

## APPLICATION NO.

												S-2804/17
ARN & Nam			Bra	nch Code		UITY ORIEI			-		in BLOCK Letters) EUIN*	Reference No.
ARN-106907			(or	nly for SBG)						(Employe	E 143763	
Declaration for "exe	ecution-onl	v" transaction		ere EUIN hov is	left blank) (P	efer Instruction	1 (n))				E143763	
* I/We hereby confirm	that the EUI	🕯 box has been	intentionally	y left blank by me/u	s as this is án`"e	execution-only" tra	nsaction with	hout any inter rson of the di	raction or a istributor ar	dvice by the	e employee/relationship manager/s butor has not charged any advisory	ales person of the above fees on this transaction.
	<u> </u>			<u>,</u> ,,,			<u></u>					
SIGNATURE(S)	1st Appli	cant / Guard	lian / Auth	norised Signate	orv 2	nd Applicant /	Authorise	d Signato	orv		3rd Applicant / Authorised	Signatory
· · · · · · · · · · · · · · · · · · ·	n shall be p	aid directly by	the inves	tor to the AMFI re	egistered Distr	ributors based o	n the inves	tors' assess	sment of		ctors including the service rend	
	ription amo	ount is Rs. 1	0,000/- or	more and if you	r Distributor	has opted to re	ceive Tra	nsaction Ch	harges, F	ls. 150 (fo	IO) or first time mutual fund inves Il be issued against the balar	
EXISTING INV			/	will be deducted						. Onits wi	in be issued against the bala	ice amount invested.
1. FIRST APP												
Name (Mr. / Ms. / M/s.)												
Name of Guardia	n											
(in case of Minor) Relationship of G	,	Father	Moth	ner 🗌 Legal C	Guardian [ <b>Ple</b>	ase mandatorily er	close the do	cument evider	ncing the re	lationship of	f Minor with Guardian]	
PAN/PEKRN N (Enclose KYC Acknowle	IO. edgement)						Date of	Birth				
KIN (CKYC Identification No.	.)						AADHA	ARNo				
Email ID								Telep	hone (O)			
Mobile No.									Telep	hone (R)		
0	Country Co	de										
Correspondence Address of												
1st Applicant												
City												
Pin				State								E
Foreign Address	Address fo	r Correspond	ence for NI	RI Applicants only	y ( Please 🖌 )	Indian by Defaul		Foreign	י 🗌			
(Mandatory for NRI / FII )												
City												
Zip												
2. MODE OF H	HOLDING			·								
Single 3. JOINT APP	LICANT		pint	A	nyone or Sur	vivor						
				Second Ap	plicant						Third Applicant	
Name												
PAN /PEKRN (Enclose KYC Acknowl	ledgement)											
KIN (CKYC Identification No.	.)											
AADHAAR No												
4. BANK ACCOL	UNT (Pav	Out) Detail:	s of First	Applicant (Man	datory to atta	ch bank accoun	proof in c	ase the pavo	out bank a	ecount is	different from the source/inves	tment bank account)
Name of Bank												
Branch Name												
and Address												
City											Pin	
Account No.											Account Type (Pl	ease√)
IFS Code	L					(Please)	rovideacon	y of CANCELL	ED cheque	leaf)		FCNR
9 digit MICR Code	• •					(ricase)	ι στιας α τομ	, SI GANGELL	oneque		Current NRE	Others
						EAR HERE —				- — —		·
SBIMUTUAL A PARTNER FO	FUND R LIFE INV (A	onsor : State E estment Mana Joint Venture b	ank of India ger : SBI F etween SBI	a unds Management & AMUNDI)	Pvt. Ltd.	ACKNOWL To be filled in	EDGEN	NENT SL	LIP	APPLIC	ATION NO.	
(To be filled in b Received from :	by the First											Signature,
Scheme		Plan	(✔) 0	option (✔) 🛛 🖸	)ividend Fac	ility(✔) Che	que/ DD A	Amount (Re	s.) Bar	nk and Br	anch Cheque / DD No. &	Date &
		Re	egular	Growth	einvestment ransfer			· · · ·				
Attachments								All pur	rchases ai	re subject i	to realisation of cheque / deman	nd draft

5. FATCA & CRS INFORMATION: For Individuals / Proprietor (Mandatory). Non-Individual investors should mandatorily fill separate FATCA/CRS & UBO Form (Annexure-1).								
	,	tionality / Tax Residency oth		Third Applicant				
First Applicant	(Including Mi	Minor) Second Applicant			Third Applicant			
		ng information (mandatory						
Details		First Applicant (including	-	Second Applic	ant	Third Applicant		
	•				unt			
Country of Birth								
Place/City of Birth								
Nationality								
Country of Tax Residence	cy 1							
Tax Payer Ref. ID No^								
Identification Type [TIN or Other, Please specify	/]							
Country of Tax Residence	cy 2							
Tax Payer Ref. ID No.2								
Identification Type [TIN or Other, Please specify	/]							
Country of Tax Resident	cy 3							
Tax Payer Ref. ID No. 3								
Identification Type [TIN or Other, Please specify	y]							
^ In case Tax Identification Nu this to the form. (Please attac	mber is not availa h additional shee	able, kindly provide its functional e ets if necessary and mention all c	equivalent. If no countries in whice	TIN is yet available or has not chapplicant is a tax residen	ot yet been issu t & provide rele	ed, please provide an explanation and attach evant details)		
6. INVESTMENT AND P		-						
One time Investment	s	Systematic Investment Plan (Sl	P) (Please s	submit SIP Enrolment & OT	M Form)			
Scheme Name								
Plan (Please ✓ )	Regular	Direct		In case of Dividend Trans	fer facility, please	mention target scheme along with plan/option.		
Option (Please ✓ )	Growth	Dividend	Frequency	Scheme / Plan / Option	n			
Dividend Facility (Please ✓)	Reinvest	ment Payout	Transfei	•				
Payment Mode	Cheque	DD (Third Pa	rty Declaration	Mandatory)	- und Transfer	RTGS		
Cheque/D.D. No.	& Date	Cheque / DD Amount (R	s.)	[	and Branch			
7 TAX STATUS (Please	<i>(</i> )							
7. TAX STATUS (Please Resident Individual	✓ )	Pension and Retirem	ent Fund	Government Bo	dy	NGO		
		Pension and Retirema	ent Fund	Government Boo	dy			
Resident Individual					dy			
Resident Individual Resident Minor (through 0		Financial Institutions	iny	Society Trust NPS Trust	dy			
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)	Guardian)	Financial Institutions Public Limited Compa	iny	Society Trust NPS Trust Fund of Fund	dy	LLP PIO NPO		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatriable)	Guardian)	Financial Institutions Public Limited Compa Private Limited Comp	iny	Society Trust NPS Trust Fund of Fund Gratuity Fund	dy	LLP PIO NPO [Please specify]		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatriable)         Sole-Proprietor	Guardian)	Financial Institutions Public Limited Compa Private Limited Comp Body Corporate Partnership Firm FII / FPI	iny	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP	dy	LLP PIO NPO [Please specify] Others		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatri         Sole-Proprietor         HUF	Guardian) able)	<ul> <li>Financial Institutions</li> <li>Public Limited Compa</li> <li>Private Limited Comp</li> <li>Body Corporate</li> <li>Partnership Firm</li> <li>FII / FPI</li> <li>Bank</li> </ul>	iny	Society Trust NPS Trust Fund of Fund Gratuity Fund	dy	LLP PIO NPO [Please specify]		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatri         Sole-Proprietor         HUF         8. DEMAT ACCOUNT E	Guardian) able) DETAILS (OP	Financial Institutions Public Limited Compa Private Limited Comp Body Corporate Partnership Firm FII / FPI Bank TIONAL)	iny any	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI		LLP PIO NPO [Please specify] Others [Please specify]		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI – Minor (Repatriable)         NRI – Minor (Non-Repatri         Sole-Proprietor         HUF         8. DEMAT ACCOUNT E         If you wish to hold unit	Guardian) able) DETAILS (OP <sup>*</sup> s in Demat m	Financial Institutions Public Limited Compa Private Limited Comp Body Corporate Partnership Firm FII / FPI Bank TIONAL) Node, please provide below	ny any 7 details and	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI enclose	ent Master /	LLP PIO NPO [Please specify] Others		
Resident Individual     Resident Minor (through (     NRI (Repatriable)     NRI (Non-Repatriable)     NRI– Minor (Repatriable)     NRI– Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the sec     National Securi	Guardian) able) DETAILS (OP s in Demat m equence of nar	Financial Institutions Public Limited Compa Private Limited Comp Body Corporate Partnership Firm FII / FPI Bank TIONAL) Node, please provide below	ny any 7 details and	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI enclose Latest Clin m matches with that of	ent Master /	LLP PIO NPO [Please specify] Others [Please specify] Demat Account Statement		
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Resident Individual     Resident Minor (through (     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatriable)     NRI –	Guardian) able) DETAILS (OP s in Demat m equence of nar	Financial Institutions Public Limited Compa Private Limited Compa Body Corporate Partnership Firm FII / FPI Bank TIONAL) Hode, please provide below mes as mentioned in the ap	r details and plication form Depositor Participan	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI enclose Central Depository y tt Name	ent Master /	<ul> <li>LLP</li> <li>PIO</li> <li>NPO</li> <li>Others</li> <li>[Please specify]</li> <li>Others</li> <li>[Please specify]</li> </ul>		
Resident Individual     Resident Minor (through 0     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the se     National Securi      Depository     Participant Name     DP ID No.	Guardian) able) DETAILS (OP s in Demat m equence of nar	Financial Institutions Public Limited Compa Private Limited Compa Body Corporate Partnership Firm FII / FPI Bank TIONAL) Hode, please provide below mes as mentioned in the ap	ny any details and plication forr Depositor	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI enclose Central Depository y tt Name	ent Master /	<ul> <li>LLP</li> <li>PIO</li> <li>NPO</li> <li>Others</li> <li>[Please specify]</li> <li>Others</li> <li>[Please specify]</li> </ul>		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI – Minor (Repatriable)         NRI – Minor (Non-Repatriable)         NRI – Minor (Non-Repatriable)         NRI – Minor (Non-Repatriable)         NRI – Minor (Non-Repatriable)         HUF         8. DEMAT ACCOUNT If         If you wish to hold unit         Please ensure that the set         National Securi         Depository         Participant Name         DP ID No.         Beneficiary Account No.	Guardian) able) <b>DETAILS (OP</b> <b>s in Demat m</b> equence of nar <b>ties Deposito</b>	Financial Institutions  Public Limited Compa  Private Limited Comp Body Corporate Partnership Firm Fil / FPI Bank  TIONAL)  mode, please provide below mes as mentioned in the ap pry Limited (NSDL)	or details and plication form Depositor Participan Target ID N	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI  enclose Latest Cli m matches with that of Central Depository y nt Name No.	ent Master / the account / Services (	<ul> <li>LLP</li> <li>PIO</li> <li>NPO</li> <li>Others</li> <li>Others</li> <li>Please specify]</li> <li>Demat Account Statement</li> <li>held with the Depository Participant.</li> </ul>		
Resident Individual         Resident Minor (through (         NRI (Repatriable)         NRI (Non-Repatriable)         NRI – Minor (Repatriable)         NRI – Minor (Non-Repatriable)         NRI – Minor (Non-Repatriable)         NRI – Minor (Non-Repatriable)         NRI – Minor (Non-Repatriable)         HUF         8. DEMAT ACCOUNT If         If you wish to hold unit         Please ensure that the set         National Securi         Depository         Participant Name         DP ID No.         Beneficiary Account No.	Guardian) able) <b>DETAILS (OP</b> <b>s in Demat m</b> equence of nar <b>ties Deposito</b>	Financial Institutions Public Limited Compa Private Limited Compa Body Corporate Partnership Firm FII / FPI Bank TIONAL) Hode, please provide below mes as mentioned in the ap	or details and plication form Depositor Participan Target ID N	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI  enclose Latest Cli m matches with that of Central Depository y nt Name No.	ent Master / the account / Services (	<ul> <li>LLP</li> <li>PIO</li> <li>NPO</li> <li>Others</li> <li>Others</li> <li>Please specify]</li> <li>Demat Account Statement</li> <li>held with the Depository Participant.</li> </ul>		
Resident Individual     Resident Minor (through (     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatriable)     HUF     S. DEMAT ACCOUNT I     If you wish to hold unit     Please ensure that the set     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.     Please note wherever units	Guardian) able) DETAILS (OP s in Demat m equence of nar ties Deposito a are allotted in	Financial Institutions  Public Limited Compa  Private Limited Comp Body Corporate Partnership Firm FII / FPI Bank  TIONAL)  Node, please provide below mes as mentioned in the ap pry Limited (NSDL)  Demat Mode, Statement of A	ny any details and plication forr Participan Target ID N Account will be TEAR HERE	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI Central Depository y tt Name social Structure S	ent Master / the account / Services ( ry concerned.	LLP PIO PIO PIO PIease specify] Others [Please specify] Demat Account Statement held with the Depository Participant. India) Limited (CDSL)		
Resident Individual     Resident Minor (through 0     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the set     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.     Please note wherever units     Any communication in o	Guardian) able) DETAILS (OP s in Demat m equence of nar ties Deposito a are allotted in	Financial Institutions  Public Limited Compa  Private Limited Comp Body Corporate Partnership Firm Fil / FPI Bank  TIONAL)  mode, please provide below mes as mentioned in the ap pry Limited (NSDL)	ny any details and plication forr Participan Target ID N Account will be TEAR HERE	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI  enclose Central Depository y tt Name e issued by the Deposito he Registrar or the Invest	ent Master / the account / Services ( ry concerned.	LLP PIO PIO PIO PIease specify] Others [Please specify] Demat Account Statement held with the Depository Participant. India) Limited (CDSL)		
Resident Individual     Resident Minor (through (     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the se     National Securi      Depository     Participant Name     DP ID No.     Beneficiary Account No.      Please note wherever units     Any communication in o     Investment Manager :	Guardian) able) DETAILS (OP s in Demat m equence of nar ties Deposito s are allotted in connection with	Financial Institutions  Public Limited Compa  Private Limited Comp Body Corporate Partnership Firm FII / FPI Bank  TIONAL)  Node, please provide below mes as mentioned in the ap pry Limited (NSDL)  Demat Mode, Statement of A	ny any details and plication forr Participan Target ID N Account will be TEAR HERE	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI  enclose Latest Clim matches with that of Central Depository y th Name issued by the Deposito he Registrar or the Inves F	ent Master / the account / Services ( ry concerned.	LLP PIO PIO PIO PIease specify] Others [Please specify] Demat Account Statement held with the Depository Participant. India) Limited (CDSL)		
Resident Individual     Resident Minor (through (     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri     Sole-Proprietor     HUF      DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the se     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.     Please note wherever units     Any communication in o     Investment Manager :     SBI Funds Management     (A Joint Venture betweit)	Guardian)  DETAILS (OP s in Demat m quence of nar ties Deposito are allotted in connection with nt Pvt. Ltd. en SBI & AMU		ny any details and plication form Depositor Participan Target ID N Account will be TEAR HERE ddressed to th	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI Central Depository y tt Name No. E issued by the Deposito he Registrar or the Invest	ent Master / the account / Services ( ry concerned. ment Manage Registrar: Computer Age	LLP PIO PIO PIO PIease specify] Others [Please specify] Demat Account Statement held with the Depository Participant. India) Limited (CDSL)		
Resident Individual     Resident Minor (through 0     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the set     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.      Please note wherever units     Any communication in o     Investment Managemer     (A Joint Venture betwe     9th Floor, Crescenzo, C	Guardian) able) DETAILS (OP s in Demat m equence of nar ties Deposito are allotted in connection with nt Pvt. Ltd. en SBI & AMU -38 & 39,		ny any details and plication form Depositor Participan Target ID M Account will be TEAR HERE ddressed to the ENO : 1800 4	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI Central Depository y tt Name No. E issued by the Deposito he Registrar or the Inves	ent Master / the account / Services ( / ry concerned. sment Manage Registrar: Computer Age SEBI Registrat Rayala Tower	LLP     PIO     PIO     IPlease specify]     Others     [Please specify]     Others     [Please specify]     Others     [Please specify]     Demat Account Statement held with the Depository Participant. India) Limited (CDSL)  r Management Services Pvt. Ltd., ion No. : INR00002813) s, 158, Anna Salai,Chennai – 600 002		
Resident Individual     Resident Minor (through (     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri     Sole-Proprietor     HUF      DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the se     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.     Please note wherever units     Any communication in o     Investment Manager :     SBI Funds Management     (A Joint Venture betweit)	Guardian)  DETAILS (OP s in Demat m equence of nar ties Deposito s are allotted in connection with nt Pvt. Ltd. en SBI & AMU -38 & 39, Complex.		ny any details and plication form Depositor Participan Target ID N Account will be TEAR HERE ddressed to th	Society Trust Fund of Fund Gratuity Fund Gratuity Fund AOP BOI  enclose Enclose Central Depository y th Name No. E issued by the Deposito he Registrar or the Inves Som T	ent Master / the account / Services ( ry concerned. sment Manage Registrar: Computer Age SEBI Registrat Rayala Tower fel: 022 - 277	LLP     PIO     PIO     IPlease specify]     Others     [Please specify]     Others     [Please specify]     Others     [Please specify]     Demat Account Statement held with the Depository Participant. India) Limited (CDSL)  r Management Services Pvt. Ltd., ion No. : INR00002813) s, 158, Anna Salai,Chennai – 600 002		

Cender         Mais         Forus         Otor         Mais         Forus         Otor         Father's Name         Spaces A Na	9. OTHER PERSO	NAL INFORMATIC	JN – (Please ✔) First Applic	ant	Second	Applicant		Tł	nird Appli	cant	
Spouls's Name	Gender				Male Fe	male	Other	_		_	Other
Carbon of Birth      Comparison      Com	Father's Name										
Opcurpation (Peece / N       Professional Business Berker Professional Professional Berker Professional Professional Berker Decer Professional Professional Berker Decer Professional Decer Profesional D	Spouse's Name										
(Please r)	Date of Birth										
Preservery: <ul> <li>Status - 1 C.</li> <l< th=""><th></th><th>[ [ [ [ [</th><th>Government Service Private Sector Service Public Sector Service Student Doctor</th><th>Agriculturist Retired Housewife</th><th>Government Servi     Private Sector Ser     Public Sector Ser     Student     Doctor</th><th>ce Agr rvice Ret rice Hou</th><th>riculturist tired usewife</th><th>Governmen Private Sec Public Sect Student Doctor</th><th>t Service tor Service</th><th>Agr</th><th>riculturist tired usewife</th></l<></ul>		[ [ [ [ [	Government Service Private Sector Service Public Sector Service Student Doctor	Agriculturist Retired Housewife	Government Servi     Private Sector Ser     Public Sector Ser     Student     Doctor	ce Agr rvice Ret rice Hou	riculturist tired usewife	Governmen Private Sec Public Sect Student Doctor	t Service tor Service	Agr	riculturist tired usewife
Networth as of date		ome in Rs. [ [	5-10 Lacs	10-25 Lacs	5-10 Lacs	10-:	25 Lacs	5-10 Lacs		10-	25 Lacs
Politically Exposed Person (PEP)  vs	OR Networth in R	ls.									
Type of address given at KRA       Residential	Networth as of da	ate									
I. NOMINATION : I wish to nominate the following percent is proceeds in the percent of my dealth. (Win effect from 0104/2011, for individual investors applying with angle holding. Nominato is memoticity. However, it ease violation to wish to nominate bases signing percent is the Nominee 1   Name of the Nominee No	Politically Expose	d Person [PEP]	Yes No	Related to PEP	Yes No	Relate	d to PEP		No	Related	d to PEP
single holding. Nonination is mandatory. However, in case you done wish to nominate please sign in point 11) Nomine 2 Nomine 4 Nomine 4 Nomine 4 Nomine 4 Nomine 4 Nomine 2 Nomine 4 Nomine 2 Nomine 4 No							• I				
Name of the Nominee         Image: State Nominee			owever, in case you do not	wish to nominate	please sign in point 11	)	t from 01/0	4/2011, for indivi		rs apply	ying with
th case before is Minor Percentage (Mandatory II more har one Nominee) Percentage (Mandatory II more har Nominee) Percentage (Mandatory II more har one Nominee) Percentage (Percentage (Mandatory II more har one Nominee) Percentage (Percentage (Mandatory II mo	Name of the Nominee	•									
Relationship with Nominee       Date of Birth' (Mandatory II Nominee's IM Mont) <ul> <li>Signature of Nominee'Guardian (Mandatory II Nominee's IM Mont)</li> <li>(Weakatary incase Minor Nominee')</li> <li>(Weakatary incase Minor Nominee')<th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></li></ul>											
Date of Birth* (Mandatory # Nominee is Minor)			)								
Signature of Nominee/Guardian ("Mandatory in case of Minor Nomines)	· ·										
11. NOMINATION : I do not wish to nominate any person at the time of making the investment.         Signature         12.INSTITUTIONAL INVESTORS ADDITIONAL INFORMATION         Name of Contact Person         is the entity involved / providing any of the following services [Ves] No       Gaming / Gambing / Lottery Services (e.g. Casinos, Betting Syndicates) [Ves] No         For Foreign Exchange / Money Changer Services       Ves       No         Money Lending / Pawning       Ves       No         NOTE: Kon-Individual Investors should mandatorily fill separate FATCA/CRS & UBO Form (Annexure-1) alongywith this form.       Ves       No         13. DECLARATION :       We confirm that the information of any act, ties, subjector on the sectemes of SS Mual Fad (We herely confirm and declare that (We here to contents of all the scheme related documents and We herely confirm and declare that (We herely confirm and the information of any act, ties, subjector on the scheme of SS Mual Fad (We for GPG) (SS M											
Signature         12.INSTITUTIONAL INVESTORS ADDITIONAL INFORMATION         Name of Contact Person         13.the entity involved / providing any of the following services   vs     No       Gaming / Gambling / Lottery Services (e.g. Casinos, Betting Syndicates)   vs   vs   No         Store entity involved / providing any of the following services   vs     No       Money Lending / Pawning         vs   No         NOTE: Non-Individual Investors should mandatorily fill separate FATCACRS & UBO Form (Annexuce-1) alongwith this form.         vs   ss   vs   vs   vs   vs   ss   vs   vs   vs   ss   vs   vs   vs   vs   ss   vs			Ø					$\otimes$			
Name of Contact Person       Is the entity involved / providing any of the following services       Yes       No       Garning / Garning / Garning / Garning / Parving       Is the entity involved / providing any of the following services       Yes       No       Money Lending / Parving       Is the entity involved / providing any of the following services       Yes       No       Money Lending / Parving       Is the entity involved / providing any of the following services       No       Money Lending / Parving       Is the entity involved / parving       Is t	(*Mandatory in case of Minc	or Nominee)		ne time of makir	-			$\otimes$			
Is the entity involved / providing any of the following services   Yes   No Gaming / Gambing / Cattery Services (e.g. Casinos, Betting Syndicates)   Yes   No Rore Lending / Pawning   Yes   No Rore Lending   Yes	(*Mandatory in case of Minc 11. NOMINATION :	or Nominee)		ne time of makir	-			⊗			
(i) We have not received or been induced by any rebate or gifts, directly or indirectly, in making this investment; (ii) the amount invested by be invested by melus in the scheme(s) of SBI Mutual Fund ( <b>'the Fund</b> ') is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, regulators or any statute or legislation or any other applicabile laws or any onficiations, directions issued by any governmental or statutory authority from time to time; (iii) the monits invested by an in the scheme of the Fund hood not attract the provisions of Foreign Contribution Regulators Act ( <b>'FCRA</b> '); (iv) We amare aware that U.S. person/resident of Canada, (i) the ARN holder has disclosed to melus; all the commissions (in the form of trait commissions on any other mode), payable to him there of the different or person set over a statutory authority of the another of the different or the subscriptions have been mented from abroad through approved banking channels or from my/our Non Resident G thums and Articles of Association of the Company, Bye laws, Trust Deed or Patnership Deed and resolutions passed by the Company / Fim / Trust, IWe anviare authorised to enter into the transactions for and on behalf of the Company/Fim / Trust; (iv) "" We anviare Non Resident G thanal Counce (Tota) and the advice set or my/our Non Resident G thums and and SDP installments in a colling 12 months period or financial year does not toxed the 50,0000'. (Ruggees Fifty Trousand); (iv) all information provided in this application form topylers with an anorgenetic and correct to the best or my/our knowledge and belied and live all have gover and the advice the advice vous any toff and or disclose, share, remitin any form, mode or manner, all <i>A</i> any of the information or works without any or displation advices or such of the specification form mitige and the spe	(*Mandatory in case of Mind 11. NOMINATION : Signature 12.INSTITUTIONA	I do not wish to no	ominate any person at th		-			8			
	(*Mandatory in case of Mind 11. NOMINATION : Signature 12.INSTITUTIONA Name of Contact Is the entity involved / For Foreign Exchange NOTE: Non-Individual	I do not wish to no I do not wish to no I INVESTORS AI Person / providing any of the / Money Changer Ser investors should mar	DDITIONAL INFORMA         DDITIONAL INFORMA         following services         Yes         vices         Yes         readatorily fill separate FATC	.TION □ No G □ No M CA/CRS & UBO For	ng the investment.	ig vith this form	1.	sinos, Betting S	C	Yes	No
Date Place	(*Mandatory in case of Mind 11. NOMINATION : Signature 12.INSTITUTIONA Name of Contact Is the entity involved / For Foreign Exchange NOTE: Non-Individual 13. DECLARATION : (i) We have not received or b sources and is not held or des from time to time; (iii) the mon Person' under the US Securit of trail commission or any othe of Association of the Compan IWe an/are Non Resident of *** IWe do not hold a Permar 12 months period or financial and I/We shall be liable in cass provided by me/us, including, agencies including but not lim on a need to know basis, with be required by you from time to and documentation from inwe the Fund may be obliged to sh appropriate withholding from th or close or suspend my accou the FATCA/CRS Instructions Terms and Conditions below * Applicable to other than Ind SIGNATURE(S) (ALL Applicants	I do not wish to not I do not	DDITIONAL INFORMA DDITIONAL INFORMA following services Yes vices Yes ndatorily fill separate FATC mation provided in this form is true rgifs, directly or indirectly, in making travention of any act, rules, regular hemes of the Fund do not attract the la are not eligible for investments wif for the different competing schemes artnership Deed and resolutions pa- lthat funds for the subscriptions hav old only a single PAN Exempt KYC 0,000/- (Rupees Fifty Thousand); (it nation is found to be false or untrue information as and when provided by the tiligence Unit-India, the tax/reven g me/us of the same; (xi) I/We shall ce with tax information sharing laws, a you within 30 days should there be int with relevant tax authorities; (c) I/A n relation thereto; (d) as may be required that I am / we are required to conta information provided by me/us on tax.	No G No Mo RACRS & UBO For e & accurate. I/We hav this investment; (ii) the tions or any statute or le e provisions of Foreign th the Fund and I/We ar sof various mutual funds assed by the Company e been remitted from ab Reference No. (PEKRN x) all information provide or misleading or misre py me/ us to the Fund, its ue authorities in India o I keep you forthwith info e any change in any info We am aware that the Fu irred by domestic or over act my tax advisor for an this Form including the t nvestments"	aming / Gambling / Lo Gaming / Gambling / Lo Toney Lending / Pawnin rm (Annexure-I) alongy e read and understood the co amount invested/to be investe gislation or any other applicat Contribution Regulations Act m/are not a U.S. person/reside s from amongst which a scherr n/are not a U.S. person/reside s from amongst which a scherr / Firm / Trust, I/We am/are aut road through approved bankir I) issued by KYC Registration ed in this application form toge presenting; (x) that we author is Sponsor, AMC, trustees, their routside India wherever it is le rmed in writing about any cha SIS (a) the Fund may be required the Fund may also be required to pr seas regulators/ tax authorities y questions about my/our tax r	g vith this form Intents of all the side d by me/us in the side laws or any no ("FCRA"); (iv) I/W nt of Canada; (v) le of the Fund is bi- horised to enter in g channels or fron Agency and also ther with its anne- ze you to disclose employees/RTA gally required an nges/modification ed to seek addition n circumstances svide information s, the Fund may al esidency; (f) I hav	scheme relate scheme (s) of 5 otifications, dir /e am/are awa the ARN hold eing recomment to the transac m my/our Nom to confirm that the excures is/are tr e, share, remi s or any Indiar d other such m n to the inform nal personal, ta (including if th to any institution los be constrain e understood nd complete.	sinos, Betting S ad documents and l/ SBI Mutual Fund ("th ections issued by an are that a U.S. persoo ler has disclosed to m ended to me/us; (vi) * tictions for and on beh n Resident External/C he aggregate of lump rue and correct to the ti nany form, mode o nor foreign governme egulatory/investigatit vation provided or am x and beneficial owne ie Fund does not reco ons such as withhold ined to withhold and p the information requi	We hereby conf e Fund") is derivy y governmental n (within the defi re/us all the comp as per the Memm alf of the Compa alf of the Compa alf of the Compa as the	Tyes irm and c ed throug or statuto nition of the missions or and um a ny/Firm/T (FCNR Ac stallment: nowledge ny of the i or judicial uch other al informat d certain c sertification purpose from my// form (read	No declare that h legitimate ry authority he term 'US (in the form and Articles Frust; (vii) ** cocount; (viii) ** cocount; (viii) s in a rolling e and belief information authorities/ third party, third party, third party, third party, of ensuring our account d along with

Date
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