



APP No.:

## COMMON APPLICATION FORM

## 1. DISTRIBUTOR / BROKER INFORMATION (Refer Instruction No. I.9)

Name & Broker Code / ARN	Sub Broker / Sub Agent ARN Code	*Employee Unique Identification Number	Sub Broker / Sub Agent Code	
				<div> <div>SIGN HERE</div> <div>First / Sole Applicant / Guardian</div> </div>
				<div> <div>SIGN HERE</div> <div>Second Applicant</div> </div>
				<div> <div>SIGN HERE</div> <div>Third Applicant</div> </div>

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

**TRANSACTION CHARGES** (Mandatory to be filled if you have invested through a distributor)

(Please tick (✓) any one) ☐ I am a First time investor across Mutual Funds OR ☐ I am an existing investor in Mutual Funds

In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive Transaction Charges, of ₹ 150 (new investor) & ₹ 100 (existing investor) are deductible as applicable from the purchase/ subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.

## 2. EXISTING INVESTOR'S FOLIO NUMBER

[illegible]

(If you have an existing folio number with KYC validated, please mention the number here and proceed to section 9. Mode of holding will be as per existing folio number.)

### 3. GENERAL INFORMATION

APPLICATION FOR ☐ Zero Balance Folio ☐ Invest Now

^MODE OF HOLDING : ☐ Single ☐ Joint (Default) ☐ Any one or Survivor

#### 4. FIRST APPLICANT DETAILS

[illegible]

**PAN / PEKRN^** (First Applicant) **PAN / PEKRN^** (Guardian)

**Name of Guardian** if first applicant is minor / **Contact Person** for non individuals

Guardian's Relationship With Minor <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed Guardian	Date of Birth of 1st Applicant	<input type="text"/> D <input type="text"/> D <input type="text"/> M <input type="text"/> M <input type="text"/> Y <input type="text"/> Y	Proof of Date of Birth and Guardian's Relationship with Minor <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others (please specify)
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**OCCUPATION\*\*\* :** ☐ Professional ☐ Agriculturist ☐ Housewife ☐ Retired ☐ Government Service/Public Sector  
☐ Business ☐ Forex Dealer ☐ Student ☐ Private Sector Service ☐ Others \_\_\_\_\_

<b>STATUS* :</b>	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> PSU	<input type="checkbox"/> AOP/BOI	<input type="checkbox"/> Minor through Guardian	<input type="checkbox"/> HUF	<input type="checkbox"/> Trust / Charities / NGOs
	<input type="checkbox"/> Society	<input type="checkbox"/> FI / FII	<input type="checkbox"/> NRI	<input type="checkbox"/> Company/Body Corporate	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Defence Establishment
	<input type="checkbox"/> PIO	<input type="checkbox"/> Bank	<input type="checkbox"/> FPI***	<input type="checkbox"/> Government Body	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Others _____

\*\*\*as and when applicable)

COUNTRY OF BIRTH**^		COUNTRY OF NATIONALITY/CITIZENSHIP**^	
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**COUNTRY OF TAX RESIDENCE\*\*^** ☐ India ☐ U.S.A. ☐ Others (please specify)

**FOREIGN TAX ID NO\*\*^**  If you have more than one country of tax residence please specify the details of all the countries

**GROSS ANNUAL INCOME DETAILS\*\*\*** Please tick (✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs-1 Crore ☐ >1 Crore

**NET-WORTH\*\*\* in ₹** \_\_\_\_\_ (Net worth should not be older than 1 year) as on (Date) | D | D | M | M | Y | Y | Y | Y | (Mandatory for Non-Individuals)

Are you a Politically Exposed Person (PEP)\*\* ☐ Yes ☐ No Are you related to a Politically Exposed Person (PEP) ☐ Yes ☐ No

## Mandatory to be filled by Non-Individuals Only

#### A. FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)

☐ Form W8 BEN-E / Declaration by FI/FFI/NFFE enclosed (Refer Ins No. XIII) OR

☐ Unable to Provide FATCA status (Refer Ins No. XIII)

(Where no box is ticked it will be understood by default that the applicant is unable to confirm the FATCA Status as of now and will confirm in future. For such cases AMC will contact the investor in due course of time)

**B. ULTIMATE BENEFICIARY OWNER DETAILS** (Not applicable in case the investor or owner of the controlling interest is a company listed on a stock exchange or is a majority owned subsidiary of such a company)

☐ Applicant is the Ultimate Beneficial Owner(s) of this investment (Refer Ins No. XII) **OR**

☐ Applicant is not the Ultimate Beneficial Owner(s) of this investment (Please submit the Declaration for 'Ultimate Beneficial Ownership' along with this form) (Refer Ins No. XII)  
(Where no box is ticked applicant will be treated as the Ultimate Beneficial Owner(s) of this investment by default)

**C. Is the entity involved in / providing any or the following services**

– Foreign Exchange / Money Changer Services ☐ Yes ☐ No – Money Lending / Pawning ☐ Yes ☐ No

– Gaming / Gambling / Lottery Services (e.g. casinos, betting syndicates) ☐ Yes ☐ No

**\*\*In case First applicant is minor then details for Guardian will be required** \*Mandatory for all type of Investors. It is mandatory for investors to be KYC compliant through a Key Registered Agency (KRA) appointed by SEBI prior to investing in Reliance Mutual Fund. Refer instruction no. II.6. 7 & IX

[illegible]

**COUNTRY OF BIRTH^**  **COUNTRY OF NATIONALITY/CITIZENSHIP^**   
**COUNTRY OF TAX RESIDENCE^** ☐ India ☐ U.S.A. ☐ Others (please specify)

If you have more than one country of tax residence please specify the names of all the countries separated by commas

FOREIGN TAX ID NO^  STATUS^: ☐ NRI ☐ Resident Individual

**GROSS ANNUAL INCOME DETAILS^** Please tick (✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs-1 Crore ☐ >1 Crore

NET-WORTH^ in ₹ (Net worth should not be older than 1 year) as on (Date) D D M M Y Y Y Y

Are you a Politically Exposed Person (PEP)^ ☐ Yes ☐ No

[illegible]

COUNTRY OF BIRTH^		COUNTRY OF NATIONALITY/CITIZENSHIP^	
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**COUNTRY OF TAX RESIDENCE^** ☐ India ☐ U.S.A. ☐ Others (please specify)

If you have more than one country of tax residence please specify the names of all the countries separated by commas

FOREIGN TAX ID NO^  STATUS^: ☐ NRI ☒ Resident Individual

**GROSS ANNUAL INCOME DETAILS<sup>^</sup>** Please tick (✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ 25 Lacs-1 Crore ☐ >1 Crore

**NET-WORTH<sup>\*</sup>** in ₹ \_\_\_\_\_ (Net worth should not be older than 1 year) as on (Date) | D | D | M | M | Y | Y | Y | Y

Are you a Politically Exposed Person (PEP)^ ☐ Yes ☐ No

\*Mandatory for all type of Investors. It is mandatory for investors to be KYC compliant through a Key Registered Agency (KRA) appointed by SEBI prior to investing in Reliance Mutual Fund. Refer instruction no.II.6, 7 & IX

## Correspondence Address (P.O. Box is not sufficient)      ## Please note that your address details will be updated as per your KYC records with CVL / KRA

[illegible]

Overseas Address (Mandatory for FIIs/NRIs/PIOs)

[illegible]

Email ID

Mobile	+ (Country Code)		Tel. No.	STD Code	Office		Residence

Please register your Mobile No & Email Id with us to get instant transaction alerts via SMS & Email. Investors providing Email Id would mandatorily receive only E - Statement of Accounts in lieu of physical Statement of Accounts.

Bank Name	M a n d a t o r y																					
Account No.	M a n d a t o r y										A/c. Type (✓)		SB	Current	NRO	NRE	FCNR					
Branch Address											Branch City											
PIN			IFSC Code		For Credit via RTGS										9 Digit MICR Code*		For Credit via NEFT					

Please ensure the name in this application form and in your bank account are the same. Please update your IFSC and MICR Code in order to get payouts via electronic mode in to your bank account.

**9. INVESTMENT & PAYMENT DETAILS** (Separate Application Form is required for investment in each Plan/Option. Multiple cheques not permitted with single application form (Refer instruction no. IV) OTM facility is available to investors who have Invest Easy facility registered with RMF.

**Scheme** \_\_\_\_\_ (Refer Instruction No. I-10) (For Product Labeling please refer last page of application form)

(If you wish to invest in Direct Plan please mention Direct Plan against the scheme name)

**Option** (Please ✓) ☐ Growth<sup>^^</sup> ☐ Dividend Payout ☐ Dividend Reinvestment **Dividend Frequency** \_\_\_\_\_

**Payment Details (Please issue cheque favouring scheme name)**Mode of Payment ☐ OTM Facility (One Time Bank Mandate) ☐ Cheque ☐ DD ☐ Funds Transfer ☐ RTGS / NEFT ☐ Cash<sup>\$</sup> (Refer Instruction No. XIV)

Investment Amount (Rs.) \_\_\_\_\_ I DD Charges (if applicable) (Rs.) \_\_\_\_\_ II Net Amount~ (Rs.) \_\_\_\_\_ I minus II

Instrument No/Cash Deposit Slip No. \_\_\_\_\_ Dated DD MM YY YY YY YY Drawn on Bank \_\_\_\_\_

Bank Branch	City
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(^^ Default option if not selected) ~Units will be allotted for the net amount minus the transaction charges if applicable. \$ Investors are requested to collect the cash deposit slip from the DISC.

In case of existing investor, nomination details mentioned in the below table will replace the existing details registered in the folio

Nominee Name	Guardian Name (in case Nominee is Minor)	Date of Birth of Minor	Allocation (%)	Sign of Nominee	Sign of Guardian	Signature of Applicants
						1st App.
						2nd App.
						3rd App.

**DEMAT ACCOUNT DETAILS** - These details are compulsory if the investor wishes to hold the units in DEMAT mode. Ref. Instruction No. X.

Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with any one of the Depository Participant.

<b>National Securities Depository Limited</b>	Depository participant Name _____  DP ID No. _____  Beneficiary Account No. _____	<b>Central Depository Securities Limited</b>	Depository participant Name _____  Target ID No. _____
Enclosures (Please tick any one box) : <input type="checkbox"/> Client Master List (CML) <input type="checkbox"/> Transaction cum Holding Statement <input type="checkbox"/> Cancelled Delivery Instruction Slip (DIS)			

First Applicant POA Name	Mr./Ms./M/s	PAN*								
Second Applicant POA Name	Mr./Ms./M/s	PAN*								
Third Applicant POA Name	Mr./Ms./M/s	PAN*								




**14. STP ENROLLMENT DETAILS** Opted for STP: ☐ Yes ☐ No (Incase you have opted for STP it is mandatory to submit STP Enrolment Form)

15. I WISH TO APPLY FOR TRANSACT ONLINE Yes ☐ No ☐ OR I WISH TO APPLY FOR INVEST EASY FOR INDIVIDUALS Yes ☐ No ☐  
(Mandatory Enclosure : ONE TIME BANK MANDATE REGISTRATION FORM)

I/We would like to invest in Reliance \_\_\_\_\_ subject to terms of the Statement of Additional Information (SAI), Scheme Information Document (SID), Key Information Memorandum (KIM) and subsequent amendments thereto. I/We have read, understood (before filling application form) and is/are bound by the details of the SAI, SID & KIM including details relating to various services including but not limited to Reliance Any Time Money Card. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act / Regulations / Rules / Notifications / Directions or any other Applicable Laws enacted by the Government of India or any Statutory Authority. I accept and agree to be bound by the said Terms and Conditions including those excluding/ limiting the Reliance Capital Asset Management Limited (RCAM) liability. I understand that the RCAM may, at its absolute discretion, at any time, terminate my participation in the Scheme and I shall not be entitled to any refund of my investment. I/We agree to pay to the Reliance Capital Asset Management Limited (RCAM) the amount of 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. I hereby declare that the above information is given by the undersigned and particulars given by me/us are correct and complete. Further, I agree that the transaction charge (if applicable) shall be deducted from the subscription amount and the said charges shall be paid to the distributors. I/We hereby confirm that I/We are not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, or as defined by the United States Internal Revenue Code.

☐ I confirm that I am resident of India.

☐ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External /Ordinary Account/FNCR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/ our NRE/FNCR Account.

 First / Sole Applicant / Guardian	 Second Applicant	 Third Applicant
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Documents	Companies	Trusts	Societies	Partnership Firms	NRI	FIRs/FPs	Investments through Constituted Attorney
1. Resolution/Authorisation to invest	✓	✓	✓	✓		✓	
2. List of Authorised Signatories with Specimen Signature(s)	✓	✓	✓	✓			✓
3. Memorandum & Articles of Association	✓						
4. Trust Deed		✓					
5. Bye-Laws			✓				
6. Partnership Deed				✓			
7. Overseas Auditor's Certificate						✓	
8. Notarised Power of Attorney							✓
9. Foreign Inward Remittance Certificate in case of payment is made by DD from NRE/FCNR A/c where applicable					✓		
10. Proof of PAN	✓	✓	✓	✓	✓	✓	✓
11. KYC Compliant	✓	✓	✓	✓	✓	✓	✓

## APP No.:

Received from Mr/Ms/M/s : \_\_\_\_\_ an application for allotment of \_\_\_\_\_

Units under Scheme Reliance	Option	as per details below.
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Instrument No/Cash Deposit Slip No. \_\_\_\_\_ Dated \_\_\_\_\_ Rs. \_\_\_\_\_ drawn on Bank \_\_\_\_\_

Time Stamp & Date  
of receiving office

**Corporate Office Address:** One Indiabulls Centre, Tower 1, 12th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai - 400 013



#### IVR. "Self Help" Option (24 x 7)

IVR

**Investor can avail below facilities**

1. NAV
2. Account balance
3. Account statement
4. Last 5 transactions

For more details : Call : 1800-300-1111