Sl No.

TEMPLETON	APPLICATION FORM FOR NEW INVESTORS
NTS	(Please read Product labeling details available on cover page and instructions before filling this Forr

FRANKLIN TEMPLETON INVESTMENTS	APPLICATION FORM FOR NEW INVESTORS (Please read Product labeling details available on cover page and instructions before filling this Form)				
Advisor ARN / RIA code Sub-broker,	/Branch Code Sub-broker A	RN Representative EUIN	For office use only		
ARN: 54854					
The upfront commission on investment made by the investor, if any, she Applicable only if ARN is mentioned but EUIN hox is left blank: "//We person of the above distributor/sub broker or notwithstanding the advi give you my/our consent to share/provide the transactions data feed/pc					
First/Sole Applicant/Guardian	Second .	Second Applicant Third Applicant			
TRANSACTION CHARGES (Refer instructions					
I am a first time investor in mutual funds (Rs.150	will be deducted). I am an	existing mutual funds investor (Rs.100 will	be deducted).		
MY DETAILS (To be filled in Block Letters. Ple	ease provide the following details in full; F	Please refer instructions)	_		
My Name (Should match with Aadhaar Card)		PA	N/PEKRN (1st Applicant) KYC		
My Guardian's Name (if minor)/POA/Contact Perso	n	PA	N/PEKRN (Guardian/POA)		
(* Attach Mandatory Documents as per instructions).	Date of Birth D D / M / Y Minor's D D / M M / Y	Y Y Date of Birth Guardi Proof attached * Fath	an named is : er Mother Court Appointed		
MY CONTACT DETAILS (As per KYC records	s. To be filled in Block Letters)				
Email ID (in capital) Mobile +91 Address Landmark City	Image: State of the state o	Image: State	Address Type (Mandatory) a. Residential & Business b. Residential c. Business d. Registered Office		
E JOINT APPLICANTS (IF ANY) DETAILS		Mode of Operation : Sin	ngle Joint Either or Survivor(s) [Default]		
2nd Applicant Name (Should match with Aadhaar C 3rd Applicant Name (Should match with Aadhaar C	,	PA	N/PEKRN (2nd Applicant) KYC N/PEKRN (3rd Applicant) KYC		
S ADDITIONAL INFORMATION					

Applicant	Aadhaar No.⁺	KIN No. (If KYC done via CKYC)	Date of Birth"	Gender
1st			D D / M M / Y Y	□ M □ F
2nd			D D / M M / Y Y	M F
3rd			D D / M M / Y Y	M F
G or POA			D D / M M / Y Y	M DF

🕼 KNOW YOUR CUSTOMER (KYC) DETAILS (Mandatory. Please Tick/ Specify. The application is liable to get rejected if details not filled.)									
Status details for	1 st Applicant	2 nd Applicant	3 rd Applicant	Guardian	Occupation details for	1 st Applicant	2 nd Applicant	3 rd Applicant	Guardian
Resident Individual					Private Sector				
NRI/PIO/OCI					Public Sector				
Sole Proprietorship		-	-	-	Government Service				
Minor through Guardian		-	-	-	Business				
	Company/Bo	ody 🗆 Corpora	te 🗌 Partnershi	ip	Professional				
Non Individual	🗆 Trust	□ Society	🗆 HUF		Agriculturist				
	🗆 Bank	□ AOP	□ FI/FII/FPI	[Retired				
Others (Please specify)					Housewife				
Gross Annual Income Range (in Rs.)					Student				
Below 1 lac					Others (Please specify)				
1-5 lac					Politically Exposed Pers	on (DED) dotail	s: Is a PEP	Related to PEP	Not Applicable
5-10 lac					1 st Applicant	son (r Er) uetan			
10-25 lac					2 nd Applicant				
25 lac- 1 cr					3 rd Applicant				
1 -5 cr					Guardian				
5 - 10 cr					Authorised Signatories				
> 10 cr					Promoters				
OR Networth in Rs. (Mandatory for Non					Partners				
Individual) (not older	as on	as on	as on	as on	Karta				
than 1 year)	D D M M Y Y	D D M M Y Y		D D M M Y Y	Whole-time Directors/Tu	ırstee			

ACKNOWLEDGEMENT SLIP				Sl. No.
Received from				Pin
Scheme Name	Plan/Option	Payment Details		
		Amount	Cheque/DD No.	Date

Amount

Bank and Branch details_

Bank and Branch details_

Cheque/DD No.

Date

	For maividuals (Mandato	ory). Non Individual invest	ors including HUF should ma	andatorily fill sepa	rate FATCA/CRS/UBO details form
Details	Sole/ 1st Applicant	2nd Appli		Applicant	Guardian/POA
Place & Country of Birth					
Nationality					
Are you a tax resident of any country other than India?	Yes No	Yes	No Yes	No	Yes No
	Associa Maritzina la Davela Davela		Mandatory to enclose FATCA /CRS And	lexure	
BANK ACCOUNT DETAILS (.	Avail Multiple Bank Regist	tration Facility)			
My Bank Name					
Bank A/C No.			A/C Type Savings	Current NRE	NRO FCNR Others
Branch Address					
		City			Pin
IFSC code: (11 digit)		MICR c	ode (9 digit)		(This is a 9 digit number next to your cheque number)
R MY INVESTMENT DETAILS	(Cheque/DD should be in favour	r of "Scheme Name" Default pla	n /Ontion will be applied incase of a	no information ambig	uity or discremency)
Full Scheme/Pla	in/Option	Amount / Each SIP Amount	Payment Mode		awn on Bank/Branch
		Rs.	Cheque/DD No.	Name/Branch:	
		Less DD charges	RTGS NEFT		
			Funds transfer	A/c no.	
Lumpsum SIP		2		Name/Branch:	
		Rs. Less DD	Cheque/DD	Name/Branch.	
		charges	No.		
			Funds transfer	A/c no.	
Payment through NACH (Attach N	ACH form) Documents atta	ached to avoid Third Party Pa		Bank Certificate, fo	or DD Third Party Declarations
IFY	OU OPT TO START TWO SIP	'S, THE BELOW MENTIONEI	DETAILS WILL BE APPLICABI	 .E FOR BOTH THE S	IP'S.
Additonal details for SIP: SIP Date	e: D D (If left blank 10^{th} w	vill be considered as the defau	lt date)		
SIP Period Start Date m m /	y y y y End Date	Continue Until Cancelled	OR m r	n / y y y y	
Investment Frequency Monthly	(default) Quarterly	First SIP Cheque Date:		Cheque No.	
Step-up my SIP annually by:	Increase in %: (in multiples of 5%) (Amour	it invested will be rounded off	to the nearest Rs. 1	00)
or I	Increase in Rupee Value:	(in multiples of F			
		o mlanao aukurita annovata m	an in ation forms and lable with a		
NOMINATION DETAILS (In c	ase of more than one nomme	e, piease subinit a separate n	ommation form available with a	iy of our ises of on o	ui websitej. Kelei ilisti uctiolis.
Nominee Name and	E	lan Minan Naminaa (Mandataa	nute attach DOR Breach		
	Address	or Minor Nominee (Mandator DOB Guard	y to attach DOB Proof) lian Name & Address	Allocation No	ominee/ Guardian Signature
	Address				
	Address			Allocation No 100 % X	
	Address				
OR I/We DO NOT wish to nominat	Address	DOB Guard			
(To be signed by all the joint h	Address te and sign here olders irrespective of the mod	DOB Guard	lian Name & Address	100 % X	ominee/ Guardian Signature
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(To be signed by all the joint h Composition of the sequence o	Address Address te and sign here olders irrespective of the moo TAILS (Optional. To be fill mentioned in this Application Form ES (To be signed as per Moo and after evaluating and acknowledge laws and the terms and conditions me sor (ii) the money used for investment the form of rail commission or any oth grail persons (older they particulars bein gray of the above particu	DOB Guard de of holdings.)	bian Name & Address bian Name & Address bid the units in Demat mode bid the units in the persent with the units of the informat bid the units of the units of the units of the units and the reunal of the and the units and the units of the unit had bid the units of the units of the units of the units and the units of the units and the units of the units and the units of the units the units of the units	100 % X). Refer instruction eneficiary Ac No. eneficiary Ac No. eneficiary Ac No. adatory) Client Master CKS) and UBO details ment goty Charles to the solution or action of solution undertaken or action on outpet alem or action provided to Pranking the regulation of action of	pminee/ Guardian Signature pminee/ Guardian Signature Is. Is. Is. Memorandum (KIM), the Addenda issued therein themes of FIMF for units of scheme(s) of FIMF as confirm that (i) 1 /we am/are not a US Person and the Sources Inc. It is subsidiary and associate entities twittee performed by them in accordance with the Addenda issued therein the addition of all dual to subsidiary and associate entities twittee performed by them in accordance with the Guardian of the subsidiary and associate entities twittee performed by them in accordance with the folios linked to my/our PAN. Finird Unit Holder

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Nomination	facility	01

Corporate Documents/ Trust Deed

- FATCA/CRS details provided for each applicant
- Nomination facility opted
 Form is signed by all applicants
 Proof of relationship with minor
- □ Non Individual investors should attach FATCA Details and Declaration Form