

COMMON APPLICATION FORM

For Resident Indians and NRIs/FIIs/FPIs



Birla Sun Life
Mutual Fund

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM. All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS.)

Distributor Name & ARN/ RIA No.	Sub Broker Name & ARN/ RIA No.	Sub Broker Code	Employee Unique ID. No. (EUIN)

Application No. _____

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

I/we hereby confirm that the EUIN box has been intentionally left blank my 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.

First Applicant / Authorised Signatory	Second Applicant	Third Applicant
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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 / PEKRN (Mandatory) _____ Date of Birth**

D	D	M	M	Y	Y	Y	Y
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AADHAR Card Number _____ CKYC Number _____ 14 digit CKYC Number _____ (Prefix if any) _____

NAME OF THE SECOND APPLICANT Mr. Ms. M/s. _____

PAN / PEKRN (Mandatory) _____ Date of Birth**

D	D	M	M	Y	Y	Y	Y
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AADHAR Card Number _____ CKYC Number _____ 14 digit CKYC Number _____ (Prefix if any) _____

NAME OF THE THIRD APPLICANT Mr. Ms. M/s. _____

PAN / PEKRN (Mandatory) _____ Date of Birth**

D	D	M	M	Y	Y	Y	Y
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AADHAR Card Number _____ CKYC Number _____ 14 digit CKYC Number _____ (Prefix if any) _____

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 / PEKRN (Mandatory) _____ Date of Birth**

D	D	M	M	Y	Y	Y	Y
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AADHAR Card Number _____ CKYC Number _____ 14 digit CKYC Number _____ (Prefix if any) _____

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

ISD CODE _____ TEL: OFF.

S	T	D
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TEL: RESI

S	T	D
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Proof of the Relationship with Minor** _____ ** Mandatory in case the First / Sole Applicant is Minor

TAX STATUS (Please tick (✓)) (Applicable for First / Sole Applicant)

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

MODE OF HOLDING (Please tick (✓)) (Please Refer Instruction No. 2(vi)) 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 _____

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) COMMON APPLICATION FORM

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 567679 | Email: connect@birlasunlife.com

Application No. _____

Collection Centre / BSLAMC Stamp & Signature

Received from Mr. / Ms. _____ Date : ____ / ____ / ____

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

