

**FRANKLIN TEMPLETON MUTUAL FUND - COMMON APPLICATION FORM**

Distributor information				For Office Use Only
Advisor ARN	Sub-broker/Branch Code	Sub-broker ARN	Representative EUIIN	Application received
ARN-0 76921			E027659	

The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder.

"I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction".

Signature of the Investor(s) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Transaction Charges** (Refer Instruction No. 10 and tick the appropriate option)

Applicable for transactions routed through distributors/agents/brokers who have opted to receive transaction charges.

I am a first time investor in mutual funds (Rs.150 will be deducted).  I am an existing mutual funds investor (Rs.100 will be deducted).

**Existing Unitholders** (Please provide the following details in full; Please refer Instruction 2)

First Applicant Name \_\_\_\_\_  
Customer Folio No. \_\_\_\_\_ Account No. \_\_\_\_\_

**Unit Holder Information**

(To be filled in Block Letters. Use one box for one alphabet leaving one box blank between name and surname)

Name of First/Sole Applicant \_\_\_\_\_

Proof of KYC enclosed\*  Date of Birth# | D D | M M | Y Y Y Y |

PAN No. (Mandatory)\$ \_\_\_\_\_ Enclosed:  PAN Card Copy  Proof of Identity & Address ^ Gender:  Male  Female

Status:  Resident Individual  NRI/PIO  Company/Body Corporate  Partnership  Trust  Society  HUF  Bank  AOP

Sole Proprietorship  Minor through Guardian#  FI  FII  Others (Please specify) \_\_\_\_\_

Nationality and Country of Residence \_\_\_\_\_

Name of Second Applicant \_\_\_\_\_

Proof of KYC enclosed\*  Date of Birth# | D D | M M | Y Y Y Y |

PAN No. (Mandatory)\$ \_\_\_\_\_ Enclosed:  PAN Card Copy  Proof of Identity & Address ^ Gender:  Male  Female

Status:  Resident Individual  NRI/PIO  Others (Please specify) \_\_\_\_\_

Nationality and Country of Residence \_\_\_\_\_

Name of Third Applicant \_\_\_\_\_

Proof of KYC enclosed\*  Date of Birth# | D D | M M | Y Y Y Y |

PAN No. (Mandatory)\$ \_\_\_\_\_ Enclosed:  PAN Card Copy  Proof of Identity & Address ^ Gender:  Male  Female

Status:  Resident Individual  NRI/PIO  Others (Please specify) \_\_\_\_\_

Nationality and Country of Residence \_\_\_\_\_

Name of Guardian \_\_\_\_\_

Proof of KYC enclosed\*  Date of Birth | D D | M M | Y Y Y Y |

PAN No. (Mandatory)\$ \_\_\_\_\_ Enclosed:  PAN Card Copy  Proof of Identity & Address ^ Gender:  Male  Female

Status:  Resident Individual  NRI/PIO  Others (Please specify) \_\_\_\_\_

Nationality and Country of Residence \_\_\_\_\_

Relationship with Minor  Father  Mother  Legal Guardian

\_\_\_\_\_(Please specify relationship)

^ Allowed only for investments through Micro investment route in lieu of KYC and PAN. \*Please provide copy of the KYC acknowledgement issued by KRA (Mandatory for all Investors (including Sikkim Resident) irrespective of the amount of investment). For investments through Micro investment route, address proof and identity proof is required to be submitted #Date of Birth and Document proof – mandatory for investments through Minors and investments in TIPP (in TIPP, only individuals may invest).

\*\*Please provide following documents for evidencing the relationship:- Father/Mother – Photocopy of the certificate mentioning the date of birth of the Minor and Parent's Name; Legal Guardian – Court Order. In case of investments held in the name of a minor, no joint holders / nomination will be registered. The minor, acting through the guardian, should be the first and sole holder in the Folio/Account. Note: For investment in TICAP, please attach the separate form giving details of the Beneficiary Child.

**Mode of Operation**

Single  Joint  Either or Survivor(s)

**Power of Attorney (POA) Details**

Name of POA Holder \_\_\_\_\_ Date of Birth | D D | M M | Y Y Y Y |

Enclosed\*  Proof of KYC  Proof of Identity & Address ^  PAN Card Copy PAN \$(Mandatory) \_\_\_\_\_

Status:  Resident Individual  NRI/PIO  Others (Please specify) \_\_\_\_\_ Gender:  Male  Female