			& KRA KYC Form	CAMSKRA
Know Your Client Application Form (For	r Individuals onlv)	Application	jarat ARN: 54854]New	KYC Services
(Please fill the form in English an Fields marked with '*' are mandato	d in BLOCK Letters)]Update KYC Number*	(Refer instruction K)
1. Identity Details (Please ro	efer instruction A at the e			
		,	a data attacted areas of using DAN Oracl	
PAN			a duly attested copy of your PAN Card	
Name* (same as ID proof)	Prefix	First Name	Middle Name	Last Name
Maiden Name (If any*)				
Father / Spouse Name*				
Mother Name*				
Date of Birth*		YYY		Photo
Gender*	M- Male	Ĺ	F- Female T-Transgender	
Marital Status*	Married	[Unmarried Others	
Citizenship*	IN- Indian	[Others – Country Country	/ Code
Residential Status*	Resident Individual	[Non Resident Indian	
Occupation Tyme*	Foreign National	ioto Sootor	Person of Indian Origin Public Sector Government Sector	
Occupation Type*	S-Service Priv O-Others Prof	-	Public Sector Government Sector Self Employed Retired Housewife	Student Signature/
	B-Business	-	X-Not Categorised	Thumb Impression
2. Proof of Identity (Pol)* (fe	or PAN exempt Investor	or if PAN card co	py not provided) (Please refer instruction C & K at the	end)
(Certified copy of <u>any one of</u> t	•			,
A- Passport Number			Passport Expiry Date	D D - M M - Y Y Y Y
B- Voter ID Card				
D- Driving Licence			Driving Licence Expiry Dat	e D D — M M — Y Y Y Y
🗌 E- Aadhaar Card				
F- NREGA Job Card				
Z- Others (any docume	nt notified by the centra	al government)	Identification Numbe	r la
3. Proof of Address (PoA)*				
3.1 Current / Permanent	/ Overseas Address Deta	ails (Please see ir	nstruction D at the end)	
Address Line 1*				
Line 2				
Line 3			City / Town / V	illage*
District*	Zi	ip / Post Code*	State/UT Code	
State/UT*				as per Indian Motor Vehicle Act, 1988 Country Code as per ISO 3166
	esidential / Business			
(Certified copy of <u>any one</u>			-	
Proof of Address*				
Passport Number			Passport Expiry Date	
Voter ID Card				
			Driving Licence Expiry Dat	e D D — M M — Y Y Y Y
Aadhaar Card				
NREGA Job Card Others (any desumant)	actified by the control of		L Identification Numbe	
Others (any document i 3.2 Correspondence / Lo				
Same as Current / Permai				
Line 1*				
Line 2				
Line 3			City / Town / V	illage*
District*	Zi	p / Post Code*	State/UT Code	as per Indian Motor Vehicle Act, 1988
State/UT*			Country*	Country Code as per ISO 3166

4. Contact Details (All of	communica	tions wi	ll be se	ent on	provic	led N	lobile	no. /	Em	ail-ID)	(Plea	ase r	efer	instr	ucti	on F	at	the	end	I)										
Email ID								Π			Π			Π			Τ	Τ		Т		Τ		Τ		Т	Τ	Τ		
Mobile			TT	Tel.	(Off)	+	TT T	1-Г	T			+	'n	Tel.	(Re	es)	Ť	Ť	$\overline{\Box}$	 [+	Ť	Ť	Ť	÷	\square	\square	_	_	
5. FATCA/CRS Informa	tion (Tick i	f Applic	able)			Dosic	lence			Purpos	ene in	luria	edic					odis				ofor	ine	true			 at th		nd)	
Additional Details Rec		•••	,	/ if ab							563 111	Jun	Suic		5) (utan	ue ii	Ture	1 (1 1		5010		1113	uu	,001	D	atu		nu)	
Country of Jurisdiction	•	-								,	ntry	Code	e of	Juri	sdio	ctio	ר of	Re	side	end	ce [ae n	er IS	0.3	166			
Tax Identification Nun		L	t (If is	sued	bv iur	isdic	tion)*		⊢									7					'	45 P		0 0	100			
Place / City of Birth*			ŤT			_	, Countr		Bir	th*		+	\square		Τ	\square	1	╧		Со	untr	v C	Cod	eГ		٦.	as pe	er IS	D 316	6
Address Line 1*								,							-	-	1	1												
Line 2			++	++	++	+	++	+		\vdash	\vdash	+-		\vdash	+	+	+	┝		-	\square	_		-	+	+	+	+	+	-
Line 3		++	++	++	+	-	+	+			$\left \right $	+			+	Citv	/ T	owi	n / \	L Vill	age	*			+	+	+	+	+	-
District*			+ -	Zip	/ Pos	t Cod	de*	+			\vdash			Stat		5					1		اسما				hiala		100	
State/UT*								Coun	try*	·				Stat			Juc	-		Co	j as ount								1988 0 31	
6. Details of Related Po	erson (Opti	ional) (r	lease	refer ir	nstruc	tion (G at th	e enc	i) (t	in case	e of a	dditic	onal	relat	ed r	oers	ons	, ple	ease	e fil	l 'An	ine	xure	B′	1')					
Related Person		eletion o								er of R												T								
Related Person Type*		uardian				C	Assig				olato			orized			,	ativ	/e											
	Pref	ix		F	irst Na	me			_					Name					Г				Li	ast	Nam	e				
Name*		C numbe	r and n	ame ar								ntion							L											
Proof of Identity [Po	,										, are 0	PION	<i>)</i>																	
(Certified copy of <u>any one</u>	e_of the follo	wing Pr	oof of l	dentity	[Pol] r	eeds	to be	submi	ittec	1) (1)																				
A- Passport Numbe	r 🗌				1							Ρ	ass	port	Ex	oiry	Dat	te			D	D	-[M	M -	Y	Y	Y	Y	
B- Voter ID Card																														
C- PAN Card								_																						
D- Driving Licence						\square						D	rivi	ng Li	icer	nce	Exp	biry	Dat	te	D	D	-[M	M -	Y	Y	Y	Y	
E- Aadhaar Card								-																						
F- NREGA Job Card																														
Z- Others (any docu	iment notif	ied by	the ce	entral	gover	nme	nt)							Ide	ntifi	cati	on	Nur	nbe	er										
7. Remarks (If any)																														
																									\Box					
 8. Applicant Declaration I hereby declare that the deta therein, immediately. In case liable for it. I hereby declare legislation or any notifications I hereby consent to receiving Date: DD - MM 	ils furnished ab any of the abo that I am not directions issu	ve informa making t ied by any	ation is fo his appli governn	ound to b cation for nental or	oe false or the p statuto rough SI	or unti urpose ry auth	rue or m of cont ority fro	isleadi raventi m time	ng o ion c to tir	or misrep of any A me.	resenti ct, Rul	ng, I a es, Re	im aw egula	vare the	at I r	nay b	e hel	d		Si				_	umb Ir				ant	
9. Attestation / For Off	ice Use Or	nly											•																	
Documents Receiv	ed 🗌 Certi	fied Cop	oies																											
KYC Ver	ification Car	ried Ou	t by (Re	əfer Ins	tructior	n I)											Inst	itut	ion [Deta	ails									
Date	D D —	M M -	YY	ΥY						Nam	ne																			
Emp. Name										Cod	е																			
Emp. Code										Emp	. Brai	nch																		
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Date	D D -	M M -	YY	YY						Nam	ne																			
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Emp. Designation]																					1

South	Gujara	at ARN:	54854	

Know Your Client (KYC) Application Form

For Individuals Only

(Please fill the form in English and in BLOCK Letters) Fields marked with * are mandatory fields

Supplementary CKYC Form

(To be additionally filled by customers using old KYC form)



KYC Type: □ Normal (PAN is mandatory) □ PAN Exempt Investors

1. Identity Details (Please I	efer instruction A at the end)
PAN	Please enclose a duly attested copy of your PAN Card
· · · · · · ·	Prefix First Name Middle Name Last Name
Name* (same as ID proof)	
Maiden Name (If any*)	
Mother Name*	
Residential Status* Occupation Type*	Resident Individual Non Resident Indian Foreign National Person of Indian Origin S-Service Private Sector Public Sector Government Sector O-Others Professional Self Employed Retired Housewife Student B-Business X-Not Categorised
2. FATCA/CRS Information	(Tick if Applicable) Residence for Tax Purposes in Jurisdiction(s) Outside India (Please refer instruction B at the end)
Additional Details Require Country of Jurisdiction of	ed* (Mandatory only if above option is ticked) Residence* Country Code of Jurisdiction of Residence as per ISO 3166 r or equivalent (If issued by jurisdiction)* Country of Birth* Country Code as per ISO 3166
_	
Related Person Related Person Type*	Deletion of Related Person KYC Number of Related Person (if available*) Image: Comparison of Authorized Representative Guardian of Minor Assignee Authorized Representative
Name*	Prefix First Name Middle Name Last Name (If KYC number and name are provided, below details of section 6 are optional) (If Section 6 are optional)
Proof of Identity [Pol] of	
(Certified copy of <u>any one of</u>	he following Proof of Identity[Pol] needs to be submitted)
A- Passport Number	Passport Expiry Date D D M Y Y Y
□ B- Voter ID Card □ C- PAN Card	
_	
D- Driving Licence	Driving Licence Expiry Date D M Y Y Y
E- Aadhaar Card	
F- NREGA Job Card	
2- Others (any docume	nt notified by the central government)
4. Remarks (If any)	
5 Applicant Declaration	
therein, immediately. In case any of liable for it. I hereby declare that legislation or any notifications/direct	hished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of tions issued by any governmental or statutory authority from time to time. hation from Central KYC Registry through SMS/Email on the above registered number/email address. Y Y Y Y Place: Signature / Thumb Impression of Applicant

DSP BLACKROCK

FATCA, CRS AND ADDITIONAL KYC

MUTUAL FUND South Gujarat ARN: 54854

Details and Declaration form

For Investors using OLD Application Forms / Transaction Forms / Slips which do not contain new requirement on FATCA, CRS and KYC details. Non Individual Investors have to additionally submit separate FATCA Details and UBO forms.

Please refer to instr SOLE / FIRST INVESTOR DETAILS	uctions, terms and conditions in upda				v.dspblackrock.com
Name		Appli	cation No.		
PAN	Folio Nos.				
Type of Address given at KRA Resid	ential or Business Reside	ntial Bus	iness F	Registered Office	e
				•	
1. FATCA AND CRS DETAILS For Individua		tors including HUF	should mandatoril		
Sole/First Investor/Guardian Place & Country of Birth PLACE COUNTRY	2nd Investor Place & Country of Birth PLAC		Place & Country	3rd Investor	
Place & Country of Birth PLACE COUNTRY Nationality Indian U.S. Other	Place & Country of Birth PLAC		-	y of Birth PLACI dian □U.S. □Other	
# Please indicate all Countries, other than India, in which you *If TIN is not available or mentioned, please mention reason a the country of tax residence entered above do not require th	s: 'A' if the country does not issue TINs to its				
Country # Tax Identification Identification Type/Reason*	Country # Tax Identification Number	Identification Type/Reason*	Country #	Tax Identification Number	Identification Type/Reason*
1	1		1		
2 3	2 3		2 3		
			-		
2. ADDITIONAL KYC DETAILS (MANDATO	RY)				
Sole / First Investor Details a. Occupation Details (Please tick ✓) ○ Professional ○ Agriculturist ○ Retired		c Sector Service Dealer Other			
 b. Gross Annual Income (Please tick ✓) ○ B Net-worth in (Mandatory for Non-Individu c. For Individuals (Please tick ✓) ○ Politica 	als)₹	as on	D D M M	/ Y Y Y Y	crore (Not older than 1 year)
2nd Investor Name			PAN	Durin and	
a. Occupation Details (Please tick ✓)○ Privation Orofessional ○ Agriculturist ○ Retired	• Public Sector				(Please specify)
 b. Gross Annual Income ○ Below 1 Lac ○1-5 c. Others (Please tick ✓) ○ Politically Exposed 	Lacs O5-10 Lacs O10-25 Lacs O	>25 Lacs-1 crore	○>1 crore OR Ne	et worth₹	
3rd Investor Name			PAN		
a. Occupation Details (Please tick ✓)○ Privat ○ Professional ○ Agriculturist ○ Retired	e Sector Service OPublic Sector Secto				(Please specify)
 b. Gross Annual Income ○ Below 1 Lac ○1-5 c. Others (Please tick ✓) ○ Politically Exposed 					
、 <i>,</i> , , , , , , , , , , , , , , , , , ,		ty Exposed reison (abic	
3. DECLARATION & SIGNATURES 1 / We acknowledge and confirm that the information consultation with tax professionals. I / We have underste along with instructions and scheme related documents) a	provided above is/are true and correc od the information requirements pertain	t to the best of my ing to FATCA, CRS ar	//our knowledge a nd Additional KYC re	nd belief and provi equirements, terms	ded after necessary and conditions (read
along with instructions and scheme related documents) a	nd hereby confirm that the information p	rovided by me/us or	this form are true,	correct, and comple	ete.

DSP BLACKROCK

Aadhaar Updation Form

MUTUAL FUND South Gujarat ARN: 54854

_ _ _ _

You can also update Aadhaar online on www.camsonline.com

Name	PAN /
	PEKRAN
Aadhaar Number	Enclosed Self attested copy of Aadhaar Card
(Linking your Aadhaar in MF Folios will be subject to verification and authenti	Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.)
Information: The purpose of collection/usage of Aadhaar number including demographic i	information is to comply with applicable laws/rules/regulations and provision of the
said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to comp rules/regulations.	lhaar number, we shall authenticate the same in accordance with the Aadhaar Act,
Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulatio (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide disclose of the Aadhaar number(s) including demographic information with the asset manage registered intermediaries, their Registrar and Transfer Agents (RTA)/Service Providers for the same in all my/our folios.	number(s) in accordance my consent for sharing/ ement companies of SEBI
Acknowledgement (For Aadhaar updation)	For office use only
PAN	
Name	service@dspblackrock.com Call: 1800 200 4499
DSP BlackRock	Aadhaar Updation Form
	Aadhaar Updation Form You can also update Aadhaar online on www.camsonline.com
	You can also update Aadhaar online on www.camsonline.com
MUTUAL FUND	You can also update Aadhaar online on www.camsonline.com
Name Aadhaar Number	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No.
MUTUAL FUND Name Aadhaar Number (Linking your Aadhaar in MF Folios will be subject to verification and authenti	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.)
Name Aadhaar Number	You can also update Aadhaar online on www.camsonline.com PAN / PAN / PEKRAN PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the Ihaar number, we shall authenticate the same in accordance with the Aadhaar Act,
MUTUAL FUND Name Aadhaar Number Linking your Aadhaar in MF Folios will be subject to verification and authenti Information: The purpose of collection/usage of Aadhaar number including demographic i said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to compirules/regulations. Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulation (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the lhaar number, we shall authenticate the same in accordance with the Aadhaar Act, ly with applicable laws/ mos made thereunder, for number(s) in accordance my consent for sharing/
MUTUAL FUND Name Aadhaar Number (Linking your Aadhaar in MF Folios will be subject to verification and authenti Information: The purpose of collection/usage of Aadhaar number including demographic i said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to complicitly rules/regulations. Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulation (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the lhaar number, we shall authenticate the same in accordance with the Aadhaar Act, ly with applicable laws/ mos made thereunder, for number(s) in accordance my consent for sharing/ ement companies of SEBI
MUTUAL FUND Name Aadhaar Number Linking your Aadhaar in MF Folios will be subject to verification and authenti Information: The purpose of collection/usage of Aadhaar number including demographic i said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to compirules/regulations. Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulation (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide disclose of the Aadhaar number(s) including demographic information with the asset manage registered intermediaries, their Registrar and Transfer Agents (RTA)/Service Providers for	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the lhaar number, we shall authenticate the same in accordance with the Aadhaar Act, ly with applicable laws/ ons made thereunder, for number(s) in accordance my consent for sharing/ ement companies of SEBI the number of your data ting
Name Aadhaar Number Linking your Aadhaar in MF Folios will be subject to verification and authenti Information: The purpose of collection/usage of Aadhaar number including demographic i said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to compirules/regulations. Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulation (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide disclose of the Aadhaar number(s) including demographic information with the asset manage registered intermediaries, their Registrar and Transfer Agents (RTA)/Service Providers for the same in all my/our folios.	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAl containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the lhaar number, we shall authenticate the same in accordance with the Aadhaar Act, ly with applicable laws/ ons made thereunder, for number(s) in accordance miny consent for sharing/ement companies of SEBI the purpose of updating Signature
Name Aadhaar Number Linking your Aadhaar in MF Folios will be subject to verification and authenti Information: The purpose of collection/usage of Aadhaar number including demographic i said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to complicules/regulations. Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulation (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide disclose of the Aadhaar number(s) including demographic information with the asset manage registered intermediaries, their Registrar and Transfer Agents (RTA)/Service Providers for the same in all my/our folios. Acknowledgement (For Aadhaar updation)	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAI containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the lhaar number, we shall authenticate the same in accordance with the Aadhaar Act, ly with applicable laws/ ons made thereunder, for number(s) in accordance my consent for sharing/ ement companies of SEBI the number of your data ting
Name Aadhaar Number Linking your Aadhaar in MF Folios will be subject to verification and authenti Information: The purpose of collection/usage of Aadhaar number including demographic i said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aad 2016. We shall receive your demographic information which shall be used only to compirules/regulations. Consent: I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulation (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my Aadhaar with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I hereby provide disclose of the Aadhaar number(s) including demographic information with the asset manage registered intermediaries, their Registrar and Transfer Agents (RTA)/Service Providers for the same in all my/our folios.	You can also update Aadhaar online on www.camsonline.com PAN / PEKRAN Enclosed Self attested copy of Aadhaar Card Letter issued by UIDAl containing Aadhaar No. fication of your Aadhaar with concerned authorities.) information is to comply with applicable laws/rules/regulations and provision of the lhaar number, we shall authenticate the same in accordance with the Aadhaar Act, ly with applicable laws/ ons made thereunder, for number(s) in accordance miny consent for sharing/ement companies of SEBI the purpose of updating Signature