

Additional Details Required* (Mandatory only if above option (5) is ticked)

Country of Jurisdiction of Residence*											Country Code of Jurisdiction of Residence			as per ISO 3166
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[illegible]

Place / City of Birth*	Country of Birth*	Country Code	as per ISO 3166
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[illegible]

City / Town / Village* [] [] [] [] [] [] [] [] District* [] [] [] [] [] [] [] Pin Code* [] [] [] []
 State/UT* [] [] [] [] [] [] [] [] State/UT Code [] [] Country* [] [] [] [] [] [] Country Code [] []
as per Indian Motor Vehicle Act, 1988 as per ISO 3166

6 Details of Related Person (Optional) (please refer instruction G at the end) (in case of additional related persons, please fill 'Annexure B1')

☐ Related Person ☐ Deletion of Related Person KYC Number of Related Person (if available*)

Related Person Type* ☐ Guardian of Minor ☐ Assignee ☐ Authorized Representative

Prefix				F	I	R	S	T							M	I	D	D	L	E									L	A	S	T
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(If KYC number and name are provided, below details of section 6 are optional)

☐ Proof of Identity [PoI] of Related Person* (Please see instruction (H) at the end)

(Certified copy of any one of the following Proof of Identity[Pol] needs to be submitted)

Passport Number									Passport Expiry Date	D	D	M	M	Y	Y	Y	Y
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Voter ID Card		Aadhaar Card	
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Pan Card									
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Driving Licence									Driving Licence Expiry Date	D	D	M	M	Y	Y	Y	Y
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[illegible][illegible]

7 Remarks (If any)

8 Applicant Declaration

- I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby declare that I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date D D M M Y Y Y Y Place

Signature / Thumb Impression of Applicant

9 Attestation / For Office Use Only

Documents Received ☐ Certified Copies

KYC Verification Carried Out by (Refer Instruction I)

Date	D	D	M	M	Y	Y	Y	Y
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[illegible][illegible][illegible]

Institution Details

[illegible][illegible][illegible]

In-Person Verification (IPV) Carried Out by (Refer Instruction J)

Date	D	D	M	M	Y	Y	Y	Y
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[illegible][illegible][illegible]

Institution Details

Name _____

[illegible][illegible]

1 First / Sole Applicant / Guardian

[illegible]

Country ^f	Tax Identification Number ^g	Identification Type (TIN or Other, please specify)

*To also include USA, where the individual is a citizen / green card holder of The USA | *In case Tax Identification Number is not available, kindly provide its functional equivalent \$

2 Second Applicant

Name	F I R S T	M I D D L E	L A S T
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
Father's Name	F I R S T	M I D D L E	L A S T
PAN	Customer ID/ Folio NO		
Occupation	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others <input type="text" value="Specify"/>		
<i>Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes</i>			
Type of address given at KRA	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office		
Permissible documents are	<input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others <input type="text" value="Specify"/>		
Date of Birth	DDMMYYYY	Place of Birth	Country of Birth
Are you a tax resident of any country other than India? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Country [†]	Tax Identification Number [‡]	Identification Type (TIN or Other, please specify)

[#]To also include USA, where the individual is a citizen / green card holder of The USA | [%]In case Tax Identification Number is not available, kindly provide its functional equivalent \$

3 Third Applicant

Name	F I R S T	M I D D L E	L A S T
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
Father's Name	F I R S T	M I D D L E	L A S T
PAN	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> XXXXXX XXXX </div>		
Occupation	<input type="checkbox"/> Service <input type="checkbox"/> Business <input type="checkbox"/> Others <u>Specify</u>		
<i>Address of tax residence would be taken as available in KRA database. In case of any change please approach KRA & notify the changes</i>			
Type of address given at KRA	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office		
Permissible documents are	<input type="checkbox"/> Passport <input type="checkbox"/> Election ID Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Govt. ID Card <input type="checkbox"/> Driving License <input type="checkbox"/> UIDAI Card <input type="checkbox"/> NREGA Job Card <input type="checkbox"/> Others <u>Specify</u>		
Date of Birth	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center;"> DD MM YY YY </div>	Place of Birth	<div style="border: 1px solid black; width: 150px; height: 20px; display: flex; align-items: center; justify-content: center;"> XXXXXXXXXX </div>
		Country of Birth	<div style="border: 1px solid black; width: 150px; height: 20px; display: flex; align-items: center; justify-content: center;"> XXXXXXXXXX </div>
Are you a tax resident of any country other than India?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Country [†]	Tax Identification Number [‡]	Identification Type (TIN or Other, please specify)

*To also include USA, where the individual is a citizen / green card holder of The USA | %In case Tax Identification Number is not available, kindly provide its functional equivalent \$

4 Certification

I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
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Place _____

Date _____

5 FATCA & CRS Terms & Conditions

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian Financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with Motilal Oswal Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

6 FATCA & CRS Instructions

If you have any questions about your tax residency, please contact your tax advisor. If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number.

*It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS indicia
U.S. place of birth	1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship (refer list below);AND 3. Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/ mailing address in a country other than India	1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below)
Telephone number in a country other than India	If no Indian telephone number is provided 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below) If Indian telephone number is provided along with a foreign country telephone number 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR 2. Documentary evidence (refer list below)
Telephone number in a country other than India	1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence (refer list below)

List of acceptable documentary evidence needed to establish the residence(s) for tax purposes

1. Certificate of residence issued by an authorized government body*
2. Valid identification issued by an authorized government body* (e.g. Passport, National Identity card, etc.)

* Government or agency thereof or a municipality of the country or territory in which the payee claims to be a resident.



Motilal Oswal Asset Management Company Limited
10th Floor, Motilal Oswal Tower, Rahimtullah Sayani Road,
Opposite Parel ST Depot, Prabhadevi, Mumbai - 400025
Email: mfservice@motilaloswal.com. Toll Free No.: 1800-200-6626
website: www.motilaloswalmf.com

Aadhaar linking form for Individual

Please fill in your details below:

South Gujarat ARN: 54854

☐ Investors ☐ POA ☐ Guardian

First Holder Name

PAN/PEKRN/CKIN Aadhaar No.

Second Holder Name

PAN/PEKRN/CKIN Aadhaar No.

Third Holder Name

PAN/PEKRN/CKIN Aadhaar No.

POA Name

PAN/PEKRN/CKIN Aadhaar No.

Guardian Name

PAN/PEKRN/CKIN Aadhaar No.

Consent

I / We hereby provide my / our consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (ii) updating my/our Aadhaar number(s) in accordance with / our consent for sharing / disclose of the Aadhaar number(s) including demographic with the Aadhaar Act, 2016 (and regulations made there under) and PMLA. I / We hereby provide information to Motilal Oswal Asset Management Company Limited. and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my / our folios with my / our PAN.

Date

Place

Signature:

First Holder /POA/Gaurdian

Second Holder

Third Holder

Please submit the form duly filled, signed, for all the holders and submit at your nearest Karvy Computershare Pvt. Ltd. or at any of AMC branch

ACKNOWLEDGEMENT

PAN

Date

From Mr/Mrs/Ms:

Acknowledgment by Karvy Branch Official /
AMC Branch Official

Received subject to verification with UIDAI and seeding the Aadhaar for your Mutual Fund Investments.