

NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / PoA HOLDER

Mr.	Ms.	M/s.		Mobile No.											
PAN# / PEKRN#				KYC Identification No. (KIN):				[Please (✓)] ☐ #KYC Proof Attached(Mandatory)							
Relationship with Minor@ Please (✓) ☐ Father ☐ Mother ☐ Court appointed Legal Guardian													Proof of relationship with minor@ Please (✓) ☐ Attached @ Mandatory		

ADDITIONAL DETAILS REQUIRED (in case of non-individual Investors)

Contact Person Name																			
Designation																			
Mobile No.																Email			

4. JOINT APPLICANT DETAILS, If any (Refer General Instruction 4) (in Case of Minor, there shall be no joint holders)

I. NAME OF SECOND APPLICANT Mr. Ms. M/s.

KYC Identification No. (KIN):																PAN# / PEKRN#													GENDER ☐ Male ☐ Female ☐ Other [Please (✓)] ☐ #KYC Proof Attached(Mandatory)				
Mobile No.																^^Email Id									DATE OF BIRTH	D	D	M	M	Y	Y	Y	Y

☐ I/we wish to receive physical copy of the Annual Report or Abridged Summary thereof (Applicable only if email id is not available)

II. NAME OF THIRD APPLICANT Mr. Ms. M/s.

KYC Identification No. (KIN):																PAN# / PEKRN#													GENDER ☐ Male ☐ Female ☐ Other [Please (✓)] ☐ #KYC Proof Attached(Mandatory)				
Mobile No.																^^Email Id									DATE OF BIRTH	D	D	M	M	Y	Y	Y	Y

☐ I/we wish to receive physical copy of the Annual Report or Abridged Summary thereof (Applicable only if email id is not available)

#Please attach Proof. Refer General Instruction No 15 for PAN/PEKRN and No 17 for KYC.

^^ On providing email-id investors shall receive scheme wise annual report or an abridged summary thereof/ account statements/ statutory and other documents by email. (Refer General Instruction 9)

5. APPLICANT DETAILS (Mandatory) (Refer general instruction 4)

5a. Status of Applicants (Refer General Instruction 4D) (Please tick one)

Sole/First Applicant ☐ Individual ☐ Non Individual	☐ Resident Individual ☐ NRI-Repatriation ☐ QFI ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ PIO ☐ Private Ltd. ☐ Body Corporate ☐ NRI-Non Repatriation ☐ BOI ☐ OCI ☐ LLP ☐ Bank ☐ FI ☐ Society / Club ☐ Public Ltd. ☐ Foreign National Resident in India ☐ On Behalf of Minor ☐ FPI ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Others _____ (Please specify)
Second Applicant ☐ Individual ☐ Non Individual	☐ Resident Individual ☐ NRI-Repatriation ☐ QFI ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ PIO ☐ Private Ltd. ☐ Body Corporate ☐ NRI-Non Repatriation ☐ BOI ☐ OCI ☐ LLP ☐ Bank ☐ FI ☐ Society / Club ☐ Public Ltd. ☐ Foreign National Resident in India ☐ On Behalf of Minor ☐ FPI ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Others _____ (Please specify)
Third Applicant ☐ Individual ☐ Non Individual	☐ Resident Individual ☐ NRI-Repatriation ☐ QFI ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ PIO ☐ Private Ltd. ☐ Body Corporate ☐ NRI-Non Repatriation ☐ BOI ☐ OCI ☐ LLP ☐ Bank ☐ FI ☐ Society / Club ☐ Public Ltd. ☐ Foreign National Resident in India ☐ On Behalf of Minor ☐ FPI ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Others _____ (Please specify)

5b. Occupation Details [Please tick (✓)]

Sole/First Applicant Please select any one	☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Student ☐ Professional ☐ Housewife ☐ Business ☐ Retired ☐ Agriculturist ☐ Proprietorship ☐ Others _____ (Please specify)
Second Applicant Please select any one	☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Student ☐ Professional ☐ Housewife ☐ Business ☐ Retired ☐ Agriculturist ☐ Proprietorship ☐ Others _____ (Please specify)
Third Applicant Please select any one	☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Student ☐ Professional ☐ Housewife ☐ Business ☐ Retired ☐ Agriculturist ☐ Proprietorship ☐ Others _____ (Please specify)

5c. Gross Annual Income / Net-worth (Rs.)

Sole/First Applicant (Please select any one)	Gross Annual Income ☐ Below 1 Lakh ☐ 1 - 5 Lakhs ☐ 5 - 10 Lakhs ☐ 10 - 25 Lakhs ☐ 25 Lakhs - 1 Crore ☐ >1 Crore Net-worth (Mandatory for Non-Individuals) Rs. _____ as on <table border="1" style="display: inline-table; text-align: center;"> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> </table> (Not older than 1 year)	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Second Applicant (Please select any one)	Gross Annual Income ☐ Below 1 Lakh ☐ 1 - 5 Lakhs ☐ 5 - 10 Lakhs ☐ 10 - 25 Lakhs ☐ 25 Lakhs - 1 Crore ☐ >1 Crore Net-worth (Mandatory for Non-Individuals) Rs. _____ as on <table border="1" style="display: inline-table; text-align: center;"> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> </table> (Not older than 1 year)	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Third Applicant (Please select any one)	Gross Annual Income ☐ Below 1 Lakh ☐ 1 - 5 Lakhs ☐ 5 - 10 Lakhs ☐ 10 - 25 Lakhs ☐ 25 Lakhs - 1 Crore ☐ >1 Crore Net-worth (Mandatory for Non-Individuals) Rs. _____ as on <table border="1" style="display: inline-table; text-align: center;"> <tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> </table> (Not older than 1 year)	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		

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TEAR HERE

Scheme(s)/Plan(s)/Option(s)/ Sub-option(s)				
Cheque / DD / Payment Instrument No. & Date		Drawn on (Bank and Branch)		Amount in Figures (Rs.)

SIP / Micro SIP Date (s) _____ Top Up SIP Amount / Percentage _____ Frequency _____

5d. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)

Sole/First Applicant (Please select any one)	☐ I am a PEP	☐ I am Related to a PEP	☐ Not Applicable
Second Applicant (Please select any one)	☐ I am a PEP	☐ I am Related to a PEP	☐ Not Applicable
Third Applicant (Please select any one)	☐ I am a PEP	☐ I am Related to a PEP	☐ Not Applicable

6. FATCA and CRS DETAILS For Individuals (Mandatory) Non Individual investors including HUF should mandatorily fill separate FATCA/CRS form

	Sole/First Applicant/Guardian	Second Applicant	Third Applicant
Place of Birth			
Country of Birth			
Nationality	☐ Indian ☐ U.S. ☐ Others, please specify _____	☐ Indian ☐ U.S. ☐ Others, please specify _____	☐ Indian ☐ U.S. ☐ Others, please specify _____
Tax Residence Address Type (as per KYC records)	☐ Residential ☐ Registered Office ☐ Business	☐ Residential ☐ Registered Office ☐ Business	☐ Residential ☐ Registered Office ☐ Business
Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India?	☐ Yes / ☐ No	☐ Yes / ☐ No	☐ Yes / ☐ No
Country of Tax Residency	If 'YES', please fill below for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the Respective countries.		
	(1) (2) (3)	(1) (2) (3)	(1) (2) (3)
Tax Identification Number OR Functional Equivalent	(1) (2) (3)	(1) (2) (3)	(1) (2) (3)
Identification Type (TIN of other, Please specify)	(1) (2) (3)	(1) (2) (3)	(1) (2) (3)
If TIN is not available, please tick the reason A,B, or C (as defined below)	1 ☐ A ☐ B ☐ C	2 ☐ A ☐ B ☐ C	3 ☐ A ☐ B ☐ C

Reason A → The country where the Account Holder is liable to pay tax does not issue Tax identification Numbers to its residents.

Refer General Instructions 4C and 19

Reason B → No TIN required. (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected).

Reason C → Others; please state the reason thereof _____

7. BANK ACCOUNT DETAILS OF THE FIRST / SOLE APPLICANT (For redemption purpose) (Refer General Instruction 6 & 10)
(Mandatory to attach proof, in case the pay-out bank account is different from the bank account mentioned under Section 8 below.)

For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

Bank Name			
Branch Address		Branch City	
Account No.		MICR Code	(The 9 digit code appears on your cheque next to the cheque number)
Account Type (Please ✓)	☐ Savings	☐ Current	☐ NRO ☐ NRE ☐ FCNR ☐ Others (please specify) _____
IFSC Code***		*** Refer General Instruction 6C (Mandatory for Credit via RTGS / NEFT) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)	

Unitholders will receive redemption/ dividend (IDCW) proceeds directly into their bank account (as furnished in Section 8) via Direct credit / RTGS / NEFT facility unless specified otherwise in writing.

8. INVESTMENTS & PAYMENT DETAILS [Please (✓)] (Refer Instruction 7 for Scheme details and Instruction 5 & 8 for Payment and Third Party Payment Details) The name of the first/ sole applicant must be pre-printed on the cheque for lumpsum Investment/ SIP Registration. FOR DEFAULT OPTIONS, PLEASE REFER KIM.

NOTE: In case of, Payment through single cheque, the cheque/DD should be issued in favour of 'Mahindra Manulife Multiple Schemes' for the total investment amount mentioned below and the cheque/DD details need to be filled only once. Same cheque cannot be used for both lumpsum & SIP investments.

Payment Type :	☐ Non-Third Party Payment	☐ Third Party Payment (Please attach 'Third Party Payment Declaration Form')
Payment Through :	☐ Single Cheque	☐ Multiple Cheques (Refer instruction 5 D)
	☐ One time Lumpsum Investment	☐ Systematic Investment Plan (Attach Common SIP/ TOP-UP SIP registration/upgrade cum debit mandate form)

*LEI No.		Valid upto:	
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* The Legal Entity Identifier (LEI) is a 20-digit number used to uniquely identify parties for all payment transactions of value ₹ 50 crore and above undertaken by entities (non-individuals) using Reserve Bank-run Centralised Payment Systems viz. Real Time Gross Settlement (RTGS) and National Electronic Funds Transfer (NEFT). In absence of LEI, the Fund will not be able to make payments (Redemption/Dividend) of value ₹ 50 crore and above, and shall not be held responsible for any non-receipt/ receipt of funds with a delay.

Scheme/Plan/Option/ Sub-option	Investment Amount	DD Charges, if any	Net DD / Cheque Amount	Cheque/ DD/Fund Transfer Payment Instrument/ RTGS / NEFT Refer No./OTBM Facility^	Drawn on Bank / Branch	Bank Account Number
Mahindra Manulife _____						
Mahindra Manulife _____						
	TOTAL					

^One Time Bank Mandate

9. UNIT HOLDING OPTION

☐ DEMAT MODE*
 ☐ PHYSICAL MODE (Default)

(Refer Instruction 12)

*Demat Account details are mandatory if the investor wishes to hold the units in Demat Mode. Please ensure that the sequence of the names as mentioned in the application form matches with that of the demat account. Investor opting to hold units in demat form, may provide a copy of the DP statement to enable us to match the demat details as stated in the application form.

NSDL	DP NAME _____	DP ID	I	N								Beneficiary Account No.							
CDSL	DP NAME _____	Beneficiary Account No.																	

10. NOMINATION (Refer Instruction 14) (Mandatory for new folios of Individuals where mode of holding is single) (For Units in Non-Demat Form)

Name and Address of Nominee(s)	Relationship with Applicant	Date of Birth	Name and Address of Guardian	Signature of Nominee (Optional)/ Guardian of Nominee (Mandatory)	Proportion (%) in which the units will be shared by each Nominee (should aggregate to 100%)
		(to be furnished in case the Nominee is a minor)			
Nominee 1					
Nominee 2					
Nominee 3					

OR

[Please (✓)] ☐ I/We do not wish to Nominate

11. DECLARATION & SIGNATURE/S (Refer Instruction 13)

I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws. I / We hereby confirm and declare as follows:- I / We have read, understood and hereby agree to comply with the terms and conditions of the scheme related documents (i.e. Scheme Information Document, Statement of Additional Information and Key Information Memorandum) and apply for allotment of Units of the Schemes of Mahindra Manulife Mutual Fund ('the Fund') indicated above. I/We am/are eligible Investor(s) as per the scheme related documents and am/are authorised to make this investment as per the Constitutive documents/ authorization(s). The amount invested in the Scheme is derived through legitimate sources only and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directives 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 confirm that the funds invested in the Scheme, legally belongs to me/us. In event "Know Your Customer" process is not completed by me/us to the satisfaction of the Fund, I/we hereby authorize the Fund, to redeem the funds invested in the Scheme, in favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such other action with such funds that may be required by the law. I / We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. The information given in / with this application form is true and correct and further agree to furnish such other further/additional information as may be required by the Mahindra Manulife Investment Management Private Limited (Formerly known as Mahindra Asset Management Company Private Limited)(AMC) / the Fund and undertake to inform the AMC / the Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished from time to time. That in the event, the above information and/or any part of it is/are found to be false/ untrue/misleading, I/We will be liable for the consequences arising therefrom. I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Fund, its Sponsor/s, Trustees, AMC, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advise to me/us. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the AMC / the Fund, their appointed service providers or representatives responsible. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We hereby authorize and provide my/our consent to the AMC, its Registrar & Transfer Agent and their authorized representatives to contact me/us through various communication modes (including phone / email / SMS) to address my/our investment related queries and/or receive communications pertaining to my/our financial transactions/ non-financial transactions/ promotional/ potential investments and other communications/ materials about the mutual fund products and services offered by the Fund, irrespective of my/our blocking preferences with the Customer Preference Registration Facility. I/We do not have any existing Micro Investments which together with the current Micro Investment application will result in aggregate investments exceeding Rs. 50,000/- in a year (applicable to Micro Investment investors only). I / We confirm that I / We are not United States person(s) under the laws of United States or residents(s) of Canada as defined under the applicable laws of Canada. I/WE HEREBY CONFIRM THAT I/WE HAVE NOT BEEN OFFERED/ COMMUNICATED ANY INDICATIVE PORTFOLIO AND/ OR ANY INDICATIVE YIELD BY THE FUND/AMC/ITS DISTRIBUTOR FOR THIS INVESTMENT. I/We hereby provide my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I/We hereby provide my/our consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios. **FATCA Declaration:** I hereby confirm that the information provided here in above is true, correct and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required any intermediary or by domestic or overseas regulators / tax authorities. **Applicable to NRIs only :** I / We confirm that I am / we are Non-Residents of Indian Nationality / Origin and that the funds are remitted from abroad through approved banking channels or from my / our NRE / NRO / FCNR Account. I / We confirm that the details provided by me / us are true and correct.

SIGNATURE(S)

(Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft / Payment Instrument.)

Sign Here First / Sole Applicant/ Guardian / PoA Holder / Karta	Sign Here Second Applicant	Sign Here Third Applicant
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