

ANELAN Trace Sub-part ABEL 127182 E208530 E2	KEY PARTNER / AGENT INFORMATION (Refer					1 "	FOR A 221 CT 11CT	
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Significant programmers, lies, quantitative personal production and the distribution above. Significant Significa	•			houtany interaction or advi	e by the employee/relatio	nship manager/sales person of the	above distributor/subbroker or not with standing the	
Fig. 5th. Application Character Port Application Third Application The Applicati					,			
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TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTIONS ONLY Before General intraversions; Committee of Committee on the information of the	Sign Here			Sign Here			Sign Here	
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Peace	TRANSACTION CHARGES FOR APPLICATION	STHROUGH DISTRI	IBUTORS ONLY (Re	fer General Instruct	on 2)			
National Confederation of the								
PLANSTRICE UNIT HOLDER INFORMATION If you have existing folios, please fill in fell on a. In this section and proceed to sections 8 and 11.) (Refer General Instruction 3)	:asethepurchase/subscriptionamountisRs. 10,000or moreandyour /MicroSIP are deductible only if the total commitment of investment (Jistributor has opted into rece i.e. amount per SIP/Micro SIP ir	eiveTransactionCharges,the: installmentxNo.ofinstallme	same are deductible as applic nts) amounts to Rs. 10,000/-c	able from the purchase/subs rmore and shall be deducted	riptionamountand payable to the Dis in 3-4 installments. Units will be issue	tributor. Transaction Charges incase of investments throu dagainst the balance amount invested. Upfront commiss	
The details in our records under the folio number mentioned alongoide will apply for this application 2. AMODE OF HOLDING (Please tick, (/) single Joint Anyonic of Survivor 3. JUNI HOLDER (MORAMITON Medic Receal Instruction 4) AMIC OF HIRST / SOLE APPLICANT (in case of Minor, there shall be no jointholders) (in the No.				*			11	
2. MODE OF HOLDING [Please Bitk.(x/)		you have existing Fo	olio, please fill in foli		•			
SUNT HOLDER INFORMATION Mefer General Instruction 4) WE OF PIRST / SOLE APPLICANT (in case of Minor, these shall be no jointholders) Note 1 Mark Person Note Present Note Note Present Note N	FOLIO NO.:			The details i	1 our records under 1	the folio number mentione	d alongside will apply for this application	
MR. OF FIRST / SOLE APPLICANT (In case of Minor, there shall be no jointholders) MS MN			Anyone or S	Survivor				
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NORE		linor, there shall be r	no jointholders)					
NOTE Male		KYC Ider	ntification No. (KIN):				[Please (./)] #KVC Pmof Attached Mandato	
The of this has been in seadanty in case of insist sometimes and the same better the updated for this folio / insection. Applications shall be failed for ejection if the cite of birth is smillable in IRAN ecotos the same shall be updated for this folio / insection. Applications shall be failed for ejection if the cite of birth is smillable in IRAN ecotos the same shall be updated for this folio / insection. Applications shall be failed for ejection if the cite of birth is smillable in IRAN ecotos the same shall be updated for this folio / insection. Applications shall be failed for ejection if the cite of birth is smillable in IRAN ecotos the same shall be updated for this folio / insection. Applications shall be failed for ejection if the cite of birth is smillable in IRAN ecotos. ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA HOLDER / CONTACT PERSON – DESIGNATION (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA HOLDER / CONTACT PERSON – DESIGNATION (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA HOLDER / CONTACT PERSON – DESIGNATION (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in case of first / Sole Applicant is a Minor) / PoA Holder (in case of non-individual investors) ME OF GUARDIAN (in						V D	_	
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L Mis. Mis. Mis. M				available in KKA records th	e same snall be updated to	r this folio / investment. Applicatio	ons snall be liable for rejection if the date of birth is	
Mobile No.	AME OF GUARDIAN (in case of First / Sole Appl	icant is a Minor) / Po	A HOLDER / CONTA	ACT PERSON – DES	IGNATION (in case	of non-individual Investo	rs)	
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actionship with Minor® Please (/) Father Mother Court appointed Legal Guardian Proof of relationship with minor® Please (/) Attached @ Mandatc NLING ADDRESS OF FIRST / SOLE APPLICANT (Mandatory) (Address should be as per KYC records) (Refer General Instruction 4A) Instruction	Designation					Mobile No.		
ALLING ADDRESS OF FIRST / SOLE APPLICANT (Mandatory) (Address should be as per KYC records) (Refer General Instruction 4A) STATE							_	
STATE STATE							r@ Please (✓) □ Attached @ Mandato	
NOTACT DETAILS OF FIRST / SOLE APPLICANT Country Code	AILING ADDRESS OF FIRST / SOLE AFFEICAN	1 (Manuatory) (Add	aress snould be as p	Jer KTC records) (Ker	er General instructi	on 4A)		
Acknowledgement Slip (To be filled by the applicant Society (Culture) Country Code								
Mobile No. Res. Fax Na.	CITY		STATE				PIN CODE	
Panel Company Panel Pa		, 	Country Code	STD Coo	le	Telephone : Off.		
repease Address (Mandatory for NRI/PIO/FII/FPI Applications) repeading email of investes shall review scheme wise around aport or an aboliged summary the end account statements' statutory and other documents by email. (Refer General Instruction (b) 15 for PRIVPSSIN and Ito 15 for PRIVPSSIN and			Res.			Fax		
proprieting email of insectors shall receive scheme wite surroul report or an ibindiged summary thereof/acount statements of statutory and other documents by email (Refer General Instruction 4) (in Case of Minor, there shall be no joint holders) A. JOINT APPLICANT DETAILS, If any (Refer General Instruction 4) (in Case of Minor, there shall be no joint holders) A. JOINT APPLICANT DETAILS, If any (Refer General Instruction 4) (in Case of Minor, there shall be no joint holders) A. JOINT APPLICANT DETAILS, If any (Refer General Instruction 4) (in Case of Minor, there shall be no joint holders) A. JOINT APPLICANT DETAILS, If any (Refer General Instruction More) PRANE/PEKRN# GENDER Male Female Other Please (//) #KYK Proof Attached(Mandato More) PRANE/PEKRN# PRANE/PEK		EPI Applications)						
ALC Individual Investors involved in / providing any of the mentioned services (Please tick anyone) Foreign Exchange / Money Changer Services Gaming / Gambling / Lottery / Gasino Services Money Lending / Pawning Mone of the absolute of the absolute of the part	reiseas Address (Mandatory for Mit) 10/11/	т түрпсалону,						
4. JOINT APPLICANT DETAILS, If any (Refer General Instruction 4) (in Case of Minor, there shall be no joint holders) NAME OF SECOND APPLICANT Mr. Ms. M/s. YC Identification No. (KIN): PAN#/ PEKRN# GENDER Make Female Other Pemale Other Other Pemale Other Pemale Other Pemale Other Pemale Other Pemale Other Pemale Other Oth								
NAME OF SECOND APPLICANT Mit. Mis. Mi	1, 7,	•		, , ,	er Services Gaming / G	ambling / Lottery / Casino Services	Money Lending / Pawning None of the abo	
Coldentification No. (KIN): PAN#/PEKRN# GENDER Male Female Other (Please (/)) #KYC Proof Attached(Mandator)			ior, there shall be no joi	int noiders)				
Pane	NAME OF SECOND APPLICANT Mr. Ms. M	/s.						
NAME OF THIRD APPLICANT Mr. Ms. M/s.	YC Identification No. (KIN):			PAN#/ PEKRN#				
GENDER Male Female Other Other Female Other Other Female Other Other Female Other Female Other Female Other Female Other Female Other Female Other	NAME OF THERE ARRIVES AND THE TAX AS AS							
Panel Pane	NAME OF THIRD APPLICANT MIL. MIS. IN	/5.					CENDED Male Cample Other	
Sole/First Resident Individual NRI-Repatriation NRI-Non Repatriation Partnership Trust HUF AOP PIO Company Applicant Body Corporate FIIs Minor through guardian BOI OCI LLP Bank FI Society / Clr Class Clas	YC Identification No. (KIN):			PAN#/ PEKRN#				
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Non Individual Poteign National Resident In India QFI FPI Sole Proprietorship Non Profit Organisation Uthers (Please specific profit of the	Applicant Body Corporate						• •	
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Individual Foreign National Resident in India QFI FPI Sole Proprietorship Non Profit Organisation Others (Please special Pr	☐ Non Individual ☐ Foreign National Resident in India	QFI [
Non Individual Trietgii National Residenti il linula Qri	□ Non Individual □ Poreign National Resident in India Second □ Resident Individual	NRI-Repatriation	NRI-Non Repatriation	Partnership				
National Acknowledgement Slip (To be filled by the applicant)	Non Individual Second Applicant Individual Individual	□ NRI-Repatriation □	NRI-Non Repatriation Minor through guardian	Partnership	□0€I	☐ LLP ☐ B	ank ☐ FI ☐ Society / Cl	
MUTUAL FUND Acknowledgement Slip (To be filled by the applicant)	□ Non Individual □ Poreign National Resident in India Second □ Resident Individual Applicant □ Body Corporate □ Individual	□ NRI-Repatriation □	NRI-Non Repatriation Minor through guardian	Partnership	□0€I	☐ LLP ☐ B	ank ☐ FI ☐ Society / Cl	
WIGHTORE FOND	Non Individual	□ NRI-Repatriation □	NRI-Non Repatriation Minor through guardian	Partnership n	□0€I	☐ LLP ☐ B	ank ☐ FI ☐ Society / Cl	
	□ Non Individual □ Foreign National Resident in India Resident Individual □ Body Corporate □ Foreign National Resident in India Non Individual □ Foreign National Resident in India	□ NRI-Repatriation □	NRI-Non Repatriation Minor through guardian	Partnership n	□0€I	LLPB. ation Others	ank FI Society / CI (Please spec	

 $an application for all other horizonth e Plan/Option (as mentioned overleaf) of Mahindra\,Mutual Fund-along with Cheque/Demand\,Draft/Payment Instrument as detailed overleaf.$

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

... continued overleaf

Please Note: All Purchases are subject to realisation of Cheques/Demand Drafts/Payment Instrument.



Third Applicant Individual Non Individual	Resident Individual Body Corporate Foreign National Resident in India		on Repatriation through guardia	☐ Partnership n ☐ BOI ☐ Sole Proprie	0CI	☐ HUF ☐ LLP t Organisation ☐ Others_	☐ AOP ☐ Bank	□PIO □FI	☐ Company ☐ Society / Club (Please specify)
5b. Occupation De	tails [Please tick (✓)]								
Sole/First Applicant Please select any one	☐ Private Sector Service☐ Agriculturist	☐ Public Sector Service ☐ Proprietorship	☐ Govern	nment Service	Student	Professional (Please specify)	Housew	vife Business	Retired
Second Applicant Please select any one	☐ Private Sector Service☐ Agriculturist	☐ Public Sector Service ☐ Proprietorship	☐ Govern	nment Service s	Student	Professional (Please specify)	☐ Housew	vife ☐ Business	Retired
Third Applicant Please select any one	☐ Private Sector Service ☐ Agriculturist	☐ Public Sector Service ☐ Proprietorship	☐ Govern	nment Service S	Student	☐ Professional(Please specify)	☐ Housew	rife Business	Retired
5c. Gross Annual Ir	ncome / Net-worth (Rs.)								
Sole/First Applicant (Please select any one)	Gross Annual Incom or Net-worth	ne Below 1 Lac (Mandatory for Non-Individe	1 - 5 Lad	ß	5 - 10 Lacs	10 - 25 Lacs	D M M		-1 Crore older than 1 year)
Second Applicant (Please select any one)	Gross Annual Incom or Net-worth	ne Below 1 Lac (Mandatory for Non-Individual)	1 - 5 Lac	ß	5 - 10 Lacs	□ 10 - 25 Lacs		[][]	1 Crore older than 1 year)
Third Applicant (Please select any one)	Gross Annual Incom or Net-worth	· · · · · · · · · · · · · · · · · · ·	1 - 5 Lac	ß	5 - 10 Lacs	☐ 10 - 25 Lacs		s-1 Crore	1 Crore older than 1 year)
5d. Politically Expo	osed Person (PEP) Status (Als	so applicable for authorised signato	ries/ Promoters/	Karta/Trustee/Wh	ole time Directors)				· ·
Sole/First Applicant (F	Please select any one)	□ I am a PEP	☐ I am Rel	ated to a PEP	☐ Not Applicable				
Second Applicant (Plea	ase select any one)	☐ I am a PEP	☐ I am Rel	lated to a PEP	☐ Not Applicable				
Third Applicant (Please	e select any one)	□ I am a PEP	☐ I am Rel	ated to a PEP	☐ Not Applicable				
6. FATCA and CRS DETA	AILS For Individuals (Mandatory) No	on Individual investors indudin	g HUF should m	nandatorily fill se	parate FATCA/CRS form				
DI COLLI	Sole/FirstApplicant/Guar	rdian	Secor	nd Applicant		Third/	Applicant		
Place of Birth Country of Birth									
Nationality Tax Residence AddressTy (as per KYC records)	□ Indian □ U.S. □ Other: □ Residential □ Registere	· · · · ·		lianU.SOth sidential Regis	ners, pleasespecify tered OfficeBusiness		ianU.SOthe identialRegister	ers,pleasespecify red Office Business	
Are you a tax resident (i.e you assessed for Tax) in a other country outside Inc	If VEC' place fill halour for Al	LL countries (other than India) in wh		es / 🔲 No dent for tax purpose	s i.e., where you are a Citiz		s / No der /Tax Resident in	the Respective countries.	
Country of Tax Residency			(1) (2) (3)			(1) (2) (3)			
TaxIdentiificationNumbe FunctionalEquivalent	erOR (1) (2) (3)		(1) (2) (3)			(1) (2) (3)			
IdentificationType (TINofother, Pleasespeci	(1) (2) (3)		(1) (2) (3)			(1) (2) (3)			
If TIN is not available, please tick the reason A,E or C (as defined below)	1	BC	1 □A	_B _C]A	BCA [BC	3 A B	: □ C
Reason A \rightarrow The ω untry w Reason B \rightarrow No TIN require Reason C \rightarrow Others; please	where the Account Holder is liable to pay t ed. (Select this reason Only if the authorit estate the reason thereof	tax does not issue Tax identification i ties of the respective country of tax r	Numbers to its resi esidenæ do not re	idents. quire the TIN to be a	ollected).	'		Refer General Ins	structions 4C and 19
7. BANK ACCOUNT DET	TAILS OF THE FIRST / SOLE APPLICAN Broof, in case the pay-out bank accour	T (For redemption purpose) (Re	fer General Instr	ruction 6 & 10)	ow)				
	hold units in demat form, please ensu								
Bank Name							Dunnel Cit		
Branch Address	Branch City (The 9 digit code appears on your cheque								
/Account to									
AccountType (Please V) Savings Current NRO NRE FCNR Others (please specify) Savings Current NRO NRE FCNR Others (please specify) Savings Savings Current NRO NRE FCNR Others (please specify) Savings Others (please V) Savings Others (please V) Savings Others (please V) Savings Others (please V) Others (please V									
IFSC Code*** *** Refer General Instruction 6C (Mandatory for Credit via RTGS / NEFT) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)									
Unitholders will receive red	lemption/dividend proceeds directly int	otheirbankaccount (asfurnishedir	Section8)viaDin	ectcredit/ RTGS/N	EFT facility unless specified	dotherwise in writing.			
		*		TEAR HER	E — — —	*			
Scheme Name		Plan		Option / Sub-	option / Facility		F	requency	
Mahindra		Regular 🗆	Direct [Growth [Dividend Payout	: Dividend Re-in	vestment -	Daily □Weekly Others	Monthly
Cheque / DD / Payment	Instrument No. & Date	Drawn on (Ba	nk and Branch)			Amount	in Figures (Rs.)		
Frequency Mo	nthly* Quarterly (*Def	fault Frequency)		SIP	Micro SIP Date	1st5th10)th*	□20th □25th	(*Default Date)



First / Sole Applicant/ Guardian / PoA Holder / Karta

8. INVESTMENTS & PAYMENT DETAIL The name of the first/sole applicant mu	.S [Please (√)] (Reust be pre-printed	fer Instruction 7 for Sche	eme detai	ils and Instruction 5 & 8 for F stment/ SIP Registration.	ayment	and Third Party Payment	Details)				
Scheme Name	Plan										
Mahindra		□Regular □Direct	□Gi	rowth □Dividend Payou	ıt □D	ividend Re-investment	□ Dail □ Oth	ly □Weekly ers	□Monthly		
lote: Multiple cheques not permitted with single appl	lication form.	Note: For Default options, pleas	e refer KIM.								
8A. For Lumpsum Investment			••	□ Non-Third Party Payment □	Third Part	• •		Declaration Form')			
Amount of Cheque / DD / Payment Instrument / RTGS/ NEFT in figures (Rs.)	DD Charges, if any	Net Cheque/ DD Amo	ount	Cheque/ DD/ Payment Instrume UTR No. & Date	ent/	Drawn on Bank / Brancl	h	Bank Acce	unt Number		
8B. For investment through SIP / Mic	ro SIP mode (Refe	er General Instruction 7)	Payment Ty	 ype □ Non-Third Party Payment	□Third	Party Payment (Please attach 'Thìr	nd Party Paym	nent Declaration Form	")		
Each SIP/ Micro SIP Amount (Rs.)				Frequency Monthly*	□Qua	rterly (*Default Frequenc	y)				
SIP/ Micro SIP Date 1st 5th	10th* 🗌 15th	20th 25th (*De	fault Date	e) (You may select more than	n one SIF	rransaction dates)					
SIP/ Micro SIP Period Start From M M Y Y Y Y End On M M Y Y Y Y OR Until cancelled Cheque Amount@ (Rs.) First SIP/ Micro SIP Transaction via Cheque No. Cheque Dated D D M M Y Y Y Y Bank											
Mandatory Enclosure (for existing investores For SIP through Auto Debit / NACH SIP through Post Dated Cheques (Use Period M M M Y Y Y Y TO	l please also fill &	attach SIP Registration of ncation System) Chequ	cum Debi ues only)			☐ Copy of cheque ue amount should be san	ne as eacl	h SIP Amount.			
The first cheque & the Post dated chec				•							
·	•	PHYSICAL MODE (Default)		(Refer Instruction 12)							
*Demat Account details are mandatory if					uence o	fthenamesasmentioned	intheapp	olication form m	atches with the		
of the demataccount. Investor opting to h	nold units in dema	at form, may provide a co	pyofthel	OP statement to enable us to	matchtl			olicationform.			
NSDL DP NAME				DP ID I N		Beneficiary Account No.					
CDSL DP NAME				Beneficiary Account No.							
10. NOMINATION (Refer Instruction 14) (A	Mandatory for new fo	lios of Individuals where mo	de of holdi	ng is single) (For Units in Non-Den	nat Form)						
Name and Address of Nominee(s)	Relationship with	Date of Birth	Date of Birth Name and Address of Guardian Signature of Nominee (O					Proportion (9 the units will b	%) in which be shared by		
	Applicant	(to be furnished	(c. L. C. artholic and the Northolic arts)						each Nominee (should aggregate to 100%)		
Nominee 1											
Nominee 2											
Nominee 3											
Please (*)]	efer Instruction 13) etsunder any order/rulir ywith the terms and cor cated above. I/We am/ai snot held ordesigned fr why other applicable law thereby authorize the Fi ed nor have been induce eMahindra Asset Manag iona and/or any part of i anges/updates that may udicial authorities //ager old the AMC / the Fund, I RN holder (AMFI registe- nended to me/us. I/Wed / We are not United St V/We are not United St SANNEXURE) and hereb- secified information is for future promptly i.e. wii-	aditions of the scheme related door re eligible Investor(s) as per the scorthe purpose of contravention of rs enacted by the Government of und, to redeem the funds invested by any rebate or gifts, directly gement Company Private Limited to take a provided by mey under the Funcies including but not limited to their appointed service providers ared Distributor) has disclosed to mont have any existing Micro Invates person(s) under the laws of THEFUND/AMC/ITS DISTRIBUTOI by confirmt hat the information pround to be false or untrue or misl thin 30 days of such change and a had through approved banking characterists.	cuments (i.e. theme relater fany Act, Rul India From ti India From the India	Scheme Information Document, State d documents and am/are authorised to es, Regulations or any statute or legisla me to time. I/We confirm that the fun ne, infavour of the applicant, at the applicant and undertake to inform the AMC, I/We will be liable for the consequence r/s, Trustees, AMC, its employees, agen telligence Unit-India (FIU-IND) etc wit at it was a telligence Unit-India (FIU-IND) etc wit at it was sons since I/We will indemnification with the current Micro Invesor or residents (s) of Canada as defined IVESTMENT. FATCA/CRS Certification etc. Uson this Form is true, correct, and cois representing. I/We shall be liable for etc provide any other additional informmy/our NRE/NRO/FCNRAccount. I/	mentof Ado make this is stionorany ds invested olicable NA mation give / the Fund/ esarising th its and third thout any ir fy the Fund, issionoran restmentap d under the the Pund, it l/We als mation as m	ditional Information and Key Inform nvestment as per the Constitutive dother applicable laws or any Notific in the Scheme, legally belongs to in the Scheme, legally belongs to in / with this application form is Registrars and Transfer Agent (RTA) is erefrom. I/We hereby authorize you party service providers, SEBI regist itimation/advice to me/us. If the triand to the rintern of the control of	nation Memo locuments/a ations, Direct members, at the members and the members are the members and the members are the members	randum) and apply for uthorization(s). The a tives of the provisions event "Know Your Cu undertake suchother; rect and further agree out any change in the share, remit in any for diaries for single upd. delayed or not effect case of any dispute re- erent competing Sche «ceding Rs. 50,000/-i FIRM THAT I/WE HAV! uirements of this Forr stood the FATCA & CRS out any changes/mor only: I/We confirmt	or allotment of Units mount invested in to of the Income Tax A stomer" process is not considered in the Income Tax A stomer" process is not considered in the Income to find the Income to the Income		
(Please write Applica		GNATUI he reverse	RE(S) of the Cheque / Demand Draft / Pa	ayment In	strument)					
Sign Here				Sign Here			Sign H	Here			

Second Applicant

Third Applicant