

Application Form
Please refer to Product labelling details available on cover page and Your Guide To
Fill The Application Form (pages 23-26) before proceeding

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3. KYC details (Mandatory) (r	efer instruction 3) □ Individual	☐ Non-Individual (Please attach mandatory F	FATCA-CRS Annexure for Entities including UBO
Status of First/Sole Applicant [Please (🗸)]	Occupation Details [Please (/)]	Gross Annual Income (in ₹) [Please (✓)]	PEP Status
☐ Listed Company	(To be filled only if the applicant is an individual)	First Applicant	First Applicant
☐ Unlisted Company	First Applicant	☐ Below 1 Lac ☐ 1-5 Lacs	For Individuals [Please (/)] Politically Exposed
☐ Individual	☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business	e ☐ 5-10 Lacs ☐ 10-25 Lacs	Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)
☐ Minor through guardian	☐ Professional ☐ Agriculturist	□ > 25 Lacs - 1 Crore □ > 1 Crore (or)	□ I am PEP
□HUF	☐ Retired ☐ Housewife	Net-worth (Mandatory for non-individuals) ₹	☐ I am related to PEP ☐ Not Applicable
☐ Partnership	☐ Student ☐ Forex Dealer	as on	For Non-Individuals providing any of the below
☐ Society/Club	☐ Others (please specify)	IDIDIMIMIYIYIYI (Not older than one	mentioned services [Please (✓)]
☐ Company	Second Applicant	,	☐ Foreign Exchange/Money Changer Services
☐ Body Corporate	☐ Private Sector Service ☐ Public Sector Service☐ Government Service☐ Business	Second Applicant	☐ Gaming/Gambling/Lottery/Casino Services ☐ Money Lending/Pawning
☐ Trust	☐ Professional ☐ Agriculturist	Below 1 Lac □ 1-5 Lacs	□ None of the above
	☐ Retired ☐ Housewife		Second Applicant
☐ Mutual Fund	☐ Student ☐ Forex Dealer	□ 5-10 Lacs □ 10-25 Lacs	(To be filled only if the applicant is an individual)
□FPI	☐ Others (please specify)	□ > 25 Lacs - 1 Crore	☐ I am PEP
☐ NRI-Repatriable	Third Applicant	☐ > 1 Crore (or) Net-worth	☐ I am related to PEP
☐ NRI-Non-Repatriable	☐ Private Sector Service ☐ Public Sector Service	······································	□ Not Applicable
☐ FII/Sub account of FII	☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist	☐ Below 1 Lac ☐ 1-5 Lacs	Third Applicant (To be filled only if the applicant is an individual)
☐ Fund of Funds in India	☐ Retired ☐ Housewife	☐ 5-10 Lacs ☐ 10-25 Lacs	□ I am PEP
□QFI	☐ Student ☐ Forex Dealer	□ > 25 Lacs - 1 Crore	☐ I am related to PEP
☐ Others (please specify)	☐ > 1 Crore (or) Net-worth	☐ Not Applicable
4. FATCA-CRS DETAILS Fo	ou Individuals 9 HHT (Mandatam)		cuit. fill concrete FATCA CDC Amnouse
	or Individuals & HUF (Mandatory) N ired for all applicant(s) / guardian / PoA		orily fill separate FATCA-CRS Annexure
Category	First Applicant/Guardian	Second Applicant	Third Applicant
Are you a Tax Resident of Country other than India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Is your Country of Birth/ citizenship other than India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
3. Is your Residence address / Mailing address / Telephone No. other than in India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
4. Is the PoA holder / person to whom signatory authority is given, covered under any of the categories 1, 2 or 3 above?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
If you have answered YES to	any of above, please provide the below	v details	
Country of Tax Residence			
Nationality			
Tax Identification Number\$ or Reason for not providing TIN			
Identification Type (TIN or Other, please specify)			
Residence address for tax purposes (include City, State, Country & Pin code)			
Address Type	☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office	☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office	☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office
City of birth			
Country of birth			

\$ In case any of applicant being resident/ tax payer in more than one country, provide tax identification number for each such country separately.

FATCA-CRS Instructions

Details under FATCA-CRS/Foreign Tax Laws: 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 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/appointed agencies. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. 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. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

If you are a US citizen or resident or greencard holder, please include United States in the Country of Tax Residence 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.

\$ 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 with supporting dougrnents and attach this to the form.

with supporting doucments and attach this to the form.

5. Bank Account Details	of First/S	Sole Ap	plica	nt (a	as pe	r SEBI	Reg	gulatio	ons it	is m	anda	tory)	(refe	r inst	ruct	ion 5	j)							
Account No																								
Name of the Bank											Brai	nch												
Branch Address											Ban	k City	/ (redem	ption will	be pay	able at ti	his location	on)						
Cheque MICR No						Accou	nt Ty	pe [Pl	ease ((✓)] [Savi	ngs 🗆	Curre	nt 🗆 I	NRE*	□ NF	30* □	FCN	IR* □	Oth	ers			
RTGS / NEFT / IFSC Cod	е	T								*If th leaf.	ne pay	ment se pro	is by	DD o	or sc	urce	of fu	nd is	not	clea	r on	the C	hequ	ле
6. Mode of payment of	redemptic	n/divid	dend	proc	eeds	s via Di	rect	credi	it/NE															
Direct Credit is now available v	with: Axis B	ank, BN	IP Pari	bas E	3ank,	Citibanl	k, Dei	utsche	Bank	, HDF	C Ban	k, HSE	вС Ва	nk, IC	ICI B	ank, I	DBI B							
Bank, SBI, Standard Chartere																							atively	y, you
will receive the payment through. 7. Payment Details: Plea	•										•												ructio	on 7)
7. Tayment betails: The		осран	uto Oi	icqu	0,00	mana B	lait	avoui	mig ti	10 001	icilic	you w	1011 60	, 11140			illo ivi	uiiuu	10 (0	,v.,	(ioio	1 11100	uou	JII 1 J
Scheme Name																								
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Option	☐ Quarterl	y ☐ Half-	-Yearly	☐ Ar	nnual			☐ Qua	rterly [☐ Half	-Yearly	☐ Anr	nual			□ Qı	uarterly	/ 🗆 H	alf-Ye	early [Ann	ual		
	Dividend S	weep Ta	arget S	Schei	me (Fı	und)		Divide	nd Sw	reep T	arget (Schem	e (Fun	ıd)		Divid	dend S	weep	o Tar	get S	chemo	e (Fun	d)	
(If an investor fails to specify the option, he	will be allotted ur	its under th	e default	option/	suboptio	on of the Tar	get sch	eme.) Any	/ / each c	correction	n carried	out in sele	ecting the	e target s	scheme	has to b	e counte	er-signe	d by th	e invest	or(s) to r	nake it a	valid se	lection
Amount Invested (₹)																								
DD Charges (₹) Net Amount Paid																								
Payment Details																								
OTM Cheque																								
DD Number RTGS																								
Fund Transfer																								
Bank/Branch																								
#Dividend Sweep Option (Targ	,																		0			Dire	ct Gr	owth
In case of third party pay 8. DEMAT Account Detail				n 7):	: Plea	ise dow	/nloa	ıd (ww	vw.su	ndara	ammu	tual.c	om) a	and a	ttach	n the	third	part	y de	clara	tion 1	form		
☐ National Securities Deposite	ory Ltd.	Dep	ository	/ Part	icipar	ıt																		
☐ Central Depository Services	(India) Ltd.	DP I	D Nun	nber						Benef	iciary	Accour	nt Nun	nber										_
Investor willing to invest in D	Demat option	n, may	provi	de a	сору	of the	DP S	Statem	ent ei	nablir	ıg us	to mat	tch th	e Der	nat c	details	s as s	tatec	l in t	he a	oplica	ition f	orm.	
9. Please indicate detail	ls of your	SIP (re	efer in	stru	ction	1 9) (ski	p this	section	on if yo	ou wis	h to m	nake a	one-ti	me in	vestn	nent)								
Mode of SIP ☐ Post-dat	ed chequ	ies (ple	ease	pro	vide	the de	tails	belo	w) 🗆	OTN	//NA	CH (p	lease	subm	it SIF	Regi	stratio	n Fo	rm)					
SIP Period (For Post-	-Dated Ch	eques)			SIP	Date)							S	SIP F	reque	ency						
SIP Starting	SIP E	nding				thly/Qua						(Minim										of insta	llment	ts 5)
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No. of PDCs	irst SIP Ch	eque N	lo								L	ast SI	P Ch	eque	No									
Each SIP Amount ₹								Re	efer Gu	uide to	inves	sting th	rough	SIP										
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	ndaram Asse II Floor, 46 W												83103	01 (NF	RI)	Conc	21 140.	LG						
Received From Mr./Mrs./Ms.																								
Communication in connection																		ISC	c's Si	gnatu	ıre & S	Stamp		
Services Limited, Registrar a Garden Road, Nungambakka														uiedr		Please N	lote: All Pu							d drafts.
																								-

10. Nominee (available o	only for individuals) (r	efer instruction 10)	☐ I wish to nominate the fo	llowing person(s)
1st Nominee		2nd Nominee		3rd Nominee
Name:				Name:
Relationship:				Relationship:
Address:				Address:
Proportion (%)* in which u			n which units will be shared by first	
If nominee is a minor:		If nominee is a m	ninor:	If nominee is a minor:
Date of birth:				
Name of Guardian:		Name of Guardian	ı:ian:	
			lan:	
* Proportion (%) in which units will be	shared by each nominee should a se a nominee. Signatur	aggregate to 100% e of investor(s)		
1st / Sole Appli			2nd Applicant	3rd Applicant
11. Declaration, Certif	ication & Signature	e (refer instructio	n 11)	
of twelve months (applicable for PAN/A Schemes of various Mutual Funds from Applicable to NRIs only: Please (/) I or from funds in my/our Non-Resident I/We hereby declare that all the particule agents, service providers, representativi intimating any changes to the above pato such information as and when provi without any obligation of advising me/L Certification: I/We have understood the correct, and complete. I/We also confir I/We agree to indemnify Sundaram Ass respect of any other information as ma I applicable only for i Sundaram Mutual Fund u	adnaar exempt category of invest in a mongst which the Scheme is b. ITWe confirm that I am/We are Nor External/Ordinary Account/FCNR ars given herein are true, correct a res of the distributors liable for an irticulars. IWe hereby authorise Sided by me/us, to any Indian or fus of the same. I/We hereby agree in einformation requirements of the that IWe have read and under set Management Company Limite by be required under applicable ta investments through under Direct Plan under	ors). The AHN holder has discleing recommended to me/us. Thesident of Indian Nationality. Account on a ☐ Repatriation and complete to the best of my y consequences/losses/costs. Undaram Asset Management to oreign governmental or statute to provide any additional info is Form (read along with the Fatood the FATCA-CRS Terms and in respect of any false, mislex laws. RIA) RIA Consent r the above mention	osed to me/us all the commissions (in the form of //Origin and I/We hereby confirm that the funds for Basis Non-Repatriation Basis. I/We further decleant //our knowledge and belief. I/ We further agree not //our knowledge and belief. I/ We further agree not //our knowledge and belief. I/ We further agree not //our knowledge and belief. I/ We further agree not //our knowledge and belief. I/ We further agree not //our knowledge and belief. I/ We further agree not //our knowledge and belief. I/ We returned //our knowledge and belief. I/ We part //our knowledge and belief. I/ We above- national //our knowledge and //our	ed to the SID and KIM till date • hereby apply for units under the scheme(s) as for OTM/NACH • have not received nor been induced by any rebate or gifts in the total investments exceeding ₹ 50,000 in a financial year or a rolling period trail commission or any other mode), payable to him for the different competing subscription have been remitted from abroad through normal banking channel are that I/We am/are not a citizen of USA/Canada. To hold Sundaram Asset Management, its sponsor, their employees, authorise being false, incorrect or incomplete or in case of my/our not intimating/delay iter, all/any of the information provided by me/us, including all changes, update us authorities, other investigation agencies and SEBI registered intermediarie onnection with this application. Indhereby certify that the information provided by me/us on this Form is true arding my/our "U.S. person" status for U.S. federal income tax purposes. or incamed person/s have invested in the Scheme(s) of
Plan of all Schemes mana AMFI Registration Numb Name:	aged by you, to the be			AV etc. in respect of my/our investments under Direct red Investment Advisor (Correction – Advisor):
Address				
0.1				DIN
City E-Mail ID				PIN
Tel.No				
Consent & Signature for Aadhaar				
b) For updating/seeding my Aadhaar //We authorize Sundaram Mutual F // We hereby provide my / our con // we further declare that this cons c) The purpose of collection/usage of the Aadhaar number, we shall auth d) //// We hereby provide my /our conse Aadhaar Act, 2016 (and regulations //// We hereby provide my/our conse the purpose of updating the same Where the client is a non-individual, ap	r with UIDAI through an authorized a number based on the PANs in all m rund / Sundaram BNP Paribas Fund sent for sharing the Aadhaar data / sent will remain valid for Updation in f Aadhaar number including demogrenticate the same in accordance with adhaar Act, s made thereunder) and PMLA. Int for sharing/disclosing of my Aadi in my/our folios.	entity. y accounts maintained with your y accounts maintained with your Services Limited to authenticate information with other Mutual Fu all my / our existing & new folior raphic information is to comply w th the Aadhaar Act, 2016. We sh 2016 and regulations made then maar number(s) including demogr ents, Aadhaar numbers and PA	Fund for KYC & or related due diligence purpose in list adata in accordance with UIDAI (Authentication) Regulands / RTAs for updating the same in my / our folios his serviced by Sundaram BNP Paribas Fund Services light applicable laws/rules/regulations and provision of all receive your demographic information which shall eunder, for (i) collecting, storing and usage (ii) validating aphic information with the asset management compa	eld with them, now or to be created in futureimited. the said data is mandatory as per applicable laws/rules/regulations. Post obtaining be used only to comply with applicable laws/rules/regulations. gg/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the nies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for es holding an attorney to transact on its behalf shall be submitted. If a person
holding an authority to transact on ber			loes not submit the PAN, certified copy of an offici	
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Date:/				Place:
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	☐ Lumpsum Purchase			



SIP Registration / Renewal Form / Modification - NACH / One Time Mandate (OTM) (First time investors should use this form along with the application form)

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We although for Addition Part of the following	claration: I/We • having read and unders date • hereby apply for units under the s ree to the terms and conditions for NACH/ sting Micro SIPs/investments which toget! onths (applicable for PAN/Aadhaar exempt) and be available to him for the different comic	ood the contents of the Statement of Addi theme(s) as indicated in the application for DTM • have not received nor been induced or • have not received nor will result in category of investors). The ARN holder have titing Schemes of various Mutual Funds fro	itional Information/Scheme Inform agree to abide by the terms by any rebate or gifts, directly or the total investments exceeding is s disclosed to me/us all the com amongst which the Scheme is	nation Document/add, conditions, rules ar indirectly in making t 50,000 in a financia missions (in the form being recommender	denda issued to the SID a nd regulations of the sche this investment • do not h al year or a rolling period o n of trail commission or ar d to me/us.	nd KIM /We hereby de me(s) • Asset Manager in case of arly hereby authori- updates to suc- priner inyestiga information/do	clare that all the particulars given he nent, its sponsor, their employees, at of the apove particulars beind false, e. Sundaram Asset Management to n information as and when provided to toon agencies and when revoluted in con- sumentation that may be reotilized in c	rein are true, correct and complet uthorised agents, service provider incorrect of incomplete of in case disclose, share, remit in any form y me/us, to any Indian or foreign intermediaries, without any, oblic connection with this application.	e to the best of my/our knowledge and be s, representatives of the distributors liable e of my/our not intimating/delay in intimating, mode or manner, all/any of the informatic governmental or statutory or judicial author gation of advising me/us of the same. I/	ief. I/ We further agree not to hold Sundara for any consequences/losses/costs/damag of any changes to the above particulars. IV in provided by me/ us, including all change ties/agencies, the tax/revenue authorities a We
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This is to confirm that the declaration has been carefully read,understood and made by me/us.l am authorising the user entity/corporate to debit my account.

I have understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where i have authorized the debit.

I/We hereby declare that the above information is true and correct and that the mobile number listed above is registered in my/our name(s) and/or is the number that I/we use in the ordinary course. I/We hereby declare that, irrespective of my/our registration of the above mobile in the provider customer preference register, or in any similar register maintained under applicable laws, now or subsequent to the date hereof, I/We consent to the Bank communicating to me/us about the transactions carried out in my/our aforesaid account(s).