



E) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.

F) List of two character ISO 3166 country codes is available at the end.

G) KYC number of applicant is mandatory for update application.

H) For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

[illegible]

☐ 4.2 CORRESPONDENCE / LOCAL ADDRESS DETAILS \* (Please see instruction E at the end)

☐ Same as Current / Permanent / Overseas Address details (In case of multiple correspondence / local addresses, please fill 'Annexure A1')

Line 1*																								
Line 2																								
Line 3																								
District*							Pin / Post Code*					State / U.T Code*			ISO 3166 Country Code*									

☐ 4.3 ADDRESS IN THE JURISDICTION DETAILS WHERE APPLICANT IS RESIDENT OUTSIDE INDIA FOR TAX PURPOSES\* (Applicable if section 2 is ticked)

☐ Same as Current / Permanent / Overseas Address details

☐ Same as Correspondence / Local Address details

Line 1*																								
Line 2																								
Line 3																								
State*							ZIP / Post Code*					ISO 3166 Country Code*												

☐ 5. CONTACT DETAILS (All communications will be sent on provided Mobile no. / Email-ID) (Please refer instruction F at the end)

Tel. (Off)							Tel. (Res)							Mobile							
FAX							Email ID														

☐ 6. DETAILS OF RELATED PERSON (In case of additional related persons, please fill 'Annexure B1') (please refer instruction G at the end)

☐ Addition of Related Person

☐ Deletion of Related Person

KYC Number of Related Person (if available\*)

Related Person Type\*

☐ Guardian of Minor

☐ Assignee

☐ Authorized Representative

Prefix

First Name

Middle Name

Last Name

Name*																				
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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)

<input type="checkbox"/> A- Passport Number							Passport Expiry Date						
<input type="checkbox"/> B- Voter ID Card													
<input type="checkbox"/> C- PAN Card													
<input type="checkbox"/> D- Driving Licence							Driving Licence Expiry Date						
<input type="checkbox"/> E- UID (Aadhaar)													
<input type="checkbox"/> F- NREGA Job Card													
<input type="checkbox"/> Z- Others (any document notified by the central government)							Identification Number						
<input type="checkbox"/> S- Simplified Measures Account - Document Type code			Identification Number										

☐ 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.

[Signature / Thumb Impression]

- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.

Date : DD - MM - YYYY

Place :

Signature / Thumb Impression of Applicant

9. ATTESTATION / FOR OFFICE USE ONLY

Documents Received

☐ Certified Copies

KYC VERIFICATION CARRIED OUT BY

Date						
Emp. Name						
Emp. Code						
Emp. Designation						
Emp. Branch						

[Employee Signature]

INSTITUTION DETAILS

Name														
Code														

[Institution Stamp]

CONFIRMATION UNDER THE FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) FOR DETERMINING U.S. PERSONS STATUS – MANDATORY FOR ALL INVESTORS INCLUDING JOINT HOLDERS, HUF, GUARDIAN IN CASE OF MINOR AND POWER OF ATTORNEY HOLDER.

Folio Number \_\_\_\_\_

	Applicant - 1	Applicant - 2	Applicant - 3	Guardian/POA Holder
PAN				
Country of Birth				
Country of Citizenship/ Nationality				
Tax Resident of any country other than India (Please ✓)	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes : Country <sup>#</sup> : _____ Tax Reference Number: _____	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes : Country <sup>#</sup> : _____ Tax Reference Number: _____	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes : Country <sup>#</sup> : _____ Tax Reference Number: _____	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes : Country <sup>#</sup> : _____ Tax Reference Number: _____

# to include USA, where investor is a Citizen / Greencard holder of USA

DECLARATION: I/We hereby declare that I/We have understood the nature of questions in the Form and the importance of disclosing all the material information required. I/We declare that the information is to the best of my/our knowledge and belief, accurate and complete. I/ We agree to notify Quantum Mutual Fund/ Quantum Asset Management Company Private Limited immediately in the event the information in the confirmation changes. I / We hereby authorise you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me / us, including all changes, update to such information as and when provided by me / us to Quantum Mutual Fund / Quantum Asset Management Company Private Limited to any Indian or foreign governmental or statutory or judicial authorities / agencies, the tax / revenue authority and other investigation agencies without obligation on advising me / us of the same.

Date           Place \_\_\_\_\_

Signature(s)

Sole/1st Applicant/Guardian / Authorised Signatory	POA Signatory	2nd Applicant / Authorised Signatory	3rd Applicant / Authorised Signatory
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## Instructions:

Details under FATCA/Foreign Tax Laws: Tax Regulations require us to collect information about each investor's tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in information provided, please ensure you advise us promptly, i.e., within 30 days.

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. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

## Contact Us



WEBSITE

www.QuantumMF.com



EMAIL

CustomerCare@QuantumAMC.com



TOLL FREE HELPLINE

1800 22 3863 / 1800 209 3863