

Exchange Plaza, 'B' Wing, Illrd Floor, NSE Building, Bandra Kurla Complex, Bandra (E), Mumbai - 400 051, India. Tel.: 022-2202 1111. Fax: 022-22044466 Website: www.principalindia.com E-mail: customer@principalindia.com

Application Form for Principal Child Benefit Fund

Application No.

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STATUS OF UNITHOLDER / BENEFICIARY (Please 🗸)		OCCUPATION OF UNITHO	LDER / BENEFICIA	RY (Please 🖌)	
Resident Individual Partnership Firm AOP BOI Minor Bank / FII Society/Club Othe HUF Trust Company	ers (Please specify)			 Profession Student 	Retired
IF UNITHOLDER / BENEFICIARY IS A NON-RESIDENT		MODE OF HOLDING			
NRI (Repatriable) FII (Repatriable) NRI Minor (PIO NRI (Non Repatriable) NRI Minor (Repatriable) Non Repatriable)	Single			
NAME OF GUARDIAN (in case Unitholder / Beneficiary is a Minor)	Mr. N	5			
F I R S T N A M E		E N A M E		A S T	N A M E
Minor's Relationship STA	TUS (Please 🖌) 🗌 Inc	vidual 🗌 Trust 🗌 Others	STATUS (Pleas	e 🗸) 🗌 Resident	Non-Resident
4 PERSONAL IDENTIFICATION NUMBER (To serve	-	• •			
Do you want a PIN assigned ? Yes No (In case you would wa the application form / available at request / can also be downloaded	ant a PIN assigned; plea from our website.)	se submit a duly filled and sign	ed PIN Form along	with this Applicati	on. PIN form is part of
5 PAYMENT DETAILS (Mandatory)					
Investment DI Amount (Rs.)	O Charges		Net Amount (Rs.)		
Mode of Payment Cheque DD *Cheque / DD No.			Dated	DDMM	YYYYY
Account No.		Account Type (Please 🗸)	Savings Currer	nt 🗌 NRE 🗌 NRO	FCNR NRSR
Drawn on Bank &					
Branch Branch					
City					
* Please mention the Application No. on the reverse of the Cheque/E	D. All Cheques/DDs to	be drawn in favour of "the Sp	ecific Scheme Na	ame".	
6 INVESTMENT DETAILS (Please ✓ Choice of Sche	me / Plan / Optio	 Please ensure there 	is only one che	eque/DD per a	pplication form
Principal Child Benefit Fund Career Builder Plan	Future Guard Plan	Target Period	7 Years 10) Years 📃 15 Years	s
7 BANK ACCOUNT DETAILS (Mandatory)					
Bank Name					
(Do not abbreviate)					
		Branch / City			
Branch Address				Pin Code	
Account Type (Please ✓) For Residents Savings Current For No	on-Resident NRO	NRE Repatriable Non-Rep	oatriable Others		
	s a 9 digit number next to				Eng Direct Carality
MICR Code Only for IFSC	NEFT			Essential Enclosures : (
RTGS Code Direct Credit Facility is currently available with : BNP Paribas, Citibank, D	Code	K IDRI Bank UDEC Bank USEC	Pank Kotak Mahir		eque Copy of cheque
 Chartered Bank, Axis Bank & Indusind Bank, For an update in this list plex Please verify and ensure the accuracy of the bank details provided above Mutual Fund shall not be held responsible for delays or errors in processir 	ase contact any of our Is and as shall appear in y	C at the contact details provided our account statement which shal	overleaf. I be issued to you sh		,
8 ALTERNATE BENEFICIARY INFORMATION					
Name of Alternate Beneficiary Mr/Ms/Mrs	(ALL CAPIT	L LETTERS)		Date of Birth	<u>D D / M M / Y Y Y Y</u>
(First Name)	(Mic	lle Name) (La	ast Name)	an'a Dalatianakia	
Name of Guardian (in case Alternate Beneficiary is a Minor)			IVIIII	or's Relationship	
	o Concer Duilden	Dian / Ontion			
9 APPLICATION ENCLOSED (Please ✓) (Only for th Systematic Investment Plan ○ Post dated Cheques ○ SIP A		-	Bank Account Ho	lders only) 🔿 ICIO	I Standing Instruction
(ICICI Bank Account Holders only) Systematic Withdrawal Pl				idelis only, O lete	
10 DECLARATION AND SIGNATURES	Signature /				
It is understood that the Applicant has the express authority from the relevant constitution to invest in the units of the Principal Child Benefit Fund [the Fund] and the Principal Phb Asset Management Company Pvt.	Thumb	APPLICANT SIGNA	TURE	POA HOLDE	R SIGNATURE
Ltd. [AMC], its Trustee and Principal (Mutual Fund) would not be responsible if the investment is ultra vires	Impression of Donor /	POA Details - Name			
the relevant constitution. We further confirm having read and understood the contents of the offer document/s to the Scheme	Applicant / POA Holder	PAN PAN copy PAN copy	(Attach copy c	f KYC aknowledgemer	nt letter^)
including the sections on "Prevention of Money Laundering and Know Your Customers". I / We hereby apply to the Trustees of the Principal Mutual Fund for units of the Scheme as indicated above and agree to abide by	ATU				,
the relevant constitution. We further confirm having read and understood the contents of the offer document/s to the Scheme including the sections on "Prevention of Money Laundering and Know Your Customers". I / We hereby apply to the Trustees of the Principal Mutual Fund for units of the Scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the Scheme as applicable to my / our investment including any further transaction under the Scheme. I / We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. We further declare that the amount invested by the Applicant in the Scheme's I of weed through legitimate sources and is not held or designed for the upropse of contravention of any act, rules, and regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time. I / We authorize AMC to reject the application, reverse the unit credited, restrain mel/s from making any further investment in any of the Scheme's of Principal Mutual Fund, recover / debit my/our folio(s) with the penal interest and take any appropriate action against mel/s in case the cheque(s) / payment instrument is / are returned upaid by my/our bank for any reason whatsoever.	Signature / Signature / Thumb Impression of	APPLICANT SIGNA	TURE	POA HOLDE	R SIGNATURE
gitts, directly or indirectly, in making this investment. IWe further declare that the amount invested by the Applicant in the Schemel's is derived through legitimate sources and is not held or designed for the purpose	Impression of Unitholder /	POA Details - Name			
ot contravention of any act, rules, and regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time.	Guardian /	PAN			
I / We authorize AMC to reject the application, reverse the unit credited, restrain me/us from making any further investment in any of the Scheme/s of Principal Mutual Fund, recover / debit my/our folio/s) with the	POA Holder	Enclosed (please 🗸) 🗌 PAN copy	(Attach copy o	f KYC aknowledgemen	nt letter^)
penal interest and take any appropriate action against me/us in case the cheque(s) / payment instrument is / are returned unpaid by my/our bank for any reason whatsoever.					
We hereby further agree that AMC can directly credit all the dividend payouts and redemption amount to m	y / our bank details given above, wi	ere AMC has such arrangement with my / our Ba	nk.		
Applicable to NRIs only: I / We confirm that I am / we are Non- Residents of Indian Nationality / Origin and I / We hereby confirm that the					
^ In case the investments are Rs. 50,000 and above, it is mandatory to attach a copy of Know Your Custo	omer (KYC) Acknowledgement le	er issued by CDSL Ventures Limited / printout o	of KYC compliance status do	wnloaded from CVL websit	e alongwith the application form.

Principal Mutual Funds	Principal Mutual Fund Exchange Plaza, 'B' wing, Illrd Floor, NSE Building, Bandra Kurla Complex, Bandra (E), Mumbai - 400 051, India.	For investment related enquiries, please contact: Principal Mutual Fund Ph : 1800-22-5600 (Toll Free Number) or 022-22021111 (If calling from a Non MTNL / Non BSNL lines) Email : customer@principalindia.com Website : www.principalindia.com
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CHECK LIST: Please ensure the following : • Application form is complete in all respects and signed by all Applicants • Bank Account details are filled • Copy of Know Your Customer (KYC) Acknowledgement letter issued by CDSL Ventures Ltd / printout of KYC compliance status downloaded from CVL website for investment of Rs. 50,000 & above • Appropriate options are filled • Cheques /DD should be drawn in favour of **'the Specific Scheme Name'** • If you are investing for the first time, please ensure that you fill in the contact details for us to serve you better.