## Common Application Form - Lumpsum Cum SIP Application Form (Form 1)



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		Agricultu		Forex Dealer	✓ nature of goods/ servic	es dealt in)		
	Other				Any other inform			
Address	of tax residence w	ould be tak	en as availabl	e in KRA database	. In case of any change	e please a	pproach KRA &	notify the changes
Type of a	address given at KI	🗛 🗌 Res	idential or Bus	siness 🗌 Residenti	al 🗌 Business 🗌 F	Registered	Office	
Permissi	ble documents are	Passpor	t 🗌 Election ID	🖸 Card 🗌 PAN Card	Govt. ID Card Driv	ving Licens	se 🗌 UIDAI Card	NREGA Job Card Others Spec
							1.1.11.5	
Are you	FATCA Compliant	with CAM	S Registrar (Ple	ease ✓ any one)	Yes No (if no, ple	ase fill belov	v details)	
-	I FATCA Compliant				Yes No (if no, ple			e all countries in which you are resident fo
Are yo	ou a tax resident	of any co	untry other t	than India?	Yes No	(lf y tax	es, please indicate purposes and the	all countries in which you are resident for associated Tax ID Numbers below.)
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Are yo Sr. No.	ou a tax resident	of any co	untry other t Tax Identi	than India?	Yes No	(If y tax	es, please indicate purposes and the If TIN is no A, B or C	ot available (Please tick ✓ the reason (Refer FATCA / CRS Instructions))
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## SIP DETAILS (Please fill in IDFC OTM available on previous page)

Nominee 2

		nthly date*	Installment Amount		From					To Date									
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I		D		D	D	Μ	Μ	Y	Y	D	D	Μ	Μ	Y	Y			Half Yearly	/ Yearly
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*In case of th	ne Mo	nthly O	ption if no date is selected in the form, the de	efault da	te is	10 <sup>th</sup> (	of ev	ery n	nont	h. <sup>%</sup> Tl	ne To	p-up	o am	ount	shou	uld be R	s. 500 and m	ultiples of Rs. 500	) thereafter).
8 NOMI	NAT	ION	DETAILS Individuals (single or joint	applica	ants	) are	adv	vised	d to	avai	l No	min	atio	n fa	cility	/.	Witness	Name	Signature
I/We w	ish to	o nom	inate.																
I/We D		DT wis	h to nominate and sign here	1st A	ppli	cant	sigi	natu	re (	man	date	ory)							
		Nominee Name & Address					In case of Minor									Allocation	Relationship		
			Nominee Name & Address	G	uar	dian	Nar	ne 8	k Ad	dres	s		D	ate	of bi	irth	%	with Investor	Guardian sign
Nominee	1											D	D	MM	IY	YYY	·		

## 9 DECLARATION & SIGNATURES (Please refer to the Instruction No. K)

1. I/We have read and understood the terms and features of the scheme(s), associated risk factors, contents of the Statement of Additional Information (SAI) of IDFC Mutual Fund, Scheme Information Document (SID) and Key Information Memorandum (KIM) of the scheme(s) and the Addenda issued till date. I/we hereby apply for the units of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations governing the Scheme(s). I/ We hereby declare that the amount invested in the Scheme(s) legally belongs to me/us and is acquired through legitimate sources only, and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the Taxation Laws, Anti Money Laundering Laws, Anti-Corruption Laws or any other laws as applicable to me/us from time to time. I/We am/are eligible investor(s) as per the scheme related documents and am/are authorised as per the Constitutive documents/ authorisation(s) and have not been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We further confirm that I am not /we are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any judicial or regulatory authority. 2. In the event "Know Your Customer" process is not completed by me / us of such redemption subject to applicable exit load and undertake such other action with such funds that may be required by the Law. 3. I / We have understood the information requirements of this Form (read along with the FATCA, Additional KYC & CRS Instructions). I/We hereby acknowledge and confirm that the information provided above is/are true, correct and complete to the best of such redeby authorise you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me / us. Sincluding all changes, updates to such information as and when provide were were the valuatory or regulatory authorities without any obligation of advising me/us of the same. 4. The ARN holder has

□ I/We hereby confirm that, I/We have read and understood the Privacy Policy hosted on www.idfcmf.com. I/ We hereby consent IDFC AMC/IDFC MF/Trustee to share information (including sensitive personal data or information) provided in relation to our Investment in IDFC MF to any Associate / Group company / Affiliate of IDFC AMC/IDFC MF / Trustee, for offering, marketing or solicitation of their products and services.

First / Sole Applicant / Guardian / Authorised Signatory	Second Applicant	Third Applicant	POA Holder	Date	
Authonsed Signatory				Place	