

Channel Partner / Agent Information

Serial No:EQ

Distributor's ARN & Name ARN-106907	Sub-broker's ARN (Code)	Sub-broker Code (internal)	EUIN* (Employee Unique Identification Number) E143763	Registered Investment Adviser (RIA) Code
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ISC's signature & Time Stamping

* Declaration for "Execution only" transaction (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 transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Transaction charges For ₹ 10,000 and above:
 Existing Investor-₹ 100 New Investor-₹ 150

First/Sole Applicant/ Guardian	Second Applicant	Third Applicant
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Upfront commission shall be paid directly by the investor to the AMFI-registered distributors based on the investors' assessment of various factors including services rendered by the distributor.

1. Existing Investor Information (Please fill in your Folio No. and then proceed to Section 3)

Please note that applicant details and mode of holding will be as per existing Folio Number. CKYC compliant Yes No (if no, please provide CKYC form & proof/additional documents. If yes, please provide 14 digit CKYC Number)

Folio No	
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2. New Investor Information (refer instruction 2)

Name of First/Sole Applicant Gender* Male Female Others Name and DoB as per Aadhaar card

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Permanent Account Number (PAN)* Aadhaar Card No.* Date of Birth*

Central KYC Number CKYC Proof attached (Mandatory)

Name of Guardian (in case of First / Sole Applicant is a Minor)/Contact Person-Designation (in case of non-individual Investors) / POA Holder Name

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Permanent Account Number (PAN)* Aadhaar Card No.* Relationship

Central KYC Number CKYC Proof attached (Mandatory)

Father's name (mandatory if PAN/Aadhaar not provided)

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Go Green Services (Save The Future): Please provide Contact Details of First / Sole Applicant

E-Mail

STD Code Telephone Mobile*

Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: Please tick (✓)

Account Statement Annual Report Other Statutory Information

Mode of Holding [Please (✓)] Single Joint Anyone or Survivor

Address of First / Sole Applicant

TOWN CITY/ DISTRICT STATE PIN CODE*

Overseas Address (in case of NRIs/FIIs) (Mandatory)

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Name of Second Applicant Gender* Male Female Others Name and DoB as per Aadhaar card

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Permanent Account Number (PAN)* Aadhaar Card No.* Date of Birth*

Central KYC Number CKYC Proof attached (Mandatory) Mobile*

Name of Third Applicant Gender* Male Female Others Name and DoB as per Aadhaar card

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Permanent Account Number (PAN)* Aadhaar Card No.* Date of Birth*

Central KYC Number CKYC Proof attached (Mandatory) Mobile*

In case of not having Aadhaar number, please provide the letter issued by UIDAI containing proof of 'Application for Aadhaar enrolment' The application form will not be processed in case of not furnishing CKYC docs & Aadhaar number.

To be submitted along with the application form: 1. Your FATCA-CRS Details (Foreign Account Tax Compliance Act) & KYC Additional Details (if not already submitted), and 2. Ultimate Beneficial Owner(s) (UBO) information (for non-individuals only). Please quote the Central KYC (CKYC) number in the boxes provided above or submit your filled-in CKYC Form incase of new investor and additional CYKC form incase of existing investors, irrespective of the investment amount. The forms are available on our website.

*Mandatory

3. KYC details (Mandatory) (refer instruction 3) Individual Non-Individual (Please attach mandatory FATCA-CRS Annexure for Entities including UBO)

Status of First/Sole Applicant [Please (✓)] <input type="checkbox"/> Listed Company <input type="checkbox"/> Unlisted Company <input type="checkbox"/> Individual <input type="checkbox"/> Minor through guardian <input type="checkbox"/> HUF <input type="checkbox"/> Partnership <input type="checkbox"/> Society/Club <input type="checkbox"/> Company <input type="checkbox"/> Body Corporate <input type="checkbox"/> Trust <input type="checkbox"/> Mutual Fund <input type="checkbox"/> FPI <input type="checkbox"/> NRI-Repatriable <input type="checkbox"/> NRI-Non-Repatriable <input type="checkbox"/> FII/Sub account of FII <input type="checkbox"/> Fund of Funds in India <input type="checkbox"/> QFI <input type="checkbox"/> Others..... (please specify)	Occupation Details [Please (✓)] <i>(To be filled only if the applicant is an individual)</i> First Applicant <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others..... (please specify) Second Applicant <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others..... (please specify) Third Applicant <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Government Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others..... (please specify)	Gross Annual Income (in ₹) [Please (✓)] First Applicant <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore (or) Net-worth (Mandatory for non-individuals) ₹ as on [] [] [] [] [] [] [] [] [] [] (Not older than one year) Second Applicant <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore (or) Net-worth [] [] [] [] [] [] [] [] [] [] Third Applicant <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore (or) Net-worth [] [] [] [] [] [] [] [] [] []	PEP Status First Applicant For Individuals [Please (✓)] Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors) <input type="checkbox"/> I am PEP <input type="checkbox"/> I am related to PEP <input type="checkbox"/> Not Applicable For Non-Individuals providing any of the below mentioned services [Please (✓)] <input type="checkbox"/> Foreign Exchange/Money Changer Services <input type="checkbox"/> Gaming/Gambling/Lottery/Casino Services <input type="checkbox"/> Money Lending/Pawning <input type="checkbox"/> None of the above Second Applicant <i>(To be filled only if the applicant is an individual)</i> <input type="checkbox"/> I am PEP <input type="checkbox"/> I am related to PEP <input type="checkbox"/> Not Applicable Third Applicant <i>(To be filled only if the applicant is an individual)</i> <input type="checkbox"/> I am PEP <input type="checkbox"/> I am related to PEP <input type="checkbox"/> Not Applicable
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4. FATCA-CRS DETAILS For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA-CRS Annexure

The below information is required for all applicant(s) / guardian / PoA holder

Category	First Applicant/Guardian	Second Applicant	Third Applicant
1. Are you a Tax Resident of Country other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is your Country of Birth/ citizenship other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Is your Residence address / Mailing address / Telephone No. other than in India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Is the PoA holder / person to whom signatory authority is given, covered under any of the categories 1, 2 or 3 above?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered YES to any of above, please provide the below details

Country of Tax Residence			
Nationality			
Tax Identification Number ^{\$} or Reason for not providing TIN			
Identification Type (TIN or Other, please specify)			
Residence address for tax purposes (include City, State, Country & Pin code)			
Address Type	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
City of birth			
Country of birth			

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

FATCA-CRS Instructions

Details under FATCA-CRS/Foreign Tax Laws: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income Tax Rules 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities/appointed agencies. If you have any questions about your tax residency, please contact your tax advisor. Should there be any **change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.** Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

If you are a US citizen or resident or greencard holder, please include United States in the Country of Tax Residence field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation with supporting documents and attach this to the form.

5. Bank Account Details of First/Sole Applicant (as per SEBI Regulations it is mandatory) (refer instruction 5)

Account No															
Name of the Bank						Branch									
Branch Address						Bank City (redemption will be payable at this location)									
Cheque MICR No						Account Type [Please (✓)]	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE* <input type="checkbox"/> NRO* <input type="checkbox"/> FCNR* <input type="checkbox"/> Others.....								
RTGS / NEFT / IFSC Code						*If the payment is by DD or source of fund is not clear on the Cheque leaf, please provide a copy of FIRC.									

6. Mode of payment of redemption/dividend proceeds via Direct credit/NEFT/Other Mode (refer instruction 6).

Direct Credit is now available with: Axis Bank, BNP Paribas Bank, Citibank, Deutsche Bank, HDFC Bank, HSBC Bank, ICICI Bank, IDBI Bank, IndusInd Bank, Kotak Mahindra Bank, SBI, Standard Chartered Bank, YES Bank. If your bank falls in this list your Redemption/ Dividend proceeds will be directly credited to your account. Alternatively, you will receive the payment through NEFT mode based on the bank details available. Otherwise, payment will be made by way of a cheque/demand draft/warrant.

7. Payment Details: Please issue a separate Cheque/Demand Draft favouring the scheme you wish to invest/One Time Mandate (OTM) (refer instruction 7)

Scheme Name			
Plan	<input type="checkbox"/> Regular <input type="checkbox"/> Direct		<input type="checkbox"/> Regular <input type="checkbox"/> Direct
Option	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Re-Investment <input type="checkbox"/> Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Others Dividend Frequency: (For Fixed Income Funds only) <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Annual Dividend Sweep Target Scheme (Fund) </div> <div style="width: 30%;"> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Re-Investment <input type="checkbox"/> Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Others Dividend Frequency: (For Fixed Income Funds only) <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Annual Dividend Sweep Target Scheme (Fund) </div> <div style="width: 30%;"> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Re-Investment <input type="checkbox"/> Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Others Dividend Frequency: (For Fixed Income Funds only) <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Annual Dividend Sweep Target Scheme (Fund) </div> </div>		
(If an investor fails to specify the option, he will be allotted units under the default option/suboption of the Target scheme.) Any / each correction carried out in selecting the target scheme has to be counter-signed by the investor(s) to make it a valid selection			
Amount Invested (₹)			
DD Charges (₹)			
Net Amount Paid			
Payment Details			
<input type="checkbox"/> OTM <input type="checkbox"/> Cheque <input type="checkbox"/> DD Number <input type="checkbox"/> RTGS <input type="checkbox"/> Fund Transfer			
Bank/Branch			

#Dividend Sweep Option (Target Fund)..... Regular Growth Direct Growth

In case of third party payment (refer instruction 7): Please download (www.sundarammutual.com) and attach the third party declaration form

8. DEMAT Account Details (refer instruction 8)

<input type="checkbox"/> National Securities Depository Ltd.	Depository Participant		
<input type="checkbox"/> Central Depository Services (India) Ltd.	DP ID Number		Beneficiary Account Number

Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the application form.

9. Please indicate details of your SIP (refer instruction 9) (skip this section if you wish to make a one-time investment)

Mode of SIP Post-dated cheques (please provide the details below) OTM/NACH (please submit SIP Registration Form)

SIP Period (For Post-Dated Cheques)	SIP Date	SIP Frequency				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">SIP Starting</td> <td style="width: 50%;">SIP Ending</td> </tr> <tr> <td></td> <td></td> </tr> </table>	SIP Starting	SIP Ending			for Monthly/Quarterly frequency only <input type="checkbox"/> 1 <input type="checkbox"/> 7 <input type="checkbox"/> 14 <input type="checkbox"/> 20 <input type="checkbox"/> 25	<input type="checkbox"/> Weekly (Minimum amount ₹ 1000 Every Wednesday. Minimum No of installments 5) <input type="checkbox"/> Monthly (Minimum amount ₹ 250 Minimum No of installments 20) <input type="checkbox"/> Quarterly (Minimum amount ₹ 750 Minimum No of installments 7)
SIP Starting	SIP Ending					
No. of PDCs	First SIP Cheque No	Last SIP Cheque No				
Each SIP Amount ₹	Refer Guide to investing through SIP					

Turn overleaf for Declaration & Signature (Mandatory) → → →

Acknowledgement Sundaram Asset Management Company Limited, CIN: U93090TN1996PLC034615, I & II Floor, 46 Whites Road, Chennai - 600 014. Contact No. 1860 425 7237 (India) +91 44 4083 1500 (NRI)

Received From Mr./Mrs./Ms.
 Communication in connection with the application should be addressed to the Registrar **Sundaram BNP Paribas Fund Services Limited**, Registrar and Transfer Agents, Unit: Sundaram Mutual Fund, Central Processing Center, 23, Cathedral Garden Road, Nungambakkam, Chennai-600034. Contact No. 1860 425 7237 (India) +91 44 4083 1500 (NRI).

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ISC's Signature & Stamp

Please Note: All Purchases are subject to realisation of cheques / demand drafts.

