

## **COMMON APPLICATION FORM**

**APPLICATION NO.** 

FOR FIRST TIME INVESTORS FOR LUMPSUM INVESTMENTS / SIP INVESTMENTS.

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM, ALL SECTIONS TO BE COMPLETED IN ENGLISH IN BLACK/BLUE COLOURED INK & IN BLOCK LETTERS)

Distributor ARN	SUB-Distributor ARN	Internal SUB-Broker/Sol ID	EUIN	Employee Code	RIA CODE^	PMR (Portfolio Manager's Registration) Number ^^	Serial No., Date & Time Stamp
ARN-77321							
cheme(s) of Axis Mutu	al Fund under Direct Plan. I/V	Ve hereby give my/our consent	to share/provide the transact	tions data feed/por	tfolio holdings/NAV etc. in re	espect of my/our investments up	outor. ^I/We, have invested in the nder Direct Plan of all schemes of ur consent to share/provide the o Manager.
I/We hereby con	firm that the EUIN box ha	s been intentionally left bla	nk by me/us as this trans	action is execute	d without any interaction	or advice by the employee	/ relationship manager/sales the distributor/sub broker.
	pplicant /Guardian	Second /	Applicant		nird Applicant		Attorney Holder
I confirm tha	t I am a first time inves iption amount is ₹ 10,00	tor across Mutual Funds 00 or more and your Distr mount and payable to the D	ibutor has opted to rece	h <mark>at I am an exis</mark> eive Transaction	ting investor across M Charges, the same are	deductible as Physica	olding Option  al Mode Demat Mode emat, please fill sec 7)
01 🔔   N	<b>1Y DETAILS</b> (To be f	illed in Block Letters. Please	provide the following detai	ls in full)	(In case of investr	ment "On behalf of minor", Pl	ease refer instruction No. 11)
Existing folio nun	nber				I/ We want to	create new Folio (Instruc	tion No. 26)
My Name (Should	match with PAN Card)					PAN/PEKRN (1st	Applicant) KYC
My Guardian's Na	ame (if minor)/POA/Con	tact Person (For Non-indiv	iduals)			PAN/PEKRN (Gua	ardian/POA) KYC
Triy Guaraian 5110	ane (minor), i e, y een	tact cross (ror nor mary	idudisy				RIC RIC
On behalf of Mine	or (*Attach Mandatory Doo	cuments as per instructions)	Date of Birth M	linor's	D M M Y Y	Y Y Date of I	Birth Proof attached*
<b>Guardian</b> named	is Father M	other Court Appo	inted		Guardian n	named is	
Mode of Operation 2nd Applicant Na 3rd Applicant Na	on Single J nme (Should match with PA me (Should match with PA	N Card)	rvivor(s) [Default] (Joi			ase of minor investments PAN/PEKRN (Secondary) PAN/PEKRN (Thir	ond applicant) KYC
Address Type (Ma		TAILS (As per KYC record tial & Business Re	s. To be filled in Block Lette		(For e	electronic communication, Pl	ease refer instruction No. 17)
City			State				
Add overseas add						Pin Code	
	ress (Mandatory for NRI /	FII Applicants)				Pin Code	
	Iress (Mandatory for NRI /	FII Applicants)				Pin Code	
City			Country			Pin Code Pin Code	
Email ID and Mobile n	Iress (Mandatory for NRI /	t Holder only.	Country	Email ID			
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05 MY INVESTMENT DETAILS (For investments, Please refer instruction No. 1 & 22)													
(Cheque/DD should be in favour of "Scheme Name". Default plan/Option will be applied incase of no information, ambiguity or discrepancy). If the investment is in multiple schemes. "The Cheque/DD should be drawn favouring "Axis MF Multiple Schemes"													
Full Sch	neme/Plan/Option	Amount/Each SIP Amoun	t SIP Date	Frequency	SIP Period	(Optional) Only available f	for Monthly SIP						
	SIP	₹	D D	Monthly (default)	Start Date	Frequency  Half Yearly ₹	Amount in figures						
Plan Regular	Direct	Less DD charges	(If left blank 7 <sup>th</sup> will be	Yearly	End Date	Yearly	in words						
Scheme Name			considered as the		M M Y Y Y Y								
Name			default date) Any date between 1st		OR								
Option			to 28 <sup>th</sup>		Continue Until	Dynamic T	OP-UP						
LUMPSUM	SIP	₹	D D	Monthly (default)	Start Date		Amount						
Plan Regular	Direct	Less DD charges	(If left blank	Yearly	MMYYYY	Half Yearly ₹	in figures						
Scheme		charges	7 <sup>th</sup> will be considered as the		End Date	Yearly	in words						
Name			default date) Any date		OR								
Option			between 1st to 28th		Continue Until	Dynamic T	OP-UP						
LUMPSUM	SIP	₹		Monthly	Start Date	Frequency	Amount						
Plan Regular	Direct	Less DD	DD	(default)	M M Y Y Y Y	Half Yearly ₹	in figures						
		charges	(If left blank 7 <sup>th</sup> will be considered	Yearly	End Date	Yearly	in words						
Scheme Name			as the default date)		M M Y Y Y Y								
_			Any date between 1st		OR Continue Until								
Option			to 28 <sup>th</sup>		Cancelled	Dynamic T	OP-UP						
The minimum amount fo	r Axis TOP-UP facility is ₹ 500/- and i	n multiples of ₹ 1/- for all scheme	es except Axis L	ong Term Equity	Fund the minimum amount is ₹ 5	00/- and in multiples of₹ 50	00/- thereafter.						
Payment thr	ough NACH (Attach NACH form)	OTM Reference	No.		(	if one time mandate are reg	gistered)						
OR Docume	ents attached to avoid Third Par	ty Payment Rejection, if app	licable: B	ank Certificat	e, for DD Third Party [	Declarations							
Payment Details													
First Cheque Date	D D M M Y Y Y	Y Amount			Che	que No.							
Bank Name			Account N	10.		_							
IFSC Code			MICR Cod	de									
RTGS/ NEFT/ Funds	Transfer					RTGS/ NEFT/ Funds Transfer							
If source of payment bank is same as above bank details tick here.													
ii source of paym	ent bank is same as above bank	details tick here.											
	ent bank is same as above bank  MINATION DETAILS	details tick here.			(Fc	r nomination, Please refer ir	nstruction No. 18						
			N	OMINEE 2	(Fc	r nomination, Please refer in	nstruction No. 18						
06 🗐   NON	MINATION DETAILS		N	OMINEE 2	(Fc		nstruction No. 18						
06 NON	MINATION DETAILS		N	OMINEE 2	(Fc		nstruction No. 18						
06 NON  Details  Nominee Name	MINATION DETAILS		N	OMINEE 2	(Fo		nstruction No. 18						
Details  Nominee Name  PAN  Allocation (%)  Relationship	MINATION DETAILS		N	OMINEE 2	(Fc		nstruction No. 18						
Details  Nominee Name  PAN  Allocation (%)  Relationship with Investor	MINATION DETAILS  NOMINEE 1					NOMINEE 3							
Details  Nominee Name  PAN  Allocation (%)  Relationship with Investor  Nominee date of birth	MINATION DETAILS			OMINEE 2	(Fo		nstruction No. 18						
Details  Nominee Name  PAN  Allocation (%)  Relationship with Investor  Nominee date	MINATION DETAILS  NOMINEE 1					NOMINEE 3							
Details  Nominee Name  PAN  Allocation (%)  Relationship with Investor  Nominee date of birth  Guardian Name	MINATION DETAILS  NOMINEE 1					NOMINEE 3							
Details  Nominee Name  PAN  Allocation (%)  Relationship with Investor  Nominee date of birth  Guardian Name (in case of Minor)  Nominee Address	MINATION DETAILS  NOMINEE 1					NOMINEE 3							
Details  Nominee Name  PAN  Allocation (%)  Relationship with Investor  Nominee date of birth  Guardian Name (in case of Minor)  Nominee Address  Nominee/Guardian Signature	D D M M Y	Y Y Y D	D M	M Y Y	Y Y D D	NOMINEE 3	Y Y Y						
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08 ACA KNOW	YOUR CUS	TOMER (KY	C) DETAILS	if details not filled	se Tick/ Specify. The application I.)	is liable to get reje	(For I	(YC details. Refer I	nstruction No
Tax Status details for		2nd Applicant			Occupation details for			3rd Applicant	Guardian
Resident Individual					Private Sector				
NRI/PIO/OCI					Public Sector				
Sole Proprietorship		-	-	-	Government Service				
Minor through Guardian		-	-	-	Business				
Company Body Corporate			Partnership	nip Professional					
Non Individual	Trust	Society	HUF	Bank	Agriculturist				
		FII _	FPI	Retired					
Others (Please specify)					Housewife				
Gross Annual Income Range (in ₹)				Student					
Below 1 lac					Others (Please specify)				
1-5 lac					Folitically Exposed Ferson (FEF) details 13 a		Is a PEP	Related to PEP	Not Applica
5-10 lac					1st Applicant				
10-25 lac					2nd Applicant				
25 lac- 1 cr					3rd Applicant				
1 -5 cr	$\perp \square$				Guardian				
5 - 10 cr					Authorised Signatories				
> 10 cr					Promoters				
OR Networth in ₹					Partners				
(Mandatory for Non Individual) (not older	as on	as on	as on	as on	Karta				
than 1 year)	DDMMYY	DDMMYY	DDMMYY	DDMMYY	Whole-time Directors/To				
	ONAL INFO	DMATION				/F		: Planar ( i	alaasa (Casa Nisa
	ONAL INFO	RMATION						ion Please refer in	
Applic			KINN	lo. (If KYC done via		Date of Bir		Gend	
First App						D M M Y	YYY	Male	Female
Second Ap	<u> </u>					D M M Y	YYY	Male	Female
Third App						D M M Y	YYY	Male	Female
Guardian o	or POA^					D M M Y	YYY	Male	Female
Data of Birth Mandatanviif (	CVVC ID montions	d AC, Cuardian, I	OA. Dower Of A	ttornov/					
,		·	POA: Power Of A	ttorney	Third Applicant			C DOA	
Details		ed. ^G: Guardian; F	POA: Power Of A	ttorney	Third Applicant			G or POA	
Details  Mobile No.		·	POA: Power Of A	ttorney	Third Applicant			G or POA	
Details  Mobile No.  Email Id.		·	POA: Power Of A	ttorney	Third Applicant			G or POA	
Details  Mobile No.		·	POA: Power Of A						
Details  Mobile No.  Email Id.  Relationship with	Seco	ond Applicant	vone):	Self Spouse		Dependent Siblings	5 Dependen		rdian PM
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Details  Mobile No.  Email Id.  Relationship with Investor	Provided in this form	m belongs to (tick an	y one):	Self Spouse and approve for usa; Self Spouse and approve for usa;	Dependent Children Dependent Chi	ommunication with Dependent Siblings	Dependen Axis Mutual Fund.	t Parents Guai	
Details  Mobile No.  Email Id.  Relationship with Investor  I declare that Email address  I declare that Mobile Number If above any option is not tick.	provided in this former provided in this focked (/) or selected	m belongs to (tick an orm belongs to (tick at then (Self) option is	y one): any one) s considered as a de	Self Spouse and approve for usar Self Spouse and approve for usar efault.	Dependent Children E ge of these contact details for any co	ommunication with Dependent Siblings ommunication with	Dependen Axis Mutual Fund.	t Parents Guai	
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Mobile No.  Email Id.  Relationship with Investor  I declare that Email address  I declare that Mobile Number If above any option is not tice.  10 DEBIT Now We Inthorise you to debit my/or any to debit m	provided in this form er provided in this form ked ( ) or selected  MANDATE  pur account no.	m belongs to (tick an orm belongs to (tick an orm belongs to (tick a then (Self) option is  (Only for Axis Bar an Axis Bank Acco	y one): any one) s considered as a de which are the count holder me of the count holder and t	Self Spouse and approve for usar Self Spouse and approve for usar efault.  Pers: Now you don't heessed in CMS softward account hold	Dependent Children Dependent Depend	ommunication with Dependent Siblings ommunication with  (Fo	Dependen Axis Mutual Fund. Dependen Axis Mutual Fund.	t Parents Guar t Parents Guar Please refer instru	rdian PM
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11 🗐   FATCA A	AND CRS DETAILS For Individual mandatorily	ls (Mandatory). Non Individual investors inc fill separate FATCA/CRS/UBO details form	cluding HUF should (Includin	ng Sole Proprietor. Refer Instruction No. 23)
Details	Sole/ 1st Applicant	2nd Applicant	3rd Applicant	Guardian/POA
Place & Country of Birth				
Nationality				
Are you a tax resident of any country other than	Yes No	Yes No	Yes No	Yes No
India?		If Yes: Mandatory to enclo	ose FATCA/CRS Annexure	
12 / DECLAR	ATION AND SIGNATURE		(For declaration	and signature, please refer point number 4)
understood the terms, con only and does not involved Money Laundering Laws, A by any rebate or gifts, direc process is not completed Lapplicant, at the applicable disclosed to me/us all the Scheme is being recommer the AMC / Fund. I/We her through any channel of co affiliates/group companies products and offering of ot the above mentioned partiat the website of the Comp I/We confirm that I/We de \$50,000 in a year (Applical I/We have remitted funds fthat details provided by me I/We give my consent to A queries and/or receive coirrespective of my blocking I/We hereby provide my/o (ii) updating my/ our Aad consent for sharing/disclose Registrar and Transfer Age CERTIFICATION: I / We h provided by me/us on this I accept the same.  I/We have read and unde	ditions, details, rules and regulations designed for the purpose of the contract that Corruption Laws or any other appartly or indirectly in making this investmy me/us to the satisfaction of the Mu e NAV prevailing on the date of such recommissions (trail commission or any need to me/us. I / we give my / our con eby give consent to the Company or immunication including but not limite to or their Authorized Agents or Third ther services. I/We agree that all perse including with any regulatory, statu any.  To not have any existing Micro SIP/Lurble for Micro investment only.) with your or material through approved banking the same true and correct. Axis Asset Management Company Linguis are true and correct or preferences with the Customer Preferences with the Customer Preferences with the Customer Preferences with the Customer Preferences of the Aadhaar number(s) includint (RTA) for the purpose of updating the averunderstood the information requerom is true, correct, and complete. I/	r Act, 2016 and regulations made ther ance with the Aadhaar Act, 2016 (an ng demographic information with the lesame in my/our folios with my PAN. irements of this Form (read along wit We also confirm that I / We have read on given below/overleaf and I/We he	eclare that the amount invested in the is, Notifications or Directives of the pit of India from time to time. I/we have ted in the Scheme, legally belongs to mutual Fund, to redeem the funds in with such funds that may be required in the Scheme, legally belongs to mutual Fund, to redeem the funds in with such funds that may be required in the privacy policy service provides to use information urther authorise the disclosure of the rovide information and updates to me ion collected/provided by me can be since with any law or regulation in accordith the current application will result on firm that I am/we are Non Resident on Resident External/Non Resident Or er phone, SMS, email or any other mo promotional/potential investments eunder, for (i) collecting, storing and us d regulations made thereunder) and a saset management companies of SEE h the FATCA & CRS Instructions) and and understood the FATCA & CRS Ter	escheme is through legitimate source rovisions of the Income Tax Act, Anti en ont received nor have been induced ne/us. In event "Know Your Customer" vested in the Scheme, in favour of the uired by the law.) The ARN holder has us Mutual Funds amongst which the cy which is available on the website of 1/data provided by me to contact me information contained herein to its on various financial and investment hared/transferred and disclosed with dance with privacy policy as available in aggregate investments exceeding sof Indian nationality/origin and that redinary/FCNR account. I/We confirm de to address my investment related and other communication/ material sage (ii) validating/authenticating and PMLA. I/ We hereby provide my/our BI registered mutual fund (s) and their hereby confirm that the information ms and Conditions below and hereby
You/ Sole Applicant	/Guardian Second	d Applicant	Third Applicant	Power of Attorney Holder
Date D D M M Y	Y Y Y Place			
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To stay up to date with your mutual fund investments, connect with us on our WhatsApp number.
Sent us a 'Hi' on 7506771113 from your registered mobile number to have your queries answered.

