

# COMMON APPLICATION FORM

For Resident Indians and NRIs/FIIs



**Birla Sun Life**  
Mutual Fund

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM)

Sub Broker Name / ARN No.
---------------------------

Application No.

EJIN is mandatory for "Execution Only" transactions. Ref. Instruction No. 9

## TRANSACTION CHARGES FOR APPLICATIONS ROUTED THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction 1 (viii))

In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

## EXISTING UNITHOLDER please fill in your Folio No., Name & Email ID and then proceed to Section 5 (Applicable details and Mode of holding will be as per the existing Folio No.)

Existing Folio No. \_\_\_\_\_

### 1. FIRST / SOLE APPLICANT INFORMATION (MANDATORY) (Refer Instruction No. 2,3,4) Fresh / New Investors fill in all the blocks. (1 to 10) In case of investment "On behalf of Minor", Please Refer Instruction no. 2(ii)

NAME OF FIRST / SOLE APPLICANT Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y  KYC

NAME OF THE SECOND APPLICANT Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y  KYC

NAME OF THE THIRD APPLICANT Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y  KYC

#### NAME OF THE GUARDIAN (In case First / Sole Applicant is minor) / CONTACT PERSON - DESIGNATION / PoA HOLDER (In case of Non-individual Investors)

Mr. Ms. M/s. \_\_\_\_\_

PAN (Mandatory) \_\_\_\_\_ Date of Birth\*\* D D M M Y Y Y Y  KYC

#### RELATIONSHIP OF GUARDIAN (Refer Instruction No. 2(ii))

ISD CODE \_\_\_\_\_ TEL: OFF. S T D . \_\_\_\_\_ TEL: RESI S T D . \_\_\_\_\_

\*\* Mandatory in case the First / Sole Applicant is Minor

#### TAX STATUS (Please tick (✓) )

- Resident Individual  Fils  NRI - NRO  HUF  Club / Society  PIO  Body Corporate  Minor  Government Body  
 Trust  NRI - NRE  Bank & FI  Sole Proprietor  Partnership Firm  QFI  Others \_\_\_\_\_ (Please Specify)

MODE OF HOLDING (Please tick (✓) ) (Please Refer Instruction No. 2(v))  Joint  Single  Anyone or Survivor (Default option is Anyone or survivor)

#### MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O.Box Address is not sufficient. Please provide full address.) (Indian Address in case of NRIs/FIIs)

\_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ PIN CODE \_\_\_\_\_

#### KYC DETAILS (Mandatory)

##### OCCUPATION (Please tick (✓) )

FIRST APPLICANT  Private Sector Service  Public Sector Service  Government Service  Business  Professional  Agriculturist  Retired  Housewife  
 Student  Forex Dealer  Others ..... (please specify)

SECOND APPLICANT  Private Sector Service  Public Sector Service  Government Service  Business  Professional  Agriculturist  Retired  Housewife  
 Student  Forex Dealer  Others ..... (please specify)

THIRD APPLICANT  Private Sector Service  Public Sector Service  Government Service  Business  Professional  Agriculturist  Retired  Housewife  
 Student  Forex Dealer  Others ..... (please specify)

##### GROSS ANNUAL INCOME (Please tick (✓) )

FIRST APPLICANT  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  > 25 Lacs - 1 Crore  > 1 Crore  
Net worth (Mandatory for Non - Individuals Rs. \_\_\_\_\_ as on D D M M Y Y Y Y [Not older than 1 year]

SECOND APPLICANT  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  > 25 Lacs - 1 Crore  > 1 Crore OR Net Worth \_\_\_\_\_

THIRD APPLICANT  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  > 25 Lacs - 1 Crore  > 1 Crore OR Net Worth \_\_\_\_\_

##### For Individuals

- I am Politically Exposed Person  
 I am Related to Politically Exposed Person  
 Not Applicable

##### For Non-Individual Investors (Companies, Trust, Partnership etc.)

- Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company:  Yes  No  
(If No, please attach mandatory UBO Declaration)  
Foreign Exchange / Money Charger Services  Yes  No  
Gaming / Gambling / Lottery / Casino Services  Yes  No  
Money Lending / Pawning  Yes  No

#### ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

#### COMMON APPLICATION FORM

Application No.



### Birla Sun Life Asset Management Company Limited

One India Bulls Centre, Tower 1, 17th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai 400 013

Toll Free : 1-800-270-7000/ 1-800-22-7000 | sms 'GAIN' to 56161 | Email: connect@birlasunlife.com

Collection Centre /  
BSLAMC Stamp & Signature

Received from Mr. / Ms. \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

(Please tick (✓) ) ENCLOSED  PAN Proof  KYC Complied  NECS Form  Yes  No

**2. GO GREEN** (Please tick (✓)) (Refer Instruction No. 10)

SMS Transact  Online Access  Mobile No. +91 \_\_\_\_\_ / We would like to register for my/our SMS Transact and/ or Online Access

Email Id \_\_\_\_\_

Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode:  Account Statement  Annual Report  Other Statutory Information

**3. BANK ACCOUNT DETAILS** (Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details) Refer Instruction No. 3(A)

Account No. \_\_\_\_\_ Account Type  SAVINGS  CURRENT  NRE  NRO  FCNR  OTHERS (please specify) \_\_\_\_\_  
 IFSC Code \_\_\_\_\_ MICR Code \_\_\_\_\_  
 Name of the Bank \_\_\_\_\_  
 Branch Address \_\_\_\_\_ Pin Code \_\_\_\_\_ City \_\_\_\_\_

**4. FATCA DETAILS** (Please tick (✓)) For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA detail form

Do you have any non-Indian Country(ies) of Birth/ Citizenship/ Nationality and Tax Residency?  Yes  No Please tick as applicable and if yes, provide the below mentioned information (mandatory)

Sole/ First Applicant/ Guardian	<input type="checkbox"/> Yes <input type="checkbox"/> No	2nd Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No	3rd Applicant	<input type="checkbox"/> Yes <input type="checkbox"/> No or <input type="checkbox"/> POA <input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Birth	_____	Country of Birth	_____	Country of Birth	_____
Country of Citizenship/ Nationality	_____	Country of Citizenship/ Nationality	_____	Country of Citizenship/ Nationality	_____
Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No please provide Tax Payer Id.	Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No please provide Tax Payer Id.	Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No please provide Tax Payer Id.
Country of Tax Residency# (other than India)	Taxpayer Identification No _____	Country of Tax Residency# (other than India)	Taxpayer Identification No _____	Country of Tax Residency# (other than India)	Taxpayer Identification No _____
1		1		1	
2		2		2	

# Please indicate all countries in which you are a resident for tax purpose and associated Taxpayer Identification number. In case of applications with PoA, the PoA holder should fill separate form to provide the above details mandatorily.

**5. INVESTMENT DETAILS** (Please tick (✓)) (Refer Instruction No. 5, 9 & 14) (If this section is left blank, only folio will be created)

S. No.	*Cheque / DD Favouring Scheme Name (refer Instruction 5)	Plan / Option	Sweep to (applicable only for Dividend option)	Amount Invested (₹)	^DD Charges	Net Amount Paid (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch and Account Number
1.	BSL		Scheme Name _____ Plan / Option _____					

# (Type of Account : Saving / Current / NRE / NRO / FCNR / NRSR) \*All purchases are subject to realization of funds ^Refer to Instruction No. 5 (vi)

**6. DEMAT ACCOUNT DETAILS (OPTIONAL)** (Please ensure that the sequence of names as mentioned in the application form matches with that of the A/c. held with the depository participant.) Refer Instruction No. 3(B)

NSDL: Depository Participant Name: \_\_\_\_\_ DPID No.: I N \_\_\_\_\_ Beneficiary A/c No. \_\_\_\_\_  
 CDSL: Depository Participant Name: \_\_\_\_\_ Beneficiary A/c No. \_\_\_\_\_

Enclosed:  Client Master  Transaction/ Statement Copy/ DIS Copy

**7. NOMINATION DETAILS (Mandatory)** (Refer Instruction No. 7)

I/We wish to nominate  I/We DO NOT wish to nominate and sign here ..... 1st Applicant Signature (Mandatory)

Nominee Name and Address	Guardian Name (in case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1		100%	

To register multiple nominee please fill separate Multiple nomination Form.

**8. DECLARATION(S) & SIGNATURE(S)** (Refer Instruction No. 1)

To,  
 The Trustee,  
 Birla Sun Life Mutual Fund

Date DD MM YYYY

Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is 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 provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.

**For Non-Individual Investors:** I/We hereby confirm that the object clause of the constitution document of the entity (viz. MOA / AOA / Trust Deed, etc.), allows us to apply for investment in this scheme of Birla Sun Life Mutual fund and the application is being made within the limits for the same. I/We are complying with all requirements / conditions of the entity while applying for the investments and I/We, including the entity, if the case may arise so, hereby agree to indemnify BSLAMC / BSLMF in case of any dispute regarding the eligibility, validity and authorization of the entity and/or the applicants who have applied on behalf of the entity.

**For NRIs only:** I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External /Non-Resident Ordinary /FCNR account. (Refer Inst. No. 6)

I/We confirm that details provided by me/us are true and correct.

\*\*\*I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Birla Sun Life Asset Management Company Ltd. (Investment Manager of Birla Sun Life Mutual Fund) and confirm of having read, understood and agree to abide the terms and conditions for availing of the internet facility more particularly mentioned on the website www.birlasunlife.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.

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.

First Applicant / Authorised Signatory \_\_\_\_\_ Second Applicant \_\_\_\_\_ Third Applicant \_\_\_\_\_

S. No.	Scheme Name	Plan / Option	Net Amount Paid (₹)	Payment Details	
				Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch
1.	BSL				