominees(s)	Relationship with the Issuer	Interest in the Issuer's Securities	Other Information
		shared by will be shared by each	
		(to be furnished in case the nominee is minor)	

8. DECLARATION AND SIGNATURES. Refer Instruction - C

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

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. BAA	<input type="checkbox"/>	5. M	<input type="checkbox"/>	9. C	<input type="checkbox"/>

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