

# **COMMON APPLICATION FORM**

Appl. CA

Date: DD / MM / YYYY

	Distributor's ARN/ RIA Code# Sub-Broker's ARN Sub-Broker's Code EUIN
Kotal	entioning RIA/PMS code, I/ We authorize you to share with the Investment Adviser/ Portfolio Manager the details of my/our transactions in the scheme(s) or Mahindra Mutual Fund.  ration for Execution-only "transactions (only where EUIN box is left blank): "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this action is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the eof in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."
SIGNATURE(S)  On the state of t	Sole / First Applicant  Second Applicant  (To be signed by <b>All Applicants</b> )  mmission shall be paid directly by the investor to the AMFI registered distributors based on the investor's assessment of various factors including the service rendered by the distributor.
Existing Unitholder Information (Section I)	If you have, at any time, invested in any Scheme of Kotak Mahindra Mutual Fund and wish to hold your present investment in the same Account, please furnish your Name, Folio Number and PAN details below and proceed to Section Investment Details.  Name of Sole / First Applicant: PAN No.: Folio No.:
	Name of Sole/ First Applicant^:  Name of Guardian^ (in case First Applicant is a Minor)  Guardian's Date of Birth as per PAN (mandatory)  Relationship of Guardian with Minor  O Father  O Mother  O Legal Guardian  Date of Birth of Minor  D D M M Y Y Y Y  Name of Sole Proprietor^ (incase Sole/ First applicant is Proprietorship Firm)  Aname as per Income Tax  Date of Birth of Minor  Aname as per Income Tax  O Mother  O Legal Guardian  O Sole Proprietor^ (incase Sole/ First applicant is Proprietorship Firm)  Aname as per Income Tax  Mobile:  Belongs to: O Self O Spouse O Guardian (for Minor) O Dependent Child O Dependent Parent O Dependent Sibling O Custodian O POA O PMS  Email:  Tel (Res./ Off.)
	Email Address belongs to: O Self O Spouse O Guardian (for Minor investment) O Dependent Child O Dependent Parent O Dependent Sibling O Custodian O POA O PMS  PAN/ PEKRN: Date of Birth/ Incorporation D D M M Y Y Y Y CKYC: CKYC: CKYC: O 1 cr - 5 cr O 5 cr - 10 cr O > 10 cr
	or Net-worth as on (date) DD / MM / YYYY Rs
's Personal Information (Mandatory) (Section II)	Non-Profit Organization" [NPO] O Yes O No  We are falling under "Non-Profit Organisation" [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).  If yes, please quote the NPO Registration Number provided by DARPAN portal:  (If not registered already, please register immediately and confirm with the above information)  Status of Applicant O Resident Individual O Proprietorship O NRI on Repatriation Basis (NRE) O Partnership Firm O NRI on Repatriation Basis (NRE) O Private Limited Company O Body Corporate O Trust O Registered Society O AOP/ BOI  LEI Number (Legal Entity Identifier): For Non individuals only:  Valid till  D D M M Y Y Y Y Y Y
New Applicant's	Name of Second Applicant:^Name as per Income Tax
/ Арр	Mobile: Belongs to: O Self O Spouse O Guardian (for Minor) O Dependent Child O Dependent Parent O Dependent Sibling O Custodian O POA O PMS  Email: Tel (Res./ Off.)
New	Email Address belongs to: O Self O Spouse O Guardian (for Minor investment) O Dependent Child O Dependent Parent O Dependent Sibling O Custodian O POA O PMS
	PAN/ PEKRN:         Date of Birth/ Incorporation         D D M M Y Y Y Y         CKYC:         CKYC:<
	or Net-worth as on (date) DD / MM / YYYYY Rs (should not be older than 1 year)  Relationship with Sole/ First Applicant: Please tick: O Politically Exposed Person (PEP) O Not Politically Exposed Person
	Name of Third Applicant:^Name as per Income Tax
	Mobile: Belongs to: O Self O Spouse O Guardian (for Minor) O Dependent Child O Dependent Parent O Dependent Sibling O Custodian O POA O PMS  Email: Tel (Res./ Off.)
	Email Address belongs to: O Self O Spouse O Guardian (for Minor investment) O Dependent Child O Dependent Parent O Dependent Sibling O Custodian O POA O PMS
	PAN/ PEKRN: Date of Birth/ Incorporation D D M M Y Y Y Y CKYC:
	Gross Annual Income Details in INR (please tick): O < 1 lac O 1 - 5 lac O 5 - 10 lac O 10 - 25 lac O 25 lac - 1 cr O 1 cr - 5 cr O 5 cr - 10 cr O > 10 cr - 5 cr O 5 cr - 10 cr O > 10 cr - 5 cr O 5 cr - 10 cr O > 10 cr - 5 cr O 5 cr - 10 cr O > 10 cr - 5 cr O 5 cr - 10 cr O > 10 cr - 5 cr O 5 cr - 10 cr O > 10 cr - 5 cr O 5 cr - 10 cr O > 10 cr O 1 cr - 5 cr O 5 cr - 10 cr O > 10 cr O 1 cr - 5 cr O 5 cr - 10 cr O > 10 cr O 1 c
	or Net-worth as on (date) Please tick: O Politically Exposed Person (PEP) O Not Politically Exposed Person *I declare that the information is to the best of my knowledge and belief, accurate and complete. I agree to notify Kotak Mahindra Mutual Fund/ Kotak Mahindra Asset Management Co. Ltd. immediately in case there is any change in the above information.
ntact on- licant	Name . PAN Country of Birth Nationality Tax Reference Number (for NRI)
Guardian/ Contact Person if Non- Individual Applicant (Section III)	Gross Annual Income Details in INR (please tick): O < 1 lac O 1 - 5 lac O 5 - 10 lac O 10 - 25 lac O 25 lac - 1 cr O 1 cr - 5 cr O 5 cr - 10 cr O > 10 cr or Net-worth as on (date) DD / MM / YYYY Rs. (should not be older than 1 year)  Please tick, if applicable, O Politically Exposed Person (PEP) O Not Politically Exposed Person  *I declare that the information is to the best of my knowledge and belief, accurate and complete. I agree to notify Kotak Mahindra Mutual Fund/ Kotak Mahindra Asset Management Co. Ltd. immediately in case there is any change in the above information.

(Section IV)	Mode of Operation - Where there is more than one applicant [Please (✓)]  ○ First Applicant only ○ Anyone or Survivor ○ Joint (Default will be any one or survivor, in case of more than one applicant)										
Power of Attorney (PoA) Holder (Section V)		Exposed best of m	Rs (should obsed Person (PEP) O Not Politically I			Country of Birth  Nationality  Tax Reference Num (for NRI)  - 10 lac O 10 - 25 lac O 25 lac - 1 cr O 1 cr - 5 cr O 5 cr - 10 cr O >  lly Exposed Person and complete. I agree to notify Kotak Mahindra Mutual Fund/ Kotak Mahindra As					
	Management Co. Ltd. immediately in case there is any change in the above information.										
Correspondence Details of Sole/ First Applicant (Section VI)	Address for Communication (Full Address Mandatory)				Overseas Address (Mandatory for NRI/ FII Applicants)						
nce D t Appl n VI)	House/ Flat No Street Address				House/ Flat No						
onde / First Sectio	Street Address  City/ Town State			Street Address  City/ Town State							
orresp f Sole (9	Country	Pin Co	nde			Cou			Pin Code		
0 6	Country	Till Co	, ue			Cou			Till Code		
	Scheme Name		Plan	Option/ Sub-option	Frequ		Amount Invested (Rs.)	Cheque No./ OTM/ UTR No. (RTGS/ NEFT)	Payment Details Bank & Branch		
		C	Regular Direct	○ Growth ○ IDCW Payout ○ IDCW Reinvestment	OD OW OF OM	$\circ$ H					
Investment & Payment Details (Section VII)			Regular Direct	○ Growth ○ IDCW Payout ○ IDCW Reinvestment	_	0 B 0 Q 0 H					
estment (se				○ Growth ○ IDCW Payout ○ IDCW Reinvestment	OW OF OM	0 H 0 A					
Nn D		C	Regular Direct	○ Growth ○ IDCW Payout ○ IDCW Reinvestment	OW OF OM	0 H 0 A					
		С	Direct	<ul><li>○ Growth</li><li>○ IDCW Payout</li><li>○ IDCW</li><li>Reinvestment</li></ul>	OW OF OM	O H O A					
*Frequen	cy: D = Daily, W = Weekly, F = Fortnigh	htly, M =	Monthly	, B = Bi-monthly, (	Q = Qu	arter	ly, H = Half Yea	rly, A = Annually			
If you are	e an NRI Investor, please indicate source of	funds for	your inve	estment (Please ✔)	O NR	lE	O NRO	FCNR Other	s (Ple	ase specify)	
Please e	nclose a cancelled cheque of this Bank ir	n case you	ır investı	ment cheque is not	from t	his ac	count, else bank	details of investment	cheque shall be	updated for payout	
tails	Name of Bank										
nt De	Branch City										
ction	Account No.			1					This is th	o O digit No. poyt	
Bank Account Detai (Section VIII)	IFSC Code MICR Code MICR Code This is the 9 digit No. next to your Cheque No.  Account Type Current Savings NRO NRE FCNR Others (Please specify)								Cheque No.		
	& CRS INFORMATION [Please tick (✓)], to the compart of the compar			-	ndividu	ıal in	vestors & HUF s	should mandatorily fi	II separate FATC	A detail form.	
	Type: ☐ Residential ☐ Busin				for add	lress	mentioned in fo	orm/existing address	appearing in Fo	lio)	
Mandat	ory Information		ı	First Applicant/ Mi	inor		Second A	Applicant/ Guardian	Thire	d Applicant	
Place/ Cit	ty of Birth										
Country	of Birth										
If Yes, Ple	applicant(s) / guardian's Country of ease provide the following information [N dicate all countries in which you are resident.	landator	y]	•	-		-		s □ No		
Category			First Applicant/ Guardian in case of Minor		or Second A	Second Applicant/ Guardian		Third Applicant			
Country of Tax Residency – 1**											
Tax Payer Ref. ID No. – 1^											
Tax Identification Type – 1 [TIN or Other, please specify]											
<u> </u>	of Tax Residency – 2**										
<u> </u>	r Ref. ID No. – 2^										
	tification Type – 2 [TIN or Other, please spe of Tax Residency – 3**	ecity]									

\*\* To also include USA, where the individual is a citizen/ green card holder of USA. ^ In case Tax Identification Number is not available, kindly provide its functional equivalent. Country of Tax Residency Proof to be attached where applicable

Tax Payer Ref. ID No. – 3^

Tax Identification Type – 3 [TIN or Other, please specify]

	In case you wish to hold units in c	lemat, please fill this section. Please not	e that you can h	nold units in demat for all	open ended :	schemes (except ETFs	and IDCW options having			
Demat Account Details (Section IX)	In case you wish to hold units in demat, please fill this section. Please note that you can hold units in demat for all open ended schemes (except ETFs and IDCW options had IDCW frequency of less than a month).  NSDL  CDSL									
Demat count Detai (Section IX)	DP Name DP Name									
D Sec	DP ID	Beneficiary Accou	unt No.	DP ID		Benefic	ciary Account No.			
⋖	DP ID Beneficiary Account No.  Please ensure that your demat account details mentioned above are along with supporting documents evidencing the accuracy of the demat account. Bank details of DP will overwrite the existing details.									
	I/We		6	and			do hereby nominate			
	I/ We and do hereby nominate the undermentioned Nominee to receive the Units to my/our credit in Folio No./Application No in the event of my/our death. I/we also understand that all payments and settlements made to such Nominee and signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC/ Mutual Fund / Trustee.									
	NOMINEE DETAILS	NOMINEE 1		NOMINEE 2		NOI	MINEE 3			
	Name of the Nominee  (%) of Allocation**									
ıtly).	Relationship with									
d Joir	Sole/ First Unit-holder									
s hel	Postal Address									
unit										
ial foi										
ption	Mobile No.									
(X r	DOB of Nominee (if Minor)									
ction	Identity Document	O PAN Card	O P.	AN Card		O PAN Card				
s (Se	(Tick any one option)	O Aadhaar (last 4 Digits)	O A	adhaar (last 4 Digits)		O Aadhaar (last	4 Digits)			
etail its he		O Driving Licence	00	riving Licence		O Driving Liceno	te			
on D		O Passport (only for NRI/ PIO/ OC	CI) OP	assport (only for NRI/ PI	O/ OCI)	O Passport (only	for NRI/ PIO/ OCI)			
inati ory fo	Identity Document No.***									
Nom Indat Inatu	** If % is not specified, then the assets shall be distributed equally amongst all the nominees.  *** Provide only number: PAN or Driving Licence or Aadhaar (last 4 digits). Copy of the document is not required. For NRI/ OCI/ PIO, Passport number is acceptable.									
S (Mg		onal for you to provide, if the Nominee		cument is not required. Fo	INN/ OC// FIC	o, rassport number is	acceptable.			
dual(s			( D) (	DAN	D 1 4					
ndivic	Name & Address of Guardian  Date of Birth  PAN  Relationship with Minor Signature Of Guardian									
Nomination Details (Section X) be filled by Individual(s) (Mandatory for units held Singly and optional for units held Jointly). Signature/s as per mode of holding.	NOMINEE DETAILS TO BE PRINTED IN STATEMENT OF HOLDING (Mandatory - tick any one below):  If We want the details of me/ our nominee to be printed in the statement of holding or statement of account, provided to me/ us by the AMC as follows:									
e fille	// We want the details of me/ Nomination: Yes/ No	our nominee to be printed in the sta			ccount, prov	vided to me/ us by t	he AMC as follows:			
To be		ccount statement will by default disp		-	ation: Yes / N	No' without revealin	g nominee name(s).			
	NO NOMINATION  I // We hereby confirm that I // We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in									
		We <b>do not wish to appoint any nomin</b> e(s) and further are aware that in case of								
	issued by Court or other such	competent authority, based on the value				I				
	POA holder cannot nominate. Hence, sole/ all joint holder									
	applicants must sign.	First/ Sole Unitholder: Signature		Unitholder 2: Signatu	re	Unithold	er 3: Signature			
	I/We have read and understood the contents of the Statement of Additional Information/ Scheme Information Document/ Key Information Memorandum of the respective scheme(s) of Kotak Mahindra Mutual Fund. I/We hereby apply for allotment / purchase of Units in the Scheme(s) indicated in Section XI above and agree to abide by the terms and conditions applicable thereto. I/We hereby declare that I/We are authorised to make this investment in the abovementioned Scheme(s) and that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of Income Tax Act, Anti Money Laundering Act, Anti Corruption Act or any other applicable laws enacted by the Government of India from time to time. I/We hereby authorise Kotak Mahindra Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my/our Investment Advisor and/or my bank(s)/Kotak Mahindra Mutual Fund's bank(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.									
		has disclosed all commission (in the form			ayable to the	distributor for the dif	ferent competing Schemes			
	of various Mutual Funds from amongst which the Scheme is being recommended to me / us.  I have examined the information provided by me in this form and to the best of my knowledge and belief it is true, correct, and complete.									
	Applicable to NRIs seeking repatriation of redemption proceeds: I/We confirm that I am/ we are Non-Resident(s) of Indian Nationality / Origin and that I/We have remitted									
,es	funds from abroad through approved banking channels or from funds in my/our NRE/FCNR Account.  FATCA & CRS Declaration: I/We have understood the information requirements of this Form (read along with FATCA & CRS Instructions) and hereby confirm that the									
natuı	information provided by me/ us on this Form is true, correct, and complete. If We also confirm that If We have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same. (Refer guideline No. 11).									
Sign (XI)		understood the instructions on nominat	tion and I/We he	ereby undertake to abide b	y the same.					
and ctior	<ul> <li>I/ We hereby declare that I and directions issued by any govern</li> </ul>	n not making this application for the pu	urpose contrave	ention of any Act, Rules, I	Regulations o	r any statute of legis	lation or any notifications/			
ation (Se	<ul> <li>If We hereby consent to receive MF/ AMC/ KRA to share this k</li> </ul>	nmental or statutory authority from time ving information from Central KYC Reg CYC data with CKYCR, download the in	istry through SI formation from	MS/ E-mail on the above r CKYCR and other partic	egistered nur pating interm	mber/ email address. nediaries as mandated	I also providing consent to d by PMLA Act/ Rules/ SEBI			
Declaration and Signatures (Section XI)	guidelines.	aiving information from central KVC B	egistry through	SMS/ E-mail on the ah	ove registere	d number/email add	ess and to download the			
	<ul> <li>I/ We am/ are providing the co</li> </ul>	onsent to ME/RTA/SEBI registered inter	rmediary to sha	re this KYC data/ applical	ole Aadhaar 🕽	(ML data with KRA a	nd share the data to other.			
	and I/we approve the usage	of these contact details for any commi	unication with	my knowledge and unde KMAMC. Please note all	rtake to infori kinds of inve	m KIVIAIVIC of any cha	inges therein immediately, , Transaction Information,			
	Statement of Account, Annua	al Report and other kind of communication Statement of Account, Annual Report an	on will be sent t	nrough email only instead	of physical, f	or investors who prov	ide their email address.			
			, calcing			-				
	SIGNATURE(S) (To be signed by All Applicants)									
	Sole / F	irst Applicant	Seco	nd Applicant	ı	Third Ap				
	Please tick if the investment	is operated as POA / Guardian	POA Gu	<b>Note :</b> If the fulfilled, the	application is application is	incomplete and any liable to be rejected.	other requirements is not			

#### Please ensure that:

- Your Application Form is complete in all respects & signed by all applicants:

  Name, Address and Contact Details are mentioned in full.

  - Bank Account Details are entered completely and correctly. 11-digit IFSC Code of your bank account is correctly updated in the Application Form.

  - Permanent Account Number (PAN) Mandatory for all Investors (Indian & NRI) Irrespective of the Investment amount.
     Know Your Client (KYC) Mandatory for irrespective of the amount of investment (please refer the guideline 2(d) for more information)
  - Please ensure that Relationship is correctly provided, in case of Mobile Number & Email Address. For investment under HUF capacity, if mobile number and e-mail address is provided of the Karta, please select relationship as 'Custodian'
- Your Investment Cheque / DD is drawn in favour of **< Scheme Name >** dated and signed. Application Number is mentioned on the face of the cheque.
- A cancelled Cheque leaf of your Bank is enclosed in case your investment cheque is not from the bank account that you have furnished in the Application Form.
- Documents as listed below are submitted along with the Application form (as applicable to your specific case)

Document	Companies	Trusts	Societies	Partnership Firms	NRIs/ PIOs	FIIs	Investments through Constituted Attorney
1. Resolution / Authorisation to invest	✓	✓	✓	✓		✓	
2. List of Authorised Signatories with Specimen Signature(s)	✓	✓	✓	✓		1	✓
3. Memorandum & Articles of Association	✓						
4. Trust Deed		✓					
5. Bye-Laws			✓				
6. Partnership Deed				✓			
7. Notarised Power of Attorney							✓
8. Account Debit/ Foreign inward Remittance Certificate fromremitting Bank					✓	1	
All documents in 1 to 8 above should be originals / true copies certified by the Director / Trustee / Company Secretary / Authorised Signatory / Notary Public							

# GUIDELINES FOR FILLING UP THE COMMON APPLICATION FORM

#### 1. GENERAL INFORMATION

- Please fill up the Application Form legibly in English in CAPITAL LETTERS.
  Please read this Memorandum and the respective SAI/ SID carefully before investing. Your application for allotment of units in the Scheme(s) is construed to have been made with a full understanding of the terms and conditions applicable
- to it and the same is binding on you in respect of your investment in the Scheme(s). Application Forms incomplete in any respect or not accompanied by a Cheque are liable to be rejected. In case your investment application gets rejected on account of the same being incomplete in any respect, your investment amount would be
- refunded without interest within 5 days.

  Any correction / over writing in the application form must be signed by the investor. If the Name given in the application is not matching PAN card, application may be
- liable to get rejected or further transactions may be liable get rejected.

  AMC shall not be responsible for direct credit rejects or / payout delays due to
- In terms of SEBI Circular No. SEBI/IMD/CIR No. 4/168230/09 dated June 30, 2009, no entry load will be charged on purchase / additional purchase / switch-in. The commission as specified in the aforesaid circular, if any, on investment made by the investor shall be paid by the investor directly to the Distributor, based on his assessment of various factors including the service rendered by the Distributor.
- The distributor shall disclose all commissions (in the form of trail commission or any other mode) payable to them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to the investor.
- In case of investments in the name of a minor, purchase has to be from minor account or from joint account with guardian (Parent/ Court Appointed) only. The registered guardian in the bank account of the minor should be the same guardian as mentioned in the folio/application. This will ensure seamless payment of redemption/ IDCW amount to the minor's account. Please furnish valid proof of Date of Birth of minor.
- If the name is not mentioned as per the PAN card, the name will be captured as per the PAN Card if attached.
- If the balance in the scheme/ plan is less than the requested amount/ units of redemption request, then the redemption transaction shall be processed for all available units in the scheme/ plan.
- If you have opted to redeem' switch-out 'All Units Free from Exit Load', then the same shall be processed only on FIFO basis.

#### 2. APPLICANT'S INFORMATION

- If you are already a Unitholder in any scheme of the Fund and wish to make your present investment in the same Account, please fill in the Name of Sole/ First Holder, PAN & Folio No. in Section I, of the Application Form and then proceed to Section XI. Your personal information and bank account details updated in your existing account would also apply to this investment.

  If you are applying for units in Kotak Mahindra Mutual Fund for the first time,
- please furnish your complete postal address with Pin Code (P.O. Box No. not enough) and your Contact Nos. This would help us reach you faster.

  Permanent Account Number (PAN) Information (Mandatory) With effect from January 1, 2009, it is mandatory for all existing and new investors (including joint holders, guardians of minors and NRIs) to enclose a copy of PAN card to the application for investing in mutual fund Schemes. Know Your Client (KYC)
- - With reference to SEBI Circular MIRSD/Cir-26/2011 dated December 23, 2011, investors may kindly note w.e.f. January 1, 2012, it is mandatory for all individual/non individual investors to be KYC Compliant. Investors can approach any SEBI
  - registered KRA for doing KYC.

    In the event of KYC Form being subsequently rejected for lack of information/ deficiency/ insufficiency of mandatory documentation, the investment transaction will be cancelled and the amount may be redeemed at applicable NAV, subject to payment of exit load, wherever applicable.

    If you are KYC Complaint, your Change of Address, Change in Name, etc. should be a single of MAV for the Address of t
- be given at KRA for updation.

#### 3. THIRD PARTY PAYMENT

Reference to AMFI Best Practice Guidelines Circular No. 16/2010 -11 on Risk Mitigation process agains Third Party Cheques in Mutual Fund Subscriptions will not be accepted by the Scheme. Definition of Third Party Cheques

- Where payment is made through instruments issued from an account other than that of the beneficiary investor, the same is referred to as Third-Party payment.
- In case of a payment from a joint bank account, the first holder of the mutual fund folio has to be one of the joint holders of the bank account from which payment is made. If this criterion is not fulfilled, then this is also construed to be a third party payment.

However, afore-mentioned clause of investment with Third-Party Payment shall not be applicable for the below mentioned exceptional case.

• Payment for investment by any mode shall be accepted from the bank account of

- the minor, parent or legal guardian of the minor or from a joint account of the minor with parent or legal guardian.
- Custodian on behalf of an FII or a client.

Kotak Mahindra Asset Management Co. Ltd./ Trustee retains the sole and absolute discretion to reject/ not process application and refund subscription money if the subscription does not comply with the specified provisions of Payment Instruments

#### TERMS & CONDITIONS FOR INVESTORS WHO WISH TO HOLD THEIR UNITS IN DEMAT MODE

- The Demat Account Details section on the investment application form needs to completely filled
- Please ensure that you submit supporting documents evidencing the accuracy of the demat account details. Applications received without supporting documents could be processed under the physical mode.

  The units will be credited to the Demat Account only post realisation of payment.
- The nomination details as registered with the Depository Participant shall be applicable to unitholders who have opted to hold units in Demat mode.

  For units held in demat mode, the bank details mentioned on investment
- application form shall be replaced with the bank details as registered with the Depository Participant
- For units held in demat form, the KYC performed by the Depository Participant of the applicants will be considered as KYC verification done by the Trustee / AMC. However, if the transfer of unit to demat account is rejected for any reason whatsoever, the transaction will be liable to be rejected if KYC performed by KRA is
- not attached with the investment application form. In case of Unit Holders holding units in the demat mode, the Fund will not send the account statement to the Unit Holders. The statement provided by the Depository Participant will be equivalent to the account statement.
- Participant will be equivalent to the account statement. If the investor names and their sequence in the investment application form does not match with the Demat Account details provided therein, the units will not be transferred to the Demat Account & units will be held in physical form. The option of holding units in demat form is not being currently offered for investment in IDCW option of schemes/ plans having IDCW frequency of less than a month (ie: Investments in all Daily, Weekly and Fortnightly IDCW Schemes cannot he held in Demat mode). be held in Demat mode)
- In case the application is rejected post banking your payment instrument, the refund instrument will be sent with the bank details furnished in the investment application form & not as available in the Demat Account, post reconciliation of accounts.

#### 5. BANK ACCOUNT DETAILS

- Please furnish the Name of your Bank, Branch and City (i.e clearing circle in which the branch participates), Account Type and Account Number. This is mandatorily required as per SEBI. Applications without this information will be deemed to be incomplete & would be rejected. RTGS IFSC code & NEFT IFSC code would help us
- serve you better.
  b) Please enclose a cancelled Cheque leaf of your Bank in case your investment cheque is not from the same account.

#### 6. E-MAIL COMMUNICATION

If the investor has provided an email address, the same will be registered in our records and will be treated as your consent to receive, Allotment confirmations, consolidated account statement/account statement, annual report/abridged summary and any statutory / other information as permitted via electronic mode /email. These documents shall be sent physically in case the Unit holder opts/request for the same. The AMC / Trustee reserve the right to send any communication in physical mode.

#### 7. INVESTMENT DETAILS

Cheques should be crossed "A/c Payee Only" and drawn in favour of the Scheme in which you propose to invest. In case of discrepancy between the scheme name

## **GUIDELINES**, continued

- mentioned in the investment application form and cheque, the units will be allotted as per scheme name mentioned on the investment application form. If you are residing/ located in a city/ town where we do not have an Official
- Acceptance Point, please draw a Cheque payable at par and submit at your nearest city/ town where we have an Official Acceptance Point.
- Payments by Cash, Stockinvests, Outstation Cheques, Non-MICR Cheques will not be accepted. Post dated cheques will not be accepted except for investments made under Systematic Investment Plan.
- NRI investors are requested to provide debit certificate from their bank for each investment.
- If you are submitting a single cheque for investment in more than 1 schemes/ plan, then please ensure that your investment cheque is drawn in the name of 'Kotak Mahindra Mutual Fund'.

#### 8. NOMINATION DETAILS

- The nomination can be made only by individuals applying for/ holding units on their own behalf, singly or jointly.
- You can make nomination or change nominee any number of times without any restriction.
- Non-individuals including a Society, Trust, Body Corporate, Partnership Firm, Karta of Hindu Undivided Family, a Power of Attorney holder and/ or Guardian of Minor unitholder cannot nominate.
- Nomination is not allowed in a folio of a Minor Unitholder
- If the units are held jointly (i.e., in case of multiple unitholders in the folio), the nomination form can be signed by any or all holders, as per the mode of operation
- Nomination can also be in favour of the Central Government, State Government, a local authority, any person designated by virtue of his office or a religious or charitable trust
- The Nominee shall not be a trust (other than a religious or charitable trust), Society, Body Corporate, Partnership Firm, Karta of Hindu Undivided Family or a Power of Attorney holder
- A Non-Resident Indian may be nominated subject to the applicable exchange control regulations.

  Multiple Nominees: Nomination can be made in favour of multiple nominees,
- subject to a maximum of three nominees. In case of multiple nominees, the percentage of the allocation/share should be in whole numbers without any decimals, adding upto a total of 100%. If the percentage of allocation/share for each of the nominee is not mentioned, the allocation /claim settlement shall be made equally amongst all the nominees. Any odd lot after division shall be assigned / transferred to the first nominee mentioned in the form.
- Every new nomination for a folio/ account shall overwrite the existing nomination. 10.
- 11
- Nomination made by a unit holder shall be applicable for units held in all the schemes under the respective folio/account.

  Death of Nominee/s: In the event of the nominee(s) pre-deceasing the unitholder(s), the unitholder/s is/are advised to make a fresh nomination soon after the demise of the nominee. The nomination will automatically stand cancelled in 12. the event of the nominee(s) pre-deceasing the unitholder(s). In case of multiple nominations, if any of the nominee is deceased at the time of death claim settlement, the said nominees share will be distributed on pro rata basis to surviving nominees

- Death of Unitholder(s): In the event of the unitholder's death, the surviving joint holder(s) shall have the right to continue, modify, or revoke the previously made nominations.
- 14 The Nomination will be registered only when this form is completed in all respects to the satisfaction of the AMC
- In respect of folios/ accounts where the Nomination has been registered, the AMC will not entertain any request for transmission/ claim settlement from any person other than the registered nominee(s), unless so directed by any competent court.
- 9. Employee Unique Identification Number (EUIN): SEBI has made it compulsory for every employee/ relationship manager/ sales person of the distributor of mutual fund products to quote the EUIN obtained by him/her from AMFI in the Application Form. EUIN would assist in addressing any instance of mis-selling even if the employee/relationship manager/sales person later leaves the employment of the distributor. Hence, if your investments are routed through a distributor please ensure that the EUIN is correctly filled up in the Application Form.

However, if your distributor has not given you any advice pertaining to the investment, the EUIN box may be left blank. In this case you are required to provide the declaration to this effect as given in the form.

10. FATCA and CRS related details: Details under FATCA & CRS 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 relevant cases, information will have to be reported to tax authorities / appointed agencies. 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.

Should there be any change in any information provided by you, please ensure you

advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with (Insert FI's name) or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

#### 11. DECLARATION AND SIGNATURES

- Signatures can be in English or in any other Indian language. Thumb impressions must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate under his/her official seal.
- Applications by minors must be signed on their behalf by their guardians. If you are investing through your constituted attorney, please ensure that the POA document is signed by you and your Constituted Attorney. The signature in the Application Form, then, needs to clearly indicate that the signature is on your behalf by the Constituted Attorney.

(Application not complying with any of the above instructions/ guidelines would be liable to be rejected.)

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GEM		Instument Details	<u> </u>	Investment Details	
EDG	Received from:		Scheme		_
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ΡĠ	Please retain this silp, duly acl	knowledged by the Official Collection Center till you i	receive your Account Stateme	nt	Point Stamp & Sign



### KOTAK MAHINDRA MUTUAL FUND

6th Floor, Kotak Infinity, Building No. 21,Infinity Park, Off. Western Express Highway, Gen.A.K. Vaidya Marg, Malad (E), Mumbai - 400 097.

**1800 309 1490 (Toll-free), 044-4022 9101** 

### Computer Age Management Services Ltd.

No 178/10, Kodambakkam High Road, Ground Floor, Opp. Hotel Palmgrove, Nungambakkam, Chennai - 600034.

**2** 044 6110 4034

enq\_k@camsonline.com @ www.camsonline.com



# OTM REGISTRATION FORM Strike off sections that are not applicable

Distributor's ARN/ RIA Code <sup>#</sup>	Sub-Broker's Name & Code	EUIN	FOLIO NO.	DATE
				DD/MM/YYYY
"By mentioning RIA/PMS code, I/ We at Kotak Mahindra Mutual Fund.  Declaration for "Execution-only" transact transaction is executed without any interaction and interaction is executed without any interaction.	ions (only where EUIN box is left bla raction or advice by the employee/re	nk): "I/We hereby confirm tha elationship manager/sales pe	at the EUIN box has been intentionarson of the above distributor/sub b	
Sole/First Holder	Second Holde		Third Holder	
Upfront commission shall be paid directly by the inv		nolders if mode of operation is 'Jo sed on the investor's assessment o	,	ndered by the distributor.
NAME OF SOLE/ FIRST HOLDER :				
NAME OF SECOND HOLDER :				
NAME OF THIRD HOLDER :				
PAN	Sole / First Holder	Second Ho	older Th	nird Holder
Note: Name shall be as per PAN card o	nly			
ONE TIME MANDATE REGIS	TRATION FORM			
UMRN	F o r o f	f i c e u s	e Date	
TICK ( $$ ) Sponsor Bank Code	For Office Use	Utility Code	For Office Us	se
CREATE   ✓ I/We hereby authorize	Kotak Mahindra Mutual Fund	to debit (tick ✓)	SB CA CC SB-NRE	☐ SB-NRO ☐ Other
CANCEL Bank a/c number				
with Bank	IFS	c	/ MICR	
an amount of Rupees			₹	
FREQUENCY Mthly Qylt X	H-Yrly Yrly As & when pr	resented <b>DEBI</b>	IT TYPE Fixed Amount	Maximum Amount
Reference 1	Folio Number	1	Phone No.	
Reference 2  1.1 agree for the debit of mandate processing of the debit of the	Application Number harges by the bank whom I am authorising	to debit my account as per latest s	Email IDschedule of charges of the bank. 2.This is:	to confirm that the declaration
1. I agree for the debit of mandate processing of has been carefully read, understood & made by am authorised to cancel/amend this mandate by			e user entity/ corporate or the bank where	e I have authorised the debit.
PERIOD —	Maximum period of validity o	it this mandate is 40 years only		
То	Signature Primary Accour	nt holder Signature o	of Account holder Sign	nature of Account holder
Maximum period of validity of this manda 40 years only				ame as in Bank records
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one-time process only for each Other investors, who have not Mobile Number and Email Id: Unit holder(s) need to provide the bank account to be registe The Unit holder(s) cheque/ bar Investors are deemed to have information Document, Statem the respective Scheme(s) of Ko One Time Debit Mandate Form OTM Mandate date and OTM Any charges payable by the im be debited to bank account, th OTM Mandate End date should	mitted an OTM form or already rebank account. However, such invergistered for OTM facility, may film tholder(s) should mandatorily palong with the mandate form an ered or bank account verification lek account details are subject to the ad and understood the terms an ent of Additional Information, Ketak Mahindra Mutual Fund.  can be used for Systematic Purcheriod 'From' and 'To' in the mandestor to his/ her bank for registerie mandate contains necessary authous her be more than 40 years from	estors if wish to add a new II the OTM form and submiprovide their mobile number original cancelled cheque (cetter for registration of the iird party verification. d conditions of OTM Facility Information Memorandu hase as well as Lump Sum Falate form are mandatory fing and honouring this marthorisation.	w bank account towards OTM factit duly signed with their name mer and email id on the mandate for a copy) with name and accoust mandate failing which registration, SIP registration through OTM arm, Instructions and Addenda issurchase.  The control of the contro	cility may fill the form. nentioned. form. nt number pre-printed of on may not be accepted. facility, the Scheme used from time to time of
<b>kotak</b> Mutual Fund	OTM REGISTRATION FO	DRM ACKNOWLEDGE illed by Applicant)	MENT SLIP DATE DD	MM YYYY
Folio Number  Bank Name		Δm	nount	
Bank Account No.				Official Acceptance Point
	Please retain this Acknowle	dgement Slip for future reference		Stamp & Sign