Canara Robeco Mutual Fund

CANARA ROBECO

Investment Manager : Canara Robeco Asset Management Co. Ltd.
Construction House, 4th Floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001.
Tel.: 6658 5000 , 6658 5086 Fax: 6658 5012 / 13 www.canararobeco.com

Application No.

APPLICATION FORM FOR EQUITY SCHEMES (Please fill in BLOCK Letters)

Broker Name / ARN	Sub Broker Code / ARN	Bank Serial No. /Branch Stamp/Receipt Date
Ganesh S. Shanbhag / ARN-0988		

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction 25)

In case the subscription amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150 (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

EXISTING UNIT HOLDER INFORMATION [Please fill in your Folio Number and proceed to Investment Details and Payment Details]

Folio No. | Name of 1st Unit Holder

The details in our records under the folio number mentioned will apply for this application.

PAN AND KYC COMPLIANCE STATUS DETAILS - Mandatory [Refer Instruction Nos. 12 & 13]

	PAN # (refer instruction)	KYC Compliance Status** (if yes, attach proof)
First / Sole Applicant@		Yes ○
Second Applicant		Yes ○
Third Applicant		Yes ○

@ If the first/sole applicant is a Minor, then please provide details of Natural / Legal Guardian. **Refer instruction 12

APPLICANT(S) INFORMATION [Refer Instruction 1]

NAME OF FIRST / SOLE APPLICANT / MINOR

DATE OF BIRTH (Mandatory in case of Minor & 1st Applicant) D D / M M / Y Y Y Y

Mr. | Ms. | M/s.

Father/Husband's Name

NAME OF SECOND APPLICANT

Mr. | Ms. | M/s.

NAME OF THIRD APPLICANT

Mr. | Ms. | M/s.

NAME OF THE GUARDIAN (In case First Applicant is a Minor)

Mr. | Ms. | M/s.

Relationship with Minor Please (✓) Mother ☐ Father ☐ Legal Guardian ☐

Proof of DOB (Any one Mandatory) ☐ Birth Certificates ☐ School Certificates / Mark Sheet ☐ Pass Port ☐ Others

Mode of Holding Please (✓)	Anyone or Survivor ☐	Single ☐	Joint ☐	(Default option is Anyone or Survivor)			
Occupation Please (✓)	Business ☐	Service ☐	Professional ☐	Retired ☐	Student ☐	Housewife ☐	Others ☐ Please specify
Status Please (✓)	Resident Individual ☐	NRI - NRO ☐	Trust ☐	HUF ☐	Bank / FIs ☐	NRI - NRE ☐	
	Minor thru Guardian ☐	Company/Body Corporate ☐	FIIs ☐	Partnership Firm ☐	Society ☐		

MAILING ADDRESS [Please provide Full Address. P. O. Box No. may not be sufficient. Overseas Investors will have to provide Indian Address]

Local Address of 1st Applicant -

City | State | Pin Code

Tel. Off. | Resi. | Mobile

E - Mail P L E A S E U S E B L O C K L E T T E R S

Overseas Correspondence Address (Mandatory for NRI / FII Applicant)

City | Country | Pin Code

COMMUNICATION (Please ✓)

☐ **I/We wish to receive Account Statements/Annual Reports/Quarterly Statements/Newsletter/Updates or any other Statutory Information via E- mail/SMS alerts in lieu of Physical Documents.**

BANK ACCOUNT DETAILS - Mandatory

Name of the Bank

Account No. | A/c. Type Please (✓) SAVINGS ○ NRE ○ CURRENT ○ NRO ○ FCNR ○

Branch Address

Bank Branch City | State | Pin Code | MICR Code

(Please enter the 9 digit number that appears after your cheque number)

IFSC Code (RTGS/NEFT) | (Mandatory for Credit via NEFT/RTGS) Please attach a cancelled cheque OR a clear photo copy of a cheque

(11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your Bank)

ACKNOWLEDGEMENT SLIP (TO BE FILLED IN BY THE SOLE/FIRST APPLICANT)

CANARA ROBECO

Application No.

Canara Robeco Mutual Fund

Investment manager : Canara Robeco Asset Management Company Ltd.
Construction House, 4th Floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001.

Date___ / ___ / ________

Received from Mr. / Ms. /M/s.

An application for purchase of________ units of ______________________________

along with cheque / DD as detailed overleaf. Cheques / Drafts are subject to realisation.

Stamp, Signature & Date

MODE OF PAYMENT OF REDEMPTION / DIVIDEND PROCEEDS VIA RTGS/NEFT/CHEQUE/DEMAND DRAFT (PLEASE TICK THE RELEVANT OPTION BELOW) [Refer Instruction 21]

Unitholders have the option of receiving their redemption/ dividend proceeds directly into their bank accounts (as furnished by them in the column for "bank account details" as per the following arrangements: Please (✓): (I) Electronic credit through the Real Time Gross Settlement (RTGS) System of RBI for amounts of ₹ 1.00 lac and above. (Please mention the IFSC code for RTGS of your bank/branch and full account number as appearing on your cheque leaf in the column for "bank account details" to receive redemption proceeds through RTGS) ☐ (ii) Electronic credit through the National Electronic Funds Transfer (NEFT) System of RBI. (Please mention the IFSC code for NEFT of your bank/branch and full account number as appearing on your cheque leaf in the column for "bank account details" to receive redemption proceeds through NEFT) ☐. (iii) ECS credit through ECS system of RBI (option available only for dividend payments) (Please mention 9 digit MICR as code as appearing in your cheque leaf in the column for bank account details ☐ (iv) Redemption proceeds by way of a cheque/demand draft instead of a direct credit to our account. ☐

DEMAT ACCOUNT DETAILS (This section to be filled only if investor wish to hold units in demat form) (Client Master List (CML) to be enclosed) (Refer instructions No. 24)

National Securities Depository Limited (NSDL)	Central Depository Services (India) Limited (CDSL)
Depository Participant Name ______	Depository Participant Name ______
DP ID No. I N	Target ID No.
Beneficiary Account No.	

INVESTMENT DETAILS AND PAYMENT DETAILS (Payment through Cash/Outstation Cheques not accepted)

Kindly fill up the scheme name(s), plan/option and sub-option. For complete information on Investment Details please refer to Instructions No. 6, 7 & 8

Scheme Name :

Options : ☐ Growth ☐ Growth with Automatic Repurchase ☐ Dividend ☐ Dividend Payout ☐ Dividend Reinvestment

Investment Amount (₹)	DD Charges# if any (₹)	Net Amount (₹)	Mode of Payment	Cheque / DD / Funds Transfer/ RTGS

Strike out whichever is not applicable

Chq. / DD No.______________Date __________Drawn on Bank______________________________Branch & City______

A/c Type - (✓) S/B ☐ NRE ☐ Current ☐ NRO ☐ FCNR* ☐ *Kindly provide photocopy of the payment Instrument or Foreign Inward remittance Certificate (FIRC) evidencing source of funds

Please (✓) RTGS ☐Fund transfer ☐letter dated ______________of ______________________Bank & Branch from A/c No. __________

SIP ENROLMENT DETAILS

SIP Amount (Rs.)

Enrolment Period
REGULAR SIP: Start Month M M - Y Y Y Y End Month M M - Y Y Y Y
PERPETUAL SIP: Start Month Year Until further instruction

Frequency Please (✓) ☐ Monthly ☐ Quarterly

PAYMENT MECHANISM (✓)
☐ Option I : Debit through ECS / Auto Debit facility (Tick this box and fill up SIP ECS / Auto Debit Facility Form)
☐ Option II : Through Post Dated Cheques - Total Cheques_____ Cheque Nos. From To

Drawn on Bank______________________________Branch & City______

NOMINATION DETAILS for Individuals [Minor / HUF / POA Holder / Non Individuals cannot Nominate - Refer Instruction No. 20]

☐ I / We ______________________do here by nominate the undermentioned Nominee(s) to receive the units to my / our credit in this folio no. in the event of my / our death. I / We also understand that all payments and settlements made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustees. ☐ I / We ______________________do not wish to nominate

No.	Nominee(s) Name	Date of Birth (in case of Minor)	Name of the Guardian (in case of Minor)	Relationship with Unit Holder	@ % of Share
1		D D — M M — Y Y Y Y			
2		D D — M M — Y Y Y Y			
3		D D — M M — Y Y Y Y			

Signature of 1st Applicant / Guardian	Signature of 2nd Applicant	Signature of 3rd Applicant

@ If the percentage of share is not mentioned then the claim will be settled equally amongst all the indicated nominee(s)

DECLARATION

To the trustees Canara Robeco Mutual Fund. I / We have read and understood the contents of the SID and Key Information Memorandum of the Scheme. I/We hereby apply to the Trustees of Canara Robeco Mutual Fund for allotment of units of the Scheme, as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I /We hereby confirm and certify that the source of these funds is not directly / indirectly a result of "proceeds of crime" as defined in "The Prevention of Money Laundering Act, 2002" and we undertake to provide all necessary proof / documentation, if any, required to substantiate the facts of this undertaking. I have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I / We authorize the Fund to disclose details of my/our account and all my/our transactions to the intermediately whose stamp appears on the application form. I also authorize the Fund to disclose details as necessary, to the Fund's and investor's bankers for the purpose of effecting payments to me / us.

Applicable to NRIs only : I/We confirm that I am/we are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from funds in my/our Non-Resident External / Ordinary Account / FCNR / NRSR Account. Investment in the scheme is made by me / us on: ☐ Repatriation basis ☐ Non Repatriation basis. The ARN holder has disclosed to me/us all he commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant

To be furnished by partnership firms

To, The Trustees of Canara Robeco Mutual Fund, Sub : Our Subscription to the Schemes of
We, the undersigned, being the partner of M/s. ______________________ a Partnership firm formed under Indian Partnership Act, 1932 do hereby jointly and severally authorise Mr. ______________________ to subscribe an amount of ₹ __________ for allotment of units of ______________Scheme on behalf of and in the name of our firm. He is / They are also authorised to encash / disinvest the above units. We undertake to intimate you in writing about any change in the constitution or composition of our firm and upon such change, also arrange to lodge the specimen signatures of the partners authorised to deal with the above units. We enclose the copy of the Partnership Deed alongwith this application for subscription.

Name of the partners Signatures

Growth Option (1)	Growth Option with Automatic Repurchase (2)	Dividend Option (3)	Bonus (4)	Total Amount Invested (5=1+2+3+4)
₹	₹.	₹	₹	₹

Cheque / DD No. : ______________ Date : ______________ Amount : ₹.______________ Bank and Branch: ______________

REGISTRAR & TRANSFER AGENTS

M/s. Karvy Computershare Pvt. Limited "Karvy Plaza"
H. No. 8-2-596 Avenue 4, Street No. 1, Banjara Hills, Hyderabad - 500 034.
Tel No.: (040) 23394436, 23397901, 23312454,
Fax No.: (040) 23311968, Email : crmf@karvy.com