## **Common Application Form** (For Lumpsum / Systematic Investments)





🗌 No

🗌 No

No

Proprietorship

Retired

Charity

Zip code

Ħ

No

Firm
Artificial Juridical Person

Sr. No.: Please refer the instructions while filling the Application Form. Tick (1) Whichever is applicable. (Strike out which is not required) DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Baroda Pioneer Mutual Fund) **Distributor / Broker ARN** ARN- 0988 Sub-Broker Code Employee Code Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors incuding the service rendered by the distributor. **Existing Folio Number:** SIP Form Attached PAN AND KYC COMPLIANT STATUS DETAILS (Mandatory) PAN # (Refer Instruction IV) KYC Compliant Status\*\* (attach proof) (Refer Instruction IV) ☐ Yes First Sole / Applicant ☐ Yes Guardian\* Second Applicant Yes Third Applicant Yes \*If the First Applicant is Minor, then please state the details of Parent / Guardian. # Please attach PAN proof. \*\*Refer Instruction IV Occupation of the Professional Aariculture Business Service Housewife applicant Politics PIO Entertainment NGO Sportsperson (Mandatory, please ✓) Partnership HNI Public Co. - Listed Public Co. - Unlisted Societies П FII Builder Consultant Others Tax status of the Individual RI Individual NRI Hindu Undivided Family (HUF) Company Body of Individual Applicant (Mandatory, please Association of Persons (Trusts) Association of Persons Local Authority ₹ 5 lakh to ₹ 25 lakh
₹ 25 lakh to ₹ 1 crore SOLE / FIRST APPLICANT'S PERSONAL DETAILS (Please fill in LETTERS use one box for one alphabet leaving one box blank between two words, as it appears in your Bank Account) Name Mr Ms Name of the contact Person in case of Non-Individual Date of Birth Guardian Name (if Sole/ First applicant is a Minor) Mr Ms M/s Natural Guardian (Father & Mother) Legal Guardian (Court appointed Guardian) Address [P. O. Box Address is not sufficient] (Indian address in case of NRIs/ FIIs) City Pincode (Mandatory) State Country **Contact Details : Phone O** Extn. Fax R Mobile E-mail 1 E-mail 2 I/We wish to receive the following via e-mail in lieu of physical document(s) (Please <) 🗌 Account Statement 🗋 Annual Report Other Communication Overseas Address (Mandatory in case of NRI/ Fill applicant in addition to mailing address) State Country I/We confirm that I am/we are non-residents of Indian nationality/oringin & that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/ FCNR Account. JOINT APPLICANT'S DETAILS Name Mr Ms SECOND APPLICANT Date of Birth D D M Status: (</ ) THIRD APPLICANT Name Mr Ms Status: (</) 🗌 RI Date of Birth □ NRI Default Option: Joint Anyone or Survivor NAME OF POWER OF ATTORNEY HOLDER (POA) (If investment is be

Mode of Holding	(please √) 🔛	Single	OR	Joint	OR

Name	Mr Ms M/s														
PAN				(YC Co	mpliar	ice pro	of								

	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
ACKNOWLEDGMENT SLIP (To be filled by the investor)	Sr. No.:
Received from Mr. / Ms. / M/s.	SI: NO.:
an application for Scheme	
Plan Option Sub-option	
alongwith Cheque / DD No. Dated Drawn on (Bank)	
Amount (Rs.)	Signature, Stamp & Date

FIRST HOLDER'S			× 37						
All communication / paym	nents will be made	to first applicant or	to Karta in case of	HUF. Bank account detai	s of First Unitholder	r required withou	ut which the applicatio	n would be reje	cted.
Name of the Bank				ccount Type 🕅 S	avings 🗌 Cui				
Branch			A	ccount type5	avings 📋 Cui	rrent 🗌 N	RO 🗌 NRNR		Others
Account No. (in Fig.) Account No. (in words)									
Bank Address									
Bankraarooo	City			State				Pincode	
	MICR Code				ividend is to be paid thr	rouah ECS).			
		or NEFT / RTGS		· · · · · · · · · · · ·	-		n it from your Bank Branch		
Evenue for filling	Ac. No. 1	3 5 7	9 4 2	]	This is a TT Digit Nu	inibol, kindiy obtai	n it nom your bank branch		
Example for filling the Account No.	In words One	Three Five Seven		-			(	Please attach copy	of cancelled cheque)
SUBSCRIPTIONS				1					
					lle e vers de sel forme el effe	0 t 0			
Subscriptions to Baroda				collection account of ceding the next business		er z prn up to 3	opm. (piease v any c	ne)	
=		•		t of the investor on the c					
<b>REDEMPTION / D</b>	<b>VIDEND / RE</b>	FUND PAYO	JTS						
Baroda Pioneer Mutual Fu	und shall credit the	e redemption /Divide	nd /Refund payout	Broker / Clearing Membe	er into investor's acc	ount electronica	ally in case the IFSC Co	de /MICR code	has been provided
by the investor. An investor the units to the broker / c	or who purchases ( learing member's	pool account, and t	er / clearing membe they in turn will crea	r will receive units in his/h lit the units to the investo	er/its account throug r's account. Credit o	gh his/her/its bro of units to the br	oker / clearing member oker / clearing membe	s pool account. er's pool accoui	The AMC will credit nt by the AMC shall
discharge the AMC of its of transaction is delayed or n									
furnished by me /us, if for	und incorrect, I /M	/e would not hold Ė	Baroda Pioneer Mut	ual Fund responsible for t	he credit going to th	he wrong accou	int. Further, the Mutua	Fund reserves	the right to issue a
demand draft /payable at		'	., ,	NEF I /EGS. IT NOWEVER YOU	a wish to receive pay	outs by cheque	, piease tick nere		
SCHEME DETAILS	(Please choose the second sec second second sec	ne option for Investm	ient.)						
Scheme Name				1	Plan				
Options				Dividend Freq	uency			🗌 🗌 Zero E	Balance folio
[A] INVESTMENT	DETAILS (Strik	e off whichever is n	ot applicable)						
GROSS AMOUNT (A)	Γ	₹	A		DD CHARG	BES (IF ANY) (B	) ₹ B		
NET AMOUNT (CHEQU	E / DD AMOUNT)	₹	A minus B						
MODE OF PAYMENT			s						
A/c No.		Type A/c	1	Cheque / DD	No		Dated	DDM	
Cheque Drawn or	Bank								
Details Branch					Branch City				
Dranch					Branch Oity	у			
In case of NEFT / F	RTGS payment	UTR No.							
[B] SIP DETAILS (S	Separate cheque re	quired for each inve	stment)						
SIP Type: 🗌 Normal	SIP 🗌 Mic	cro SIP*	Frequ	ency: 🗌 Monthly	Quarterly	5	SIP Dates: 🗌 1st	🗌 10th 🛛	] 15th 🔲 25th
SIP Amount (₹ in figure					DD : Start From	р. р. м. м.	Y Y Y End		
SIP Amount (₹ in words									
	<i>.</i>								
Cheque / DD No.				From			To		
Drawn on Bank					Duran als Oits				
Branch					Branch City	/			
Micro SIP* Photo Iden			u	,					
*(Only for Micro SIP - for ag I / We declare hereby					irrent application	will result			
in aggregate investme				in together with the e	arrent application		1	Signature	
NOMINATION DET	TAILS (To be fille	ed in by Individual(s)	applying singly or jo	intly) Refer Instruction	on VI				
		Relationship							n (%) by which
Name and Ado the Nomine		between Nominee &	Date of Birth		ess of Guardian se the nominee is minor		ature of Guardian / Nominee		shared by will by each nominee
		Investor				1			regate to 100%)
Nomine	e 1								
Nominee	5 6								
Nominee	9 3								
DECLARTION ANI	O SIGNATUR	ES							
a) I/M/a baya road 8 underet	and the contents is	n tha SID of the Sohr	eme and SAI. I/We h	ereby apply for units of the	Scheme & agree to a	abide by the term	ns, conditions, rules & re	egulations gove	rning the Scheme. I /
We hereby declare that th Notifications or Directions or or any other applicable law satisfaction of the AMC, I/V such other action with such	e amount invested of the provisions of	d in the Scheme is t f the Income Tax Act	through legitimate s t, Money Regulation	ources only & does not i s, Notifications or Direction	nvolve & is not designs of the provisions	gned for the pu of the Income Ta	rpose of the contraver ax Act, Anti Money Lau	ntion of any Act ndering Laws, A	, Rules, Regulation, Inti Corruption Laws
or any other applicable law satisfaction of the AMC. I/V	s enacted by the G Ve hereby authoris	ovt. of India from tir the AMC to redee	ne to time. I7 We ha om the funds investe	ve understood the details d in the Scheme, in favou	of the Scheme and ir r of the applicant at t	n the event "Kno the applicable N	w Your Customer" pro IAV prevailing on the da	cess not comple ate of such rede	eted by me/us to the mption & undertake
such other action with such approved banking channel	funds that may be	e required by the Law	v. b) For NRIs : I/We	confirm that I am/We are N	on Residents of India	an Nationality / (	Drigin & that I/We have	remitted funds f	orm abroad through
holding valid PAN card. c) T Funds from amongst which	he ARN holder has	s disclosed to me / u	s all the commissior	(in the form of trail comm	ssion or any other m	iode), payable to	him for the different co	mpeting schem	es of various Mutual
	STO CONOME IS DEL								
			1						
1st Unitholder Sign	ature / Guardian	Signature /					a 111		
1st Unitholder Sign Thum	ature / Guardian b Impression	Signature /	2nd Ur	hitholder Signature / Th	umb Impression		3rd Unitholder Sig	nature / Thum	o Impression
		Signature /	2nd Ur	hitholder Signature / Th	umb Impression		3rd Unitholder Sig	nature / Thum	o Impression

Agra • Ahmedabad • Ajmer • Aligarh • Allahabad • Anand • Bangalore • Bareilly • Baroda • Bharuch • Bhilai • Bhopal • Bhubaneswar • Bikaner • Bilaspur • Chandigarh • Chennai • Cochin • Coimbatore • Dehradun • Erode • Gorakhpur • Guwahati • Gwalior • Haldwani • Hyderabad • Indore • Jabalpur • Jaipur • Jalandhar • Jamnagar • Jamshedpur • Jhansi • Jodhpur • Kanpur • Kolkata • Lucknow • Ludhiana • Madurai • Meerut • Mehsana • Moradabad • Mumbai • Nagpur • Nasik • New Delhi • Panjim • Patna • Pune • Raipur • Rajkot • Ranchi • Siliguir • Surat • Tirupur • Trichy • Udaipur •Valsad •Vapi •Varanasi •Vijayawada •Visakhapatnam