

ARN-127713	Advisor/Distributor : Code/Name	EUIN-E034859	
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<b>UnitHolder Information</b>
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<b>Name of the First Applicant :</b>
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<b>PAN/Exempt No.:</b>	<b>Date of Birth :</b>	<b>Tax Status* :</b>	<b>cKYC Ref N</b>
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<b>Father Name :</b>	<b>Mother Name :</b>
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<b>Name of Guardian :</b>	<b>Date of Birth :</b>	<b>PAN/Exempt No. :</b>	<b>cKYC Ref N</b>
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<b>Contact Address :</b>			
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<b>City :</b>	<b>Pincode :</b>	<b>State :</b>	<b>Country :</b>
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<b>Tel.(Off) :</b>	<b>Tel.(Res) :</b>	<b>Email :</b>	
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<b>Fax.(Off) :</b>	<b>Fax.(Res) :</b>	<b>Mobile:</b>	
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<b>Mode of Holding :</b>	<b>DP ID :</b>	<b>Occupation :</b>	
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<b>Name of Second Applicant :</b>	<b>PAN/Exempt No. :</b>
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<b>Second Applicant Email:</b>	<b>Second Applicant Mobile :</b>
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<b>Second Applicant Date of Birth :</b>	<b>Second Applicant cKYC Ref No. :</b>
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<b>Name of Third Applicant :</b>	<b>PAN/Exempt No.:</b>
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<b>Third Applicant Email :</b>	<b>Third Applicant Mobile :</b>
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<b>Third Applicant Date of Birth :</b>	<b>Third Applicant cKYC Ref No. :</b>
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<b>Other Details</b>
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<b>Overseas Address (If investor is NRI) :</b>		
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<b>City :</b>	<b>Pincode :</b>	<b>Country :</b>
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<b>Bank Mandate Details</b>
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<b>Name of Bank :</b>	<b>Branch :</b>
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<b>A/c No. :</b>	<b>A/c Type :</b>	<b>IFSC Code :</b>	<b>MICR No. :</b>
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<b>Bank Address :</b>		
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<b>City :</b>	<b>Pincode :</b>	<b>Country :</b>
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<b>Nomination Details</b>
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<b>Nominee Name 1 :</b>	<b>Date of Birth:</b>	<b>Relationship :</b>	<b>Percentage</b>
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<b>Guardian Name(If nominee 1 is minor) :</b>	<b>Guardian PAN :</b>
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<b>Nominee Address :</b>		
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<b>City :</b>	<b>Pincode :</b>	<b>State :</b>
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<b>Nominee Name 2 :</b>	<b>Date of Birth:</b>	<b>Relationship :</b>	<b>Percentage</b>
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<b>Guardian Name(If nominee 2 is minor) :</b>	<b>Guardian PAN :</b>
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<b>Nominee Name 3 :</b>	<b>Date of Birth:</b>	<b>Relationship :</b>	<b>Percentage</b>
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<b>Guardian Name(If nominee 3 is minor) :</b>	<b>Guardian PAN :</b>
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<b>Declaration and Signature</b>
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I/We confirm that the information provided by me/us is true and correct. I/We acknowledge that the responsibility of the information provided solely rests with me/us and that NSE / NSCCL will not be responsible or liable for any loss, claim, liability that may arise on account of any incorrect data/information provided by me/us. I/We hereby confirm that I/we will comply with the terms and conditions for Know Your Customer (KYC).

I am aware that system generated User ID and password will be sent on the registered mail id. All correspondence/communication in respect of the payment link for online fund transfer will be sent to the registered email address and SMS alerts will be sent to the registered mobile number on registration on NMF II. I/we also hereby confirm that the email id and the mobile no. provided at the time of registration by the distributor in the name of me/us and all communication/correspondence/transactions related alerts shall be sent to same email id/mobile no.

I/We confirm that for existing investments, I/we had gone through, understood the contents of the Scheme Information Document and Key Information Memorandum issued from time to time regarding each Mutual Fund Scheme, in which I/We had chosen to subscribe / redeem. I/We will also ensure to go through, understand the contents of the Scheme Information Document and Key Information Memorandum, issued from time to time regarding each Mutual Fund Scheme, in which I/We will choose to subscribe to / redeem.

I/We hereby authorize NSE to collect the following data/ information pertaining to my / our mutual fund investments from all Asset Management Companies and their respective Registrar and Transfer Agents with whom I/We transact: -

1. Distributor wise transaction data for historical, present and future transactions carried out through various transaction platforms including transaction platforms at any point of acceptance of the AMCs subject to the condition that the Distributor is registered with NSE NMF II platform.
2. Scheme wise consolidated unit balance available in my account(s) as and when required.

I/We hereby authorize the Distributor, NSE & AMC (including its Registrars) to utilize my/our KYC information, such as identity, address and signature for validation and to comply with the legal and regulatory requirements. I/We accept that for any transaction submitted offline i.e. with wet signatures in my KYC records would be used for signature verification and in the event of such signature not being available or legible, the AMC would be with the Distributor for further checks to validate the authenticity of the request or reject any such offline request.