

COMMON APPLICATION FORM

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

2 022-6638 4400

mutual@kotak.com

www.mutualfund.kotak.com Sub-Broker's Name & ARN Investment Advisor's Name & ARN Official Acceptance Point Bank Sr. No. Appl. CA Sub-Broker \ LG Code SPRISM/ARN-0238 Date: DD / MM / YYYY Upfront commission 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** [Refer Guideline 2(a)] 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 4. Name of Sole / First Holder: Folio No.: **NEW APPLICANT'S PERSONAL INFORMATION** [Refer Guideline 2] Date of Birth** SOLE/FIRST APPLICANT / MM / GUARDIAN (in case Sole / First Applicant is a minor) **Mandatory in case sole/first applicant is minor. Status (Please ✓) Resident Individual CONTACT PERSON (in case of Non-individual applicants) NRI on Repatriation Basis NRI on Non-Repatriation Basis HUF Proprietorship SECOND APPLICANT (Joint Holder 1) Partnership Firm Private Limited Company Public Limited Company GUARDIAN (in case Second Applicant is a minor) Mutual Fund Mutual Fund FOF Scheme Body Corporate Registered Society THIRD APPLICANT (Joint Holder 2) PF/Gratuity/Pension Superannuation Fund Trust AOP / BOI GUARDIAN (in case Third Applicant is a minor) Foreign Institutional Investor On behalf of Minor Other (Please specify) MODE OF OPERATION (where there is more than one applicant) Occupation (Please ✓) (Mandatory) First Holder only Anyone or Survivor Joint Business PAN AND KYC COMPLIANT STATUS DETAILS (Mandatory) Service Professional Retired Housewife KYC Compliant Status* KYC Compliant Status* KYC Compliant Status* Student Agricultur ☐ PAN Proof # ☐ Yes ☐ No ☐ PAN Proof # ☐ Yes ☐ No ☐ PAN Proof # ☐ Yes ☐ No Other (#Please attach PAN Card Copy) / (*KYC allotment letter copy is mandatory) (Please specify) C. THIRD PARTY PAYMENT DECLARATION Parent/Grand-Parent/Guardian of Minor/ Related Person Other than the Register Guardian/ Employer on behalf of Employee (SIP only)/Custodian on behalf of FII. Name: Relationship with Applicant: **KYC Compliant Status:** Yes No Declaration: I hereby declare and confirm that the Applicant stated above is the beneficial owner of the investment details mentioned above. I am providing the funds for these investments on account of my natural love and affection or incentive to employee or for & on behalf of fill or as gift from my bank account only. Declaration (Guardian of minor, as registered in the folio): I confirm that I am the legal guardian of the Minor, registered in folio and have no objection to receiving these funds on behalf of the minor. (Note: Aforeside signature should match with the investment cheque signature) ADDRESS FOR COMMUNICATION (Mandatory) [Refer Guideline 3] D. DEMAT ACCOUNT DETAILS 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 dividend options having dividend frequency of less than a month). **NSDL CDSL** DP Name DP Name City Pin/Zip Code Country State Tel. (Cell) (Fax) 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. **E-mail ACKNOWLEDGEMENT SLIP kotak**® (To be filled by Applicant)

Mutual Fund Think Investments. Think Kotak.	Received from an application for allotment of units in the follow	wing scheme :
Investment Details	Instument Details	Amount
Scheme Plan Option Please retain this silp, duly acknowle	No Dated DD / MM Bank & Branch edged by the Official Collection Center till you receive yo	



Appl. CA

E. BANK A	ACCOUNT DETAILS (Mandatory, this acco	ount details will be con	nsidered as defau	t account for	oavout)		[R	efer Guideline				
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Account No.			If, however, you w			•		alongside				
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I.	Scheme Name / Frequency	Plan / Option /	Frequency	Amount		Amount	Payment Details Cheque / Rank and					
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ou are an N	IRI Investor, please indicate source of funds for you	•										
NRE	○ NRO ○ FCNR ○ Oth	ers										
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	Name of Nominee	Add	Address Date Of Birth % S		% Share	Signature Of Nominee						
DETAIL	S OF GUARDIAN (to be furnished in case N	lominee is a minor)				l						
	Name of Guardian		Address			Tel. No	Signat	ure Of Guardian				
'e		do hereby confirm that I/	We do not intend to a	avail the nomination	n facility	for this investr	nent application.					
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Ne would lik	ke to receive all communication by E-mail including	J Account statement & transa	action confirmation [Pl	ease ✔]								
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