Common Application Form for Equity and Fund of Funds Schemes

(To be Filled in BLOCK LETTERS only)





DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units) Broker Name & ARN code / RIA code^ **Application** $No. : \mathbf{E}$ By mentioning RIA code, I / we authorise you to share with the SEBI Registered Investment Adviser (RIA) the details of my / our transactions in the schemes(s) of HSBC Mutual Fund. For Office Use Only I / We hereby confirm that the EUIN box has been intentionally left blank by me / us as this transaction is executed without any interaction or advice by the employee / relationship manager / sales person of the above distributor / sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee / relationship manager / sales person of the distributor / sub broker. Sole / First Applicant / Authorised Signatory Second Applicant / Authorised Signatory Third Applicant / Authorised Signatory TRANSACTION CHARGES (Please tick any one of the below. Refer point 5 on page 20 regarding transaction charges applicability) I AM AN EXISTING INVESTOR IN MUTUAL FUND I AM A FIRST TIME MUTUAL FUND INVESTOR (r 150 will be deducted as transaction charge for per purchase of r 10,000 and more) (r 100 will be deducted as transaction charge for per purchase of r 10,000 and more) APPLICANT'S INFORMATION [Please fill in your Folio No. below. In case of existing folio, furnish only KYC and PAN details below (if not provided earlier) and proceed to Section 3] Please note that applicant details and mode of holding will be as per existing Folio Number. Are you a resident of Canada.? (\checkmark) Yes \square No^{‡‡} \square ^{‡‡} Default if not ticked. SOLE/FIRST APPLICANT'S PERSONAL DETAILS AS APPEARING ON AADHAAR Name Mr Ms M/s Should match with Aadhaar Proof Enclosed (✓) Birth Certificate School Leaving Certificate Passport Date of Birth ~‡ (Mandatory) D D M M Y (please specify) Marksheet issued by HSC State Board Others _ KYC Identification No. (KIN) ## Where Aadhaar number has not been assigned: Please enclose -Aadhaar Number** Proof of application of enrollment of Aadhaar PAN** (Mandatory) Proof to be enclosed (✓) ☐ PAN card Copy Nationality‡ Country of Residence Guardian Name^{*} (if Sole / First applicant is a Minor) Contact Person (in case of Non-individual Investors only) Mr Ms M/s KYC Identification Number (KIN) ‡‡ Where Aadhaar number has not been assigned: Please enclose -Aadhaar Number** Proof of application of enrollment of Aadhaar PAN** (Mandatory) Proof to be enclosed (✓) ☐ PAN card Copy Natural Guardian+ (Father or Mother) Legal Guardian⁺⁺ (court appointed Guardian) ++ In case of Legal Guardian, please submit attested copy of the court appointment letter, affidavit etc. to support. Document evidencing relationship with Guardian Status of Sole / 1st Applicant (*): Resident Individual Resident Minor (through Guardian) Non-Resident (Repatriable) Non-Resident (Non-Repatriable) Non-Resident - Minor (Repatriable) Non-Resident - Minor (Non-Repatriable) Bank FPIs QFI/EFI AOP HUF FPI Sole-Proprietor Private Limited Company Public Limited Co. Body Corporate Partnership Firm Trust NPS Trust Fund of Fund Gratuity Fund Pension and Retirement Fund Government Body NGO BOI Society LLP PIO Non Profit Organisation Global Development Network Foreign Nationals [Specify Country] Others [Specify KYC DETAILS [Mandatory (Details of Guardian in case the unitholder is a minor)] Investors are requested to complete the KYC section for Joint holders & POA also, as applicable Occupation Details (*): Private Sector Service | Public Sector Service | Government Service | Professional | Agriculturist | Retired | Housewife Student Doctor Forex Dealer Casino Owner Arms manufacturer Gambling services offerer Money lender Pawn Broker Others [Pl. specify] Business [Nature of Business] 3b. Below R 1 Lac R 1-5 Lacs R 5-10 Lacs R 10-25 Lacs R 25 Lacs - R 1 Crore Gross Annual Income (Please ✓): > R 1 Crore OR Net-worth in Rupees (Mandatory for Non-Individuals) R Net-worth should not be older than 1 year D D M M Y as on (date) For Non-Individual Investors (Companies, Trust, Partnership etc.): For Individuals [Tick (\checkmark) if applicable] : Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company Politically Exposed Person (PEP) Yes No (If No, please attach mandatory UBO Declaration) Related to a Politically Exposed 3c. II. Foreign Exchange / Money Changer Services Yes No Person (PEP) III. Gaming / Gambling / Lottery/ Casino Services Yes No Not Applicable IV. Money Lending / Pawning Yes No For Non Individual Investors -Mandatory UBO Declaration form duly filled and signed attached. Yes No **Identification of Beneficial Ownership** (Not Required for a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company) Name to be as per the Aadhaar Card. If the Name given in the application is not matching with Aadhaar card, application may be liable to get rejected or further transactions may be liable get rejected. W.e.f. January 1, 2011, all the applicants need to be KYC Compliant irrespective of the amount invested (including switch). W.e.f January 1, 2012, applicants who are not KYC compliant are required to complete the uniform KYC process (for details refer point 10 under Important Instructions). ## W.e.f February 1, 2017, New individual investors who have never done KYC under KRA (KYC Registration Agency) regime and whose KYC is not registered or verified in the KRA system will be required to fill the new CKYC form while investing with the Fund. As per the amendments to the Prevention of Money Laundering (Maintenance of Records) Rules, 2005 dated 1st June 2017, Resident Individual investors including Joint Holders, Guardian and Power of Attorney Holders are required to submit their Aadhaar number or proof of Aadhaar application issued by the Unique Identification Authority of India and Permanent Account Number (PAN) to us. Non-individual investors have to submit the Aadhaar and PAN of the authorized signatory/ies. Non Resident Individuals are not required to provide Aadhaar. 1) For MF accounts opened prior to June 1, 2017 - before 31st December 2017. 2) For MF accounts opened on/after June 1, 2017 - before 31st December 2017. 3) For accounts opened on/after Junuary 1, 2018 - Aadhaar and PAN are mandatory, without which the account will not be opened. Please note that if Aadhaar seeding and PAN updation is not completed for mutual fund investments by 31 December 2017, then these investment accounts will become inoperative until the time that these are duly updated in Fund records. Please note that information sought here will be obtained from KRA also. In case of any differences, the KRA input will apply. ...continued overleaf ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) Note: This Acknowledgement Slip is for your reference only. Information provided on the form is considered final. Application Received from Mr Ms M/s No. :E Folio No. application for Units of Scheme Option / Sub-option _ Lumpsum investment along with Cheque / DD No. Drawn on (Bank) Amount (R) ☐ SIP Investment ☐ Total Cheques ☐ ☐ ECS (Debit Clearing)/Direct Debit Facility Total Amount (R) ISC Stamp, Signature & date

Please Note: All purchase are subject to realisation of instruments. All transaction processing is subject to final verification.

				Address	151101		auj (Sn	outd be s	same as i	II KK	A reco	nus)										
City State								Con	ntry								Pi	n Code	2			_
Contact	O								Extn.			+		Fax		+	+		+	+		\pm
Details e-mail~	Phone R								LAUI.		Mo	bile		Tax								
~ On providing	e-mail id inves	ore chal	l receive so	neme wise	annual re	enort or s	n abrido	ed summ	ary thereo	of / acc	ount s	tatem	ents / s	tatuto	rv & oth	er doo	rumer	ite and	mark	eting	mater	ial hı
Overseas Ado									ary theree	n / acc	ount s	iatem	ciito / c	statuto	ry & on	ci doc	Junion	its and	man	cting	mater	iai oy
(Mandatory in	case of NRI	/ FPI ap	plicant in	addition t	o mailin	g addre	ss) (Sho	uld be s	ame as i	n KRA	A reco	rds)										
State							Country	/ (Manda	tory)			City					Zi	p Code	e			
JOINT APPL	ICANTS, IF	ANY A	AND THE	IR DETA	ILS (Pl	ease tic	k (√) w	herever	applical	ole)												
Mode of Ho			Sing						not men		d)			Anyo	ne or	Survi	vor					
NAME [^] OF	SECOND A	PPLIC	ANT (Not	applicable if	Sole / First	Applicant	is a Mino	r and Secon	nd Applican	t cannot	be a M	linor) A	Are you	ı a resi	dent of (anada	.? (✓)	Yes	No ^{‡‡}	D	efault i	f not t
Mr Ms M/s								Should	match w	ith Aa	adhaai	-										
Date of Birth	D D M N	I Y Y	YYY					KY	C Identif	fication	n Nun	ıber ((KIN)	: :								
Aadhaar Num									here Aad Proof o	haar n	numbe	r has	not b	een a			ase ei	nclose	-			
PAN** (Mand	latory)							Pr	oof to be				_			aaı						
Nationality _									untry of													
a. Occupat				or Service	Pub	lic Secto		e Go	vernmen	t Servi	ice	Prof										S
Busin	ness [Nature of	Busines	ss]					Doctor	Forex	Deale												
b. Gross Ar	oling services								·e			Net-	-wort	h in F	lupees	Mano	datory	for N	on-I	ndivi	duals)	
R 10-	-25 Lacs	R 25 La	cs - R 1 Cr	ore	R 1 Cro	re			OR			}			orth sho		ot be o	older th	an 1	year		
C. Others (
NAME [^] OF	THIRD AP	PLICAN	IT (Not app	licable if Sol	e / First Ap	pplicant is	a Minor a						e you a	reside	nt of Ca	ada.?	(√) Ye	s N	0#	Defa	ault if n	ot tic
Mr Ms M/s									match w					Щ								Щ
Date of Birth	D D M N	I Y Y	YY						C Identif							DI						
Aadhaar Num	nber**							W	here Aad Proof o								ase ei	nclose	-			
D	1.4																					
PAN** (Mand	latory)							Pr	-				_	I card	Copy							
PAN** (Mand	iatory)							_	oof to be	enclo	sed (/) [_	V card	Сору							
Nationality a. Occupat Busin	ion (please ✓)	Busines	ss]				_ 🗆	Cor e Go Doctor	oof to be untry of vernmen Forex	enclo Resident Servi Deale	osed (() [Prof	PAN	nal [Agricu							
A. Occupat Busin Gamb Gross Ar	ion (please ✓) ness [Nature of	Busines offerer (please	Money ✓): ☐ E	lender elow R 1 L	Pawn I	Broker 1	Othe	Core Go Doctor Crs [Please	oof to be untry of vernmen Forex specify]	enclo Resident Servi Deale	dence	Prof Mone	PAN Tession by lend	nal ler h in F	Agricu	Owi	datory	Arm for N	s ma	ndivi	cturer	
A. Occupat Busin Gamb b. Gross Ar R 10-	ion (please / ness [Nature or obling services nnual Income - 25 Lacs]	Busines offerer (please R 25 La	Money ✓): ☐ E cs - R 1 Cr	lender elow R 1 L	Pawn I	Broker 1 R 1-5 Lac	Othe R	Core Go Doctor Crs [Please 5-10 Lac	oof to be untry of vernmen Forex e specify]	enclo Resident Servi	dence	Prof Mone	PAN Tession ey lend	nal der h in F	Agricu Casin Rupees orth sho	Mana Mana	datory	Arm for N	s ma	ndivi	cturer	
A. Occupat Busin Gamb Gross Ar	ion (please less Nature or please Nature or please Lacs please less Nature or please less Nature less	Busines offerer (please R 25 La	Money ✓): ☐ E cs - R 1 Cr tically Ex	lender elow R 1 Lore >	Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac	Othe es R	Co Doctor Trs [Please 5-10 Lac To a Politic	oof to be untry of vernmen Forex especify OR	enclo Resid t Servi Deale	dence cice Ferso	Prof Mone	PAN Pession Pe	nal der h in F Net-w	Agricu Casin Rupees	Mana Mana	datory	Arm for N	s ma	ndivi	cturer	
A. Occupat Busin Gamb b. Gross Ar R 10- C. Others (ion (please / ness [Nature obling services mual Income - 25 Lacs] please /):	Busines offerer (please R 25 La	Money ✓): ☐ E cs - R 1 Cr tically Ex	lender elow R 1 Lore >	Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac	Othe es R	Core Go Doctor Trs [Please 5-10 Lac o a Politi orney ple	oof to be untry of vernmen Forex especify OR	Resident Service Deale	dence	Prof Mone Net- R	PAN Pession Pe	nal der h in F Net-w	Agricu Casin Rupees	Mana Mana	datory	Arm for N	s ma	ndivi	cturer	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M	ion (please / less [Nature of pling services] nnual Income (25 Lacs less /): ER DETAILS IsM/s less /	Busines offerer (please R 25 La Poli	Money ✓): ☐ E cs - R 1 Cr tically Ex	lender elow R 1 Lore >	Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac	Othe es R	Co e Go Doctor rs [Please 5-10 Lac o a Politi orney ple	poof to be untry of vernmen Forex especify OR ocally Expanse furni	Resident Service Deale posed sh deta	dence	Prof Mone Net- R	PAN ession ey lend -wort EP)	h in F Net-w No	Agricu Casin Rupees	Mana Mana	datory	Arm for N	s ma	ndivi	cturer	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth	ion (please / less Nature o oling services	Busines offerer (please R 25 La Poli	Money ✓): ☐ E cs - R 1 Cr tically Ex	lender elow R 1 Lore >	Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac	Othe es R	Co e Go Doctor Trs [Please 5-10 Lac o a Politi orney ple Shop	oof to be untry of vernmen Forex specify! Solution of the best of	Resident Service Deale posed sh deta	psed (vidence ice Fersonails of Addh	Profi Mone Net- R n (PE PoA I	PAN ession ey lend -wort EP) holder (KIN) not b	h in F Net-w No).	Agricu Casin Casin Casin Casin Casin Capplio	Manauld no	datory	Arm y for N older th	s ma	ndivi	cturer	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num	ion (please less [Nature of obling services] nual Income 25 Lacs please please is M/s please <td>Busines offerer (please R 25 La Poli</td><td>Money ✓): ☐ E cs - R 1 Cr tically Ex</td><td>lender elow R 1 Lore ></td><td>Pawn I ac F R 1 Cro on (PEP</td><td>Broker R 1-5 Lac</td><td>Othe es R</td><td>Co Doctor Trs [Please 5-10 Lac Tro a Politi Tro a Politi Tro Shou Tro W W</td><td>oof to be untry of vernmen Forex specify! SOR Cally Expanse furniald match C Identifihere Aad Proof o</td><td>Posed sh detain with fication haar n</td><td>Personals of Andh</td><td>Profidence Net- Retain (PE PoA I par Pos I pa</td><td>PAN ession ey lend ewort EP) holder not be</td><td>h in F Net-w No). ‡‡ peen a ment o</td><td>Agricu Casin Cupees Orth sho</td><td>Manauld no</td><td>datory</td><td>Arm y for N older th</td><td>s ma</td><td>ndivi</td><td>cturer</td><td></td>	Busines offerer (please R 25 La Poli	Money ✓): ☐ E cs - R 1 Cr tically Ex	lender elow R 1 Lore >	Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac	Othe es R	Co Doctor Trs [Please 5-10 Lac Tro a Politi Tro a Politi Tro Shou Tro W W	oof to be untry of vernmen Forex specify! SOR Cally Expanse furniald match C Identifihere Aad Proof o	Posed sh detain with fication haar n	Personals of Andh	Profidence Net- Retain (PE PoA I par Pos I pa	PAN ession ey lend ewort EP) holder not be	h in F Net-w No). ‡‡ peen a ment o	Agricu Casin Cupees Orth sho	Manauld no	datory	Arm y for N older th	s ma	ndivi	cturer	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand	ion (please less [Nature of obling services] nual Income 25 Lacs please please is M/s please <td>Busines offerer (please R 25 La Poli</td><td>Money ✓): ☐ E cs - R 1 Cr tically Ex</td><td>lender elow R 1 Lore ></td><td>Pawn I ac F R 1 Cro on (PEP</td><td>Broker R 1-5 Lac</td><td>Othe es R</td><td>Co ee Go Doctor rs Please 5-10 Lac o a Politi orney ple KY W Pr</td><td>of to be untry of or vernmen Forex specify SS OR cally Expand the C Identification of the Proof of the better Aad</td><td>enclo F Resident Service Deale posed sh deta with fication haar n f appli e enclo</td><td>Perso Addh n Nun numbee ication</td><td>Prof Mone Net- R n (PE PoA I par 1 of e</td><td>PAN ession ey lend ewort EP) holder not be</td><td>h in F Net-w No). ‡‡ peen a ment o</td><td>Agricu Casin Cupees Orth sho</td><td>Manauld no</td><td>datory</td><td>Arm y for N older th</td><td>s ma</td><td>ndivi</td><td>cturer</td><td></td>	Busines offerer (please R 25 La Poli	Money ✓): ☐ E cs - R 1 Cr tically Ex	lender elow R 1 Lore >	Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac	Othe es R	Co ee Go Doctor rs Please 5-10 Lac o a Politi orney ple KY W Pr	of to be untry of or vernmen Forex specify SS OR cally Expand the C Identification of the Proof of the better Aad	enclo F Resident Service Deale posed sh deta with fication haar n f appli e enclo	Perso Addh n Nun numbee ication	Prof Mone Net- R n (PE PoA I par 1 of e	PAN ession ey lend ewort EP) holder not be	h in F Net-w No). ‡‡ peen a ment o	Agricu Casin Cupees Orth sho	Manauld no	datory	Arm y for N older th	s ma	ndivi	cturer	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality	ion (please / less Nature of oling services Nature oling se	Business offerer (please R 25 Lar Polis (If the	Money ': E CCS - R 1 Cr tically Ex investmen	lender elow R 1 L ore > oosed Pers t is being 1	Pawn I ac FR 1 Cro on (PEP made by	Broker R 1-5 Lac re P)	Others R	Co ee Goo Doctor rs Please 5-10 Lac o a Politi orney ple KY W Pr Co	oof to be untry of vernmen Forex Specify SS OR Cally Expense furnial match Proof o coof to be untry of	posed sh detain with haar n f applie enclo? Reside	FPerso ails of Addh Numbee	Prof Mone Net- R PoA I ar hber (r has n of e	PAN ession -wort EP) (KIN) not b nrollr PAN	Not-ween a ment of	Agricu Casin Rupees orth sho t Applic sssigned of Aadh Copy	Manduld not able	datory ot be o	Arm y for N blder th	S ma	ndivio year	duals)	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat	ion (please less Nature of the please Na	Busines offerer (please R 25 Lac Polif (If the	Money i Money i: Escs - R 1 Cr tically Exp investmen	lender elow R 1 L ore > oosed Pers t is being 1	Pawn I ac FR 1 Cro on (PEP made by	Broker R 1-5 Lac re P)	Others Related t	Co e Go Doctor Services Please 5-10 Lac o a Politi orney ple Should W W Pr Co ee Go G	oof to be untry of vernmen Forex especify! Solution of the best of the proof of the best of the proof of the best of the proof of the	posed sh detain with a recipion of a policy of the control of the	Personails of Aladhan Number ication ossed ('Calaba')	Poal in the profession of the	PAN essior essior wort EP holder (KIN) not b enrollr PAN	No N	Agricu Casin Rupees orth sho t Applic sssigned of Aadh Copy	O Own	ner datory	Arm for N blder th nclose	S maan 1	ndivie year	duals)	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb	ion (please in the please in the p	Busines offerer (please R 25 Lar Polir (If the Polir F Lar Polir F	Money Noney Money Service A 1 Cr Service A 1 Cr Money Money Money Money Money Money	lender elow R 1 L ore > oosed Pers t is being t	Pawn I ac F R 1 Cro on (PEP nade by :	Broker 1-5 Lacore 2) Fa Constitution Constitution Sectors Broker	Others Related to the control of the	Co e Go Doctor rs Please 5-10 Lac o a Politi orney ple Shou W Pr Co ce Go Doctor rs Please Shou Fr Co rs Please Fr Co Re Go Doctor Rs Please	oof to be untry of vernmen Forex Specify CI dentified Marcel Proof to be untry of vernmen Forex Specify Specif	encloo PResident to Service Possed Po	Personails of Aladhan Number ication ossed ('Calaba')	Prof Mone Net- Net- Net- Net- Net- Net- Net- Ne	PAN PAN PAN PAN PAN PAN PAN PAN	No N	Agricu Casin Rupees orth sho t Applic sssigned of Aadh Copy	Manauld no Manable: Pleasaar	datory datory the control of the con	Arm y for N plder th nclose Retired Arm	s ma	ndivion year House	duals)	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb b. Gross Ar R 10-	ion (please please p	Busines offerer (please R 25 Lac Polici (If the Public F) (If the Public F) (If the Public F) (If the Public F) (Please R 25 Lac Public F) (Please R 25 Lac Public F)	Money Note that the second of	lender elow R 1 L ore > ossed Pers t is being t or Service elow R 1 L ore >	Pawn I ac F R 1 Cro on (PEP made by a pub Pawn I ac F R 1 Cro	Broker R 1-5 Lacore C 1-5 Lacore C 1-5 Lacore R 1-5 Lacore R 1-5 Lacore	Others Related traited Att	Co e Go Doctor rs [Pleases 5-10 Lac o a Politi orney ple Show Pr Co e Go Doctor rs [Pleases 5-10 Lac	oof to be untry of vernmen Forex especify! Sease furnial matcle C Identification Froof of the beauty of vernmen Forex especify! Forex especify! OR	posed	dence FPerson Aladhan Num	Net- Net- Net- Net- Net- Net- Net- Net-	PAN PAN PAN PAN PAN PAN PAN PAN	hin F Net-ween a ment card	Agricu Casin Rupees Applic Applic Applic Applic Applic Agricu Copy Agricu Casin	Manduld no own	ase en	Arm y for N Retired Arm y for N	s ma s ma ion-I	ndivi- year House	duals)	
Nationality a. Occupat Busin Gamb C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (ion (please please ion (please ion (pleas	Businese Grant Businese Busine	Money '): B CS - R 1 Cr tically Ex investmen 'rivate Sec SS Money ': B CS - R 1 Cr tically Ex	lender elow R 1 L ore > ossed Pers t is being t or Service lender elow R 1 L ore > ossed Pers	Pawn I ac F R 1 Cro on (PEP nade by : Pub Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac re P)	Other or Service Other of R	Co e Go Doctor rs [Pleases 5-10 Lac o a Politi orney ple Show Pr Co e Go Doctor rs [Pleases 5-10 Lac o a Politi orney ple Show Ary	oof to be untry of vernmen Forex especify! Solution of the best of the proof of the proof of the contry of vernmen Forex especify! Or oof to be untry of vernmen Forex especify! Or or oof to be untry of vernmen Forex especify!	enclo F Resident Servi Deale posed sh deta with haar n f appli enclo F Resident Servi Deale	dence F F F F F F F F F	Net- Net- Net- Net- Net- Net- Net- Net-	PAN PAN PAN PAN PAN PAN PAN PAN	No N	Agricu Casin Rupees Applic Applic Applic Applic Applic Agricu Copy Agricu Casin Agricu Applic Applic Applic Applic Applic	O Own (Mano uld no uld no uld no control uld no control uld no control uld no	ase en	Arm	on-I an 1	ndivion year House unufactor and iviewed to the second se	duals) ewife ewife tcturer duals)	
Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Addhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (BANK ACC	ion (please / less Nature o oling services	Businese Grant Businese Busine	Money '): B CS - R 1 Cr tically Ex investmen 'rivate Sec SS Money ': B CS - R 1 Cr tically Ex	lender elow R 1 L ore > ossed Pers t is being t or Service lender elow R 1 L ore > ossed Pers	Pawn I ac F R 1 Cro on (PEP nade by : Pub Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac re P)	Other or Service Other of R	Co e Go Doctor rs [Pleases 5-10 Lac o a Politi orney ple Shop Co e Go Doctor rs [Pleases 5-10 Lac o a Politi nes) (re	oof to be untry of vernmen Specially Expense furnithmere And Proof o oof to be untry of vernmen Forex specify SS OR ically Expense furnithmere And Proof o oof to be untry of vernmen Forex specify SS OR ically Expense for Institute of the untry of vernmen Forex specify SS OR ically Expense for Institute of the untry of vernmen Forex specify SS OR ically Expense for Institute of the untry of vernmen Forex specify SS OR ically Expense for Institute of the untry of vernmen Forex specify SS OR ically Expense for Institute of the untry of	enclo Resident Service Posed	Perso sed ('dence ice r 1 F Perso Addh Nun umbee ication osed ('dence ication osed ('perso Perso osed ('nece I I I I I I I I I I	Post in the second of the seco	PAN PAN Pessior Pessior Pessior PAN PAN PAN PAN PAN PAN PAN PA	No N	Agricu Casin Rupees Applid Applid Applid Applid Applid Copy Agricu Casin Applid Agricu Casin Applid Agricu Casin	O Own (Mano uld no	t Finer datory	Arm Regist	on-I	ndivide year House ndivide year	duals) eewife ecturer duals)	
Nationality a. Occupat Busin Gamb C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (ion (please / less Nature o oling services	Businese Grant Businese Busine	Money '): B CS - R 1 Cr tically Ex investmen 'rivate Sec SS Money ': B CS - R 1 Cr tically Ex	lender elow R 1 L ore > ossed Pers t is being t or Service lender elow R 1 L ore > ossed Pers	Pawn I ac F R 1 Cro on (PEP nade by : Pub Pawn I ac F R 1 Cro on (PEP	Broker R 1-5 Lac re P)	Other or Service Other of R	Co e Go Doctor rs [Pleases 5-10 Lac o a Politi orney ple Shop Co e Go Doctor rs [Pleases 5-10 Lac o a Politi nes) (re	oof to be untry of vernmen Forex especify! Solution of the best of the proof of the proof of the contry of vernmen Forex especify! Or oof to be untry of vernmen Forex especify! Or or oof to be untry of vernmen Forex especify!	enclo Resident Service Posed	Perso sed ('dence ice r 1 F Perso Addh Nun umbee ication osed ('dence ication osed ('perso Perso osed ('nece I I I I I I I I I I	Post in the second of the seco	PAN PAN Pessior Pessior Pessior PAN PAN PAN PAN PAN PAN PAN PA	No N	Agricu Casin Rupees Applid Applid Applid Applid Applid Copy Agricu Casin Applid Agricu Casin Applid Agricu Casin	O Own (Mano uld no	t Finer datory	Arm Regist	on-I	ndivide year House ndivide year	duals) ewife ewife tcturer duals)	
Nationality a. Occupat Busin Gamb C. Others (POA HOLDE NAME^ Mr M Date of Birth Addhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb C. Others (BANK ACC Core Banking A Bank Name Branch Address MICR Code Please also prov	ion (please / less Nature o bling services nnual Income 25 Lacs please /) : ER DETAILS latory)	Busines Bus	Money '): Ecs - R 1 Cr tically Ex investmen Trivate Sec S Money '): Ecs - R 1 Cr tically Ex trivate Sec (MAND	lender elow R 1 L ore soosed Pers t is being r or Service lender elow R 1 L ore soosed Pers ATORY RTGS IFS	Pawn I ac FR 1 Cro on (PEP made by : Pub Pawn I ac FR 1 Cro on (PEP make by : Pub Pawn I ac FR 1 Cro on (PEP make per ma	Broker R 1-5 Lacre P) Fa Constitution R Including Sectors R Includ	Othe Othe Othe Othe Othe Othe Othe Othe	Co e GoDoctor rs [Please 5-10 Lac o a Politi orney ple Shop Pr Co e Go Doctor FS FI Co a Politi orney ple A/c	oof to be untry of vernmen Forex proof to be untry of vernmen and material materials. See a specify of the untry of vernmen Forex proof to be untry of the vernmen Forex pr	encloo F Resident Service posed sh deta with fication F Resident encloo F Resident beautiful posed control f applia encloo f Resident d about d about d about f applia f	seed (dence F F F F F F F F F	Professional Profe	PAN essior wort EP) holder (KIN) PAN essior ESSIOR (KIN) PAN essior Sessior Wort Sav	hin F Net-w No No State of the	Agricu Casin Rupees Tapplic Applic Applic Applic Applic Copy Agricu Casin NRe Bank NRe	Manduld no able : Ples aaar	datory asse el I I I I I I I I I I I I I I I I I I I	Arm General Arm Grown of the control of the contr	s ma s ma fon-I an 1 fon-I an 1 * F	House and view on device o	ewife ewife tuturer duals)	S
Nationality a. Occupat Busin Gamb C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Busin Gross Ar R 10- C. Others (BANK ACC Core Banking A Bank Name Branch Address MICR Code	ion (please / less Nature o bling services nnual Income 25 Lacs please /) : ER DETAILS latory)	Busines Bus	Money '): Ecs - R 1 Cr tically Ex investmen Trivate Sec S Money '): Ecs - R 1 Cr tically Ex trivate Sec (MAND	lender elow R 1 L ore soosed Pers t is being r or Service lender elow R 1 L ore soosed Pers ATORY RTGS IFS	Pawn I ac FR 1 Cro on (PEP made by : Pub Pawn I ac FR 1 Cro on (PEP make by : Pub Pawn I ac FR 1 Cro on (PEP make per ma	Broker R 1-5 Lacre P) Fa Constitution R Including Sectors R Includ	Othe Othe Othe Othe Othe Othe Othe Othe	Co e GoDoctor rs [Please 5-10 Lac o a Politi orney ple Shop Pr Co e Go Doctor FS FI Co a Politi orney ple A/c	oof to be untry of vernmen Forex proof to be untry of vernmen and material materials. See a specify of the untry of vernmen Forex proof to be untry of the vernmen Forex pr	encloo F Resident Service posed sh deta with fication F Resident encloo F Resident beautiful posed control fication for application f	seed (dence F F F F F F F F F	Professional Profe	PAN essior wort EP) holder (KIN) PAN essior Explication Explication Explication Explication Explication Section Sec	hin F Net-w No No State of the	Agricu Casin Rupees Tapplic Applic Applic Applic Applic Copy Agricu Casin NRe Bank NRe	Manduld no able : Ples aaar	datory asse el I I I I I I I I I I I I I I I I I I I	Arm y for N lolder th Retired Arm y for N Retired Arm y for N Regist	on-I an 1	House on device year	ewife ewife cturer duals) RI Inv	S
Nationality a. Occupat Busin Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (BANK ACC Core Banking A Bank Name Branch Address MICR Code Please also prov the amount to y	ion (please / less Nature o oling services	Busines Bus	Money '): Ecs - R 1 Cr tically Ex investmen Trivate Sec S Money '): Ecs - R 1 Cr tically Ex trivate Sec (MAND	lender elow R 1 L ore soosed Pers t is being r or Service lender elow R 1 L ore soosed Pers ATORY RTGS IFS	Pawn I ac FR 1 Cro on (PEP made by : Pub Pawn I ac FR 1 Cro on (PEP make by : Pub Pawn I ac FR 1 Cro on (PEP make per ma	Broker R 1-5 Lacre P) Fa Constitution R Including Sectors R Includ	Othe Othe Othe Othe Othe Othe Othe Othe	Co e GoDoctor rs [Please 5-10 Lac o a Politi orney ple Shop Pr Co e Go Doctor FS FI Co a Politi orney ple A/c	oof to be untry of vernmen Forex proof to be untry of vernmen and material materials. See a specify the control of the untry of vernmen Forex proof to be un	encloo F Resident Service posed sh deta with fication F Resident encloo F Resident beautiful posed control fication for application f	seed (dence F F F F F F F F F	Professional Profe	PAN essior wort EP) holder (KIN) PAN essior Explication Explication Explication Explication Explication Section Sec	hin F Net-w No No State of the	Agricu Casin Rupees Tapplic Applic Applic Applic Applic Copy Agricu Casin NRe Bank NRe	Manduld no able : Ples aaar	datory asse el I I I I I I I I I I I I I I I I I I I	Arm y for N lolder th Retired Arm y for N Retired Arm y for N Regist	on-I an 1	House on device year	ewife ewife tuturer duals)	S
Nationality a. Occupat Busin Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gross Ar R 10- C. Others (BANK ACC Core Banking A Bank Name Branch Address MICR Code Please also provide amount to y LLL US A	ion (please less Nature of the please Na	Busines (please (please	Money Money Money	lender elow R 1 L ore soosed Pers t is being r or Service lender elow R 1 L ore soosed Pers ATORY RTGS IFS same bank nically.	Pawn I ac FR 1 Cro on (PEP made by : Pub Pawn I ac FR 1 Cro on (PEP make by : Pub Pawn I ac FR 1 Cro on (PEP make per ma	Broker R 1-5 Lacre P) Fa Constitution R Including Sectors R Includ	Othe Othe Othe Othe Othe Othe Othe Othe	Co e GoDoctor rs [Please 5-10 Lac o a Politi orney ple Shop Pr Co e Go Doctor FS FI Co a Politi orney ple A/c	oof to be untry of vernmen Forex proof to be untry of vernmen and material materials. See a specify the control of the untry of vernmen Forex proof to be un	encloo F Resident Service posed sh deta with fication F Resident encloo F Resident beautiful posed control fication for application f	seed (dence F F F F F F F F F	Professional Profe	PAN essior wort EP) holder (KIN) PAN essior Explication Explication Explication Explication Explication Section Sec	hin F Net-w No No State of the	Agricu Casin Rupees Tapplic Applic Applic Applic Applic Copy Agricu Casin NRe Bank NRe	Manduld no able : Ples aaar	datory asse el I I I I I I I I I I I I I I I I I I I	Arm y for N lolder th Retired Arm y for N Retired Arm y for N Regist	on-I an 1	House on device year	ewife ewife cturer duals) RI Inv	S
Nationality a. Occupat Busin Gross Ar R 10- C. Others (POA HOLDE NAME^ Mr M Date of Birth Aadhaar Num PAN** (Mand Nationality a. Occupat Busin Gamb b. Gross Ar R 10- C. Others (BANK ACC Core Banking A Bank Name Branch Address MICR Code Please also prov the amount to y	ion (please less Nature of oling services	Busines R 25 La Poli (If the Busines R 25 La Poli Toll R 25 La Poli Checked R 25 La R 25 La Poli Checked R 25 La	Money Y: Ess - R 1 Cr tically Ex investmen Y Y Y Arrivate Sec SS Money Y: Ess - R 1 Cr tically Ex Checker Sec Money Checker Sec CE CENTR	lender elow R 1 L ore > oosed Pers t is being r or Service lender elow R 1 L ore > oosed Pers ATORY RTGS IF: same bank nically.	Pawn I ac F R 1 Cro on (PEP made by ac Pub Pawn I ac F R 1 Cro on (PEP made by ac F R 1 Cro on (PEP mas per mas per mas per	Broker R 1-5 Lac re D) Fa Constit Clic Sector R 1-5 Lac re SEBI For Fa as menti	Othe Othe Othe Othe Othe Othe Othe Othe	Co e Go Doctor rs [Pleases 5-10 Lac o a Politi orney ple Shop Co e Go Doctor RY W Pr Co o a Politi nes) (re A/c	oof to be untry of vernmen Forex especify! C Identifihere Aad Proof o oof to be untry of vernmen Forex especify! Solution of the proof o oof to be untry of vernmen Forex especify! Type (**)	enclo Resident Servit Deale posed sh deta with fication F Resident F appli enclo En	seed (dence ice ica ice	Prof Mone Net-R In (PE PoA I Prof Mone Net-R In (PE R In (PE	PAN Pessior Pessior (KIN) Possior	h in F Net-ween a a nonent of Not-ween a long to the control of th	Agricu Casin Rupees Orth sho Applic Applic Applic Applic Applic Applic Agricu Casin Applic Bank NRO	Manauld no able : Ple: aaar Manauld no able Common to the common to	t F NRI	Arm y for N lolder th Regist Regist Regist Arm y for N Regist Regist Regist	s ma fon-I an 1 s ma fon-I an 1 T plica	House and view of the second o	ewife cturer duals) RI Inv	S S S S S S S S S S S S S S S S S S S

Contact us at hsbcmf@camsonline.com

Visit us at www.assetmanagement.hsbc.com/in.

TOLL FREE NUMBER: 1800 200 2434 (can be dialled from all phones within India) AND Investors calling from abroad may call on - + 91 44 39923900 to connect to our customer care centre.

INVESTIVIE					
Scheme (✓) Plan		HMS-Growth	HMS - Moder	HDF HEMF HBF ate idend Reinvestment** Dividend	
					** Not applicable in case of HTS
The scheme name	e mentioned on the application for	m and the cheque has to	be the same. In case of any discrepancy bet	ween the two, units will be allotted as per the sc	heme name mentioned on the application only
First SIP Che	que/DD Details :	MENT PLAN (F Cheque/DD No.		aring) (Please fill up SIP Auto Debit I Cheque/DD Date	
Drawn on Ban	ık A/c. No.		Bank Nam	e & Branch	
MICRO SIP	(Refer Note No. 4C on page	e 26) Date of Birt	th DDMMYYYYY Suppor	ting	Reference No.
For the permissi	ible list of applicable documents	please refer to Page 2	Docun	ent type	if available)
B) ONE	TIME LUMPSUM INVI	ESTMENT (Pleas	e fill the details hereunder. Do not	submit SIP Auto Debit Form)	
Payment Mode	e Cheque I	DD RTGS N	EFT Fund Transfer Cheque/RTC	SS/NEFT/DD/FT Date D D M M	Y Y Y Y
Cheque/DD/R	TGS/NEFT No.			om Bank A/c. No.	'
1 1	mount (Rs.) (i)		-		
			Bank Nam		
DD charges (F			Branch		
Total Amount	(Rs.) (i + ii)		A/c. Type (✓) ☐ Curre	nt Savings NRO* NRE* FCNR	Others(* For NRI Investors)
MANDATOR If no, my relat the Third Part	AY DECLARATION: The ditionship with the bank accounty declaration form is attached	details of the bank a nt holder (✓) ☐ Pa d (Refer important	ccount provided above pertain to my trent Grandparent Employee instruction No. 11 on the Third Part	<u> </u>	e No. Please specify); and
☐ C) SIP : S	SYSTEMATIC INVEST	MENT PLAN [F	For SIP through Post Dated Ch	eques (PDCs)] (All cheques should be	e of same date of the months/quarters)
First SIP Che	que Details :		Drawn on	Bank A/c. No.	
Cheque No.			Bank Nam	e	
Cheque Date		Y Y Y Y	Branch		
SIP Date (✓)	Monthly (Default^):	3rd 10th (Defa	ault^) 🗌 17th 🗌 26th 🔲 30th ## 🔲 A		st Business Day of the month for February er instruction 4b(f)
SIP Period	Start Date M M	Y Y End Date	M M Y Y March 2025 (5 6 1.44)	fer instruction 4b(g)
Each SIP Amo	ount (Rs.)		Cheque Nos. From	То	
Drawn on B	Sank A/c.		Bank	Branch	
DEMAT AC	COUNT DETAILS				
Please ensure	that unit holders are given			to account statement as per current	practice and the sequence of names
Please ensure		tches with the Dep			•
Please ensure	that unit holders are given			to account statement as per current	•
Please ensure	that unit holders are given	tches with the Dep			•
Please ensure as mentioned DP Name	that unit holders are given in the application form man	tches with the Dep		CD	•
Please ensure as mentioned DP Name DP ID	that unit holders are given in the application form mat	tches with the Dep			•
Please ensure as mentioned DP Name	that unit holders are given in the application form mat	tches with the Dep		CD	•
Please ensure as mentioned DP Name DP ID Beneficiary Ac	that unit holders are given in the application form materials and the application form materials are given in the application form materials are given materials.	NSDL	ository Participant.	CD	SL
Please ensure as mentioned DP Name DP ID Beneficiary Ac	that unit holders are given in the application form man	NSDL (Mandatory for	ository Participant. new Folios of Individuals whe	CD	SL vho do not wish to nominate)
Please ensure as mentioned DP Name DP ID Beneficiary Ac	that unit holders are given in the application form man	NSDL (Mandatory for	ository Participant. new Folios of Individuals whe	CD	SL vho do not wish to nominate)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/	that unit holders are given in the application form man	NSDL (Mandatory for	ository Participant. new Folios of Individuals whe	CD	SL vho do not wish to nominate)
Please ensure as mentioned DP Name DP ID Beneficiary Ac	that unit holders are given in the application form man I N ccount No. ITION TO NOMINATE We hereby confirm that	NSDL (Mandatory for I/We do not wis	new Folios of Individuals whe	re mode of holding is single and varion in respect of units subscrib	SL who do not wish to nominate) bed/purchased by me/us.
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/	that unit holders are given in the application form man I N ccount No. ITION TO NOMINATE We hereby confirm that	NSDL (Mandatory for	new Folios of Individuals whe	re mode of holding is single and varion in respect of units subscrib	SL vho do not wish to nominate)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/	that unit holders are given in the application form man I N ccount No. ITION TO NOMINATE We hereby confirm that	NSDL (Mandatory for I/We do not wis	new Folios of Individuals whe	re mode of holding is single and varion in respect of units subscrib	SL who do not wish to nominate) bed/purchased by me/us.
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s)	that unit holders are given in the application form man I N	NSDL (Mandatory for I/We do not wis	new Folios of Individuals whe	re mode of holding is single and vacation in respect of units subscrib	who do not wish to nominate) wed/purchased by me/us. Third Applicant
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ I/ Signature(s)	that unit holders are given in the application form man I N	NSDL (Mandatory for I/We do not wis	new Folios of Individuals whe h to exercise the right of nominal Second A	re mode of holding is single and value in respect of units subscrib	who do not wish to nominate) wed/purchased by me/us. Third Applicant
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ ☐ I/ Signature(s) NOMINATI I/We	that unit holders are given in the application form man in the application form that it is sole/Fin in the application form man in the applica	(Mandatory for I/We do not wis	new Folios of Individuals wheeh to exercise the right of nominates of Individuals where mode of the second A or	re mode of holding is single and varion in respect of units subscrib	SL who do not wish to nominate) bed/purchased by me/us. Third Applicant (ref. Important Instruction 15)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ ☐ I/ Signature(s) NOMINATI I/We	that unit holders are given in the application form man I N	(Mandatory for I/We do not wis	new Folios of Individuals wheeh to exercise the right of nominates of Individuals where mode of the second A or	re mode of holding is single and value in respect of units subscrib	SL who do not wish to nominate) bed/purchased by me/us. Third Applicant (ref. Important Instruction 15)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and and	that unit holders are given in the application form man in the application form that it is sole/Fin in the application form man in the applica	(Mandatory for I/We do not wis ory for new Folio older 1)	new Folios of Individuals whee h to exercise the right of nomin Second A OR os of Individuals where mode of the control of t	re mode of holding is single and value in respect of units subscribe policant f holding is single) (Unit holder 2) minate the person(s) more particularly	SL who do not wish to nominate) bed/purchased by me/us. Third Applicant (ref. Important Instruction 15)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form many that the application form that the application form many that the application form the appli	(Mandatory for I/We do not wis ory for new Folio older 1) day of day of	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units in respect of the Units units in second the second and the	re mode of holding is single and vertical in respect of units subscribe population in respect of units subscribe population (Unit holder 2) (Unit holder 2) der Folio No.	who do not wish to nominate) who do not wish to nominate) wed/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the (*strike out which is not applicable)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form man in the application form that in the application form man in the application form in the application form man in th	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) who do not wish to nominate) wed/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the _ (*strike out which is not applicable) Proportion (%) in which the
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form many that the application form that the application form many that the application form the appli	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units in respect of the Units units in second the second and the	re mode of holding is single and vertical in respect of units subscribe population in respect of units subscribe population (Unit holder 2) (Unit holder 2) der Folio No.	who do not wish to nominate) who do not wish to nominate) wed/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the (*strike out which is not applicable)
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form many that the application form that the application form many that the application form	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the(*strike out which is not applicable) Proportion (%) in which the units will be shared by each
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form man in the application form that in the application form that application for the application form man in the applicat	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the(*strike out which is not applicable) Proportion (%) in which the units will be shared by each
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form that the application form that the application form many that the applic	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the(*strike out which is not applicable) Proportion (%) in which the units will be shared by each
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form many that the application form that the application form many that the application form	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the (*strike out which is not applicable) Proportion (%) in which the units will be shared by each
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form that the application form that the application form many that the applic	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the (*strike out which is not applicable) Proportion (%) in which the units will be shared by each
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form that the application form that the application form many that the applic	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the(*strike out which is not applicable) Proportion (%) in which the units will be shared by each
Please ensure as mentioned DP Name DP ID Beneficiary Ac NON-INTEN Please ✓ □ I/ Signature(s) NOMINATI I/We and nomination m	that unit holders are given in the application form many that the application form many that the application form that the application form many that the application form man	(Mandatory for I/We do not wis older 1) day of Date of Birth	new Folios of Individuals whee h to exercise the right of nominal Second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where mode of the Units units and the second A OR os of Individuals where Mode of Indi	re mode of holding is single and variation in respect of units subscribe pplicant f holding is single) (Unit holder 2) minate the person(s) more particularly der Folio No. Signature of Nominee / Guardian	who do not wish to nominate) ped/purchased by me/us. Third Applicant (ref. Important Instruction 15) described hereunder/and*/cancel the (*strike out which is not applicable) Proportion (%) in which the units will be shared by each

CONFIRMATION UNDER THE FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) AND COMMON REPORTING STANDARD (CRS) [Mandatory for all investors including Unit holder (Guardian in case of minor), Joint holder(s) and POA Holder] FATCA / CRS SELF CERTIFICATION FOR INDIVIDUAL INVESTORS (INDIVIDUAL / NRI / HUF / ON BEHALF OF MINOR / PROPRIETORSHIP FIRM) Sole / First Applicant Guardian Second Applicant **Third Applicant** Place and Country of Birth Place Place Place Country _ Country _ Country _ Address Type Residential Business Residential Business Residential Business [for KYC address] Registered Office Registered Office Registered Office Tax Resident (i.e. are you assessed for Tax) in any Yes No Yes Yes No country other than India? If 'Yes' please fill for all countries (other than India) in which you are a Resident for tax purpose i.e. where you are Citizen / Resident / Green Card Holder / Tax Resident in the respective countries Country of Tax Residency# Tax Identification Number (TIN) or Functional Equivalent Identification Type (TIN or Other, please specify) If TIN is not available, please □ B __ C __ C \Box C __ A __ A __ A В ___ B tick ✓ the reason A, B or C [as defined below] Reason A - The country where the Account Holder is liable to pay tax does not issue TIN to its residents. Reason B - No TIN required [Select this reason only for the authorities of the respective country of tax residence do not required the TIN to be collected] Reason C - Others - Please specify the reason # To also include USA, where the individual is a citizen / green card holder of USA. ^ In case Tax Identification Number is not available, kindly provide its functional equivalent. FATCA / CRS SELF CERTIFICATION FOR NON-INDIVIDUAL INVESTORS AND THEIR ULTIMATE BENEFICIAL OWNER (UBO) (COMPANY / TRUST / SOCIETY / PARTNERSHIP FIRM etc.) Please complete Annexure A & B 11 DECLARATION AND SIGNATURES (In case of joint holding, signatures of all unit holders are mandatory) FATCA / CRS DECLARATION I acknowledge and confirm that the information provided with respect to FATCA / CRS is true and correct to the best of my knowledge and belief. I certify that I am the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I am aware that I will be responsible for it. I authorize the Fund to update its records from the FATCA / CRS information provided by me and received by the Fund from other SEBI Registered Intermediaries. Further, I authorize the Fund to share the given information provided by me to the Fund with other SEBI Registered Intermediaries to facilitate single submission / updation. I also undertake to keep the Fund informed in writing about any changes / modification / updation to the above information in future and also undertake to provide any other additional information as may be required at the Fund's end and/or by the domestic tax authorities. I authorize the Fund / AMC / RTA to close or suspend my account(s) under intimation to me for non-submission of documentation. CONSENT FOR UPDATION AND VALIDATION OF AADHAAR I/We hereby provide my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I/We hereby provide my/our consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios. Having read and understood the contents of the Scheme Information Document, Key Information Document, Statement of Additional Information and Addenda of the Scheme(s) issued till date, I / We hereby apply to the Trustees of HSBC Mutual Fund for units of the relevant Scheme and agree to abide by the terms, conditions, rules and regulations of the Scheme and the above mentioned documents of HSBC Mutual Fund. I / We hereby authorise HSBC Mutual Fund, the AMC and its Agents to disclose my / our details including investment details to my / our bank(s) / HSBC Mutual Fund's Bank(s) and / or Distributor / Broker / Investment Advisor and to verify my / our bank details provided by me / us, or to disclose to such other service providers as deemed necessary for conduct of business. I / We express my / our willingness to make payments referred above through participation in ECS / Direct Debit Facility. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I / We would not hold the Fund, the AMC, its service providers or representatives responsible. I / We will also inform the AMC, about any changes in my / our bank account. I / We have read and agreed to the terms and conditions for ECS / Direct Debit. I/We confirm that I am / we are Non-Residents of Indian Nationality / Origin and that the funds are remitted from abroad through approved banking channels or from my our NRE / NRO / FCNR Account (Applicable to NRI). I/We confirm that the details provided by me/us are true and correct. I/We hereby declare that the amount being invested by me/us in the Scheme(s) is through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any other applicable laws or Notifications issued by any governmental or statutory authority from time to time. I / We acknowledge that the AMC has not considered my / our tax position in particular and that I / we should seek tax advice on the specific tax implications arising out of my / our participation in the Scheme. I / We have understood the details of the Scheme and I / We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We confirm that the ARN holder has disclosed to me / us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me / us. I / We confirm that I / We do not have any existing Micro SIP investments which together with the current application will result in aggregate investments exceeding Rs. 50,000/- in a year. (Applicable for Micro SIP investments only). I/We confirm that I am / We are not United States person(s) under the laws of United States or resident(s) of Canada. Incase of change to this status, I/We shall notify the AMC, in which event the AMC reserves the right to redeem my / our investments in the Scheme(s).

Sole / First Applicant / Guardian / PoA

Second Applicant / PoA

Third Applicant / PoA

Date

We confirm that we have not issued any bearer shares or share warrants. We also confirm that we will inform the AMC if bearer shares or share warrants are