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## COMMON APPLICATION FORM FOR DEBT SCHEMES

**For sale of Units of Tata Mutual Fund Scheme(s) to Resident/ Non-Resident Indians.**  
Please refer complete details on all page(s) and scheme description/details while applying.

Sr. No. :

**ISSUE OF UNITS OF TATA MUTUAL FUND SCHEMES AT NAV BASED RESALE PRICE WITH APPLICABLE LOAD IF ANY FOR ONGOING SALE**

Refer complete scheme details/instructions while filling in application form in English BLOCK LETTERS. Tick (✓) whichever is applicable. Strike out which is not required

BROKER/AGENT CODE	SUB-BROKER CODE

Existing Folio No. : \_\_\_\_\_

SIP Form attached.

**PAN AND KYC COMPLIANT STATUS DETAILS (MANDATORY)**

	PAN # (Refer Instruction - D)	KYC Compliant Status (If yes attach proof) KYC Mandatory for investment of Rs. 50,000 and above. (Refer Instruction - E)
First Applicant / Guardian*		<input type="checkbox"/> Yes <input type="checkbox"/> No
Second Applicant		<input type="checkbox"/> Yes <input type="checkbox"/> No
First Applicant / Guardian*		<input type="checkbox"/> Yes <input type="checkbox"/> No

\*If the First Applicant is a Minor, then please state the details of Patent / Guardian. # Please attach PAN proof.

**UNITHOLDER INFORMATION**

<b>Name of First Applicant</b>	Mr	Ms	M/s																				
	Please mention your name as it appears in your Bank Account										Date of Birth					D	D	M	M	Y	Y	Y	Y
<b>Name of Guardian</b> (in case first Applicant is Minor)	Mr	Ms	M/s																				
Contact Person (in case of company)																							
Mailing Address (PO Box Address is not sufficient) <b>(Indian Address in case of NRIs/FIIs)</b>																Pin Code							
	City					State					Country												

Email ID \_\_\_\_\_

I/ We wish to receive A/c Statement / Annual Report / Quarterly Statement via Email instead of the physical copy  Yes  No

Contact Particulars	Telephone : Office											Fax											
	Residence											Mobile											
Status (First Sole Applicant) Please (✓)	<input type="radio"/> Resident Individual <input type="radio"/> Trust <input type="radio"/> Proprietorship	<input type="radio"/> NRI/NRO <input type="radio"/> Partner <input type="radio"/> BOI	<input type="radio"/> NRI/NRE <input type="radio"/> Public Ltd. Co. <input type="radio"/> Pvt. Ltd. Co.	<input type="radio"/> AOP <input type="radio"/> On behalf of Minor <input type="radio"/> Societies	<input type="radio"/> FII <input type="radio"/> HUF <input type="radio"/> Banks	<input type="radio"/> Body Corporate <input type="radio"/> FOF <input type="radio"/> Others _____																	
Overseas Address (Mandatory for NRI/FII applications in addition to)																Pin Code							
	City					Country																	
Occupation	<input type="checkbox"/> Agriculture <input type="checkbox"/> Business <input type="checkbox"/> Service <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Other _____																						
Mode of Holding	<input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor <span style="float: right;"><b>Default Option: Joint</b></span>																						
<b>Name of Second Applicant</b>																							
	Status: (✓) <input type="checkbox"/> RI <input type="checkbox"/> NRI										Date of Birth					D	D	M	M	Y	Y	Y	Y
<b>Name of Third Applicant</b>																							
	Status: (✓) <input type="checkbox"/> RI <input type="checkbox"/> NRI										Date of Birth					D	D	M	M	Y	Y	Y	Y

**Name of Power of Attorney holder for investment on behalf of Applicant.**

Name  Mr  Ms  M/s \_\_\_\_\_

PAN No. (Refer Instruction D) \_\_\_\_\_

\* Kindly enclose copy of the proof of PAN. In case of joint holding, PAN of all the joint holders should be mentioned in the application form.

**NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly)**

Name and Address of the Nominee(s)	Nominee's Relationship with 1st unitholder	Proportion (%) by which the units shared by will be shared by each nominee (% to aggregate to 100%)	Date of Birth	Name & Address of Guardian	Signature of Guardian
(to be furnished in case the nominee is minor)					
Nominee 1					
Nominee 2					
Nominee 3					

**PLEASE CHOOSE THE SCHEME/S AND OPTION FOR INVESTMENT**

<input type="checkbox"/> <b>TATA LIQUID FUND (LF)</b> <input type="checkbox"/> RIP <input type="radio"/> Growth <input type="radio"/> Fortnightly Dividend <input type="radio"/> Daily Dividend <input type="checkbox"/> HIP <input type="radio"/> Growth <input type="radio"/> Monthly Dividend <input type="radio"/> Weekly Dividend <input type="radio"/> Daily Dividend <input type="checkbox"/> SHIP <input type="radio"/> Growth <input type="radio"/> Monthly Dividend <input type="radio"/> Weekly Dividend <input type="radio"/> Daily Dividend <input type="checkbox"/> SHIP PLUS <input type="radio"/> Growth <input type="radio"/> Monthly Dividend <input type="radio"/> Weekly Dividend <input type="radio"/> Daily Dividend Under each Plan in case of Dividend Option (Please tick) <input type="radio"/> Dividend Payout <input type="radio"/> Dividend Reinvestment There will be compulsory reinvestment of dividend under Daily Dividend Option	<b>Default Option: Growth / Dividend Reinvestment (please refer Instruction I)</b>
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**RIP** - Regular Investment Plan    **HIP** - High Investment Plan    **SHIP** - Super High Investment Plan    **SHIP Plus** - Super High Institutional Plus Plan

<input type="checkbox"/> <b>TATA SHORT TERM BOND FUND (ST)</b> <input type="checkbox"/> Dividend <input type="checkbox"/> Growth <input type="radio"/> Payout <input type="radio"/> Reinvestment	<b>Default Option: Growth / Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>TATA INCOME PLUS FUND (IP)</b> <input type="checkbox"/> Option A <input type="radio"/> Growth <input type="radio"/> Dividend/ Bonus Payout <input type="radio"/> Dividend Reinvestment <input type="checkbox"/> Option B <input type="radio"/> Growth <input type="radio"/> Dividend/ Bonus Payout <input type="radio"/> Dividend Reinvestment <input type="checkbox"/> Option C <input type="radio"/> Growth <input type="radio"/> Dividend/ Bonus Payout <input type="radio"/> Dividend Reinvestment	<b>Default Option: Option A / Growth / Dividend Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>TATA GILT SECURITIES FUND (GF)</b> <input type="checkbox"/> Normal <input type="radio"/> Growth <input type="radio"/> Dividend/ Bonus Payout <input type="radio"/> Dividend Reinvestment <input type="checkbox"/> High Investment Plan <input type="radio"/> Growth <input type="radio"/> Dividend/ Bonus Payout <input type="radio"/> Dividend Reinvestment	<b>Default Option: Normal / Growth / Dividend Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>Tata Gilt Short Maturity Plan</b> <input type="radio"/> Growth <input type="radio"/> Dividend/ Bonus Payout <input type="radio"/> Dividend Reinvestment	<b>Default Option: Normal / Growth / Dividend Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>TATA INCOME FUND (IF)</b> <input type="checkbox"/> Quarterly Dividend <input type="checkbox"/> Half Yearly Dividend <input type="checkbox"/> Periodic Dividend <input type="checkbox"/> Growth <input type="checkbox"/> Bonus <input type="radio"/> Payout <input type="radio"/> Reinvestment <input type="radio"/> Payout <input type="radio"/> Reinvestment <input type="radio"/> Payout <input type="radio"/> Reinvestment	<b>Default Option: Growth / Quarterly / Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>TATA FLOATING RATE FUND</b> <input type="checkbox"/> Short Term <input type="checkbox"/> Long Term <input type="checkbox"/> Short Term Institutional Plan <input type="checkbox"/> Income / Bonus <input type="checkbox"/> Growth <input type="checkbox"/> Income / Bonus <input type="checkbox"/> Growth <input type="checkbox"/> Daily Dividend <input type="checkbox"/> Growth <input type="radio"/> Payout <input type="radio"/> Reinvestment <input type="radio"/> Payout <input type="radio"/> Reinvestment      (Compulsory Reinvestment)	<b>Default Option: Short Term / Growth / Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>TATA FLOATER FUND (TFF)</b> <input type="checkbox"/> Growth <input type="checkbox"/> Dividend — <input type="checkbox"/> Daily - Dividend Reinvestment <input type="checkbox"/> Dividend — <input type="checkbox"/> Weekly <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment Default Option : Growth      Default Option : Weekly      Default Option : Reinvestment There will be compulsory reinvestment of dividend under Daily Dividend Option	<b>Default Option: Growth / Reinvestment (please refer Instruction I)</b>
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<input type="checkbox"/> <b>TATA LIQUIDITY MANAGEMENT FUND (TLMF)</b> <input type="checkbox"/> Growth <input type="checkbox"/> Dividend — <input type="checkbox"/> Daily - Dividend Reinvestment <input type="checkbox"/> Dividend — <input type="checkbox"/> Weekly      Dividend Reinvestment Default Option : Growth      Default Option : Weekly Dividend will be compulsarily reinvested	Dividend will be compulsarily reinvested
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<input type="checkbox"/> <b>TATA TREASURY MANAGER FUND (TTMF)</b> <input type="checkbox"/> RIP <input type="radio"/> Growth <input type="radio"/> Monthly Dividend <input type="checkbox"/> HIP <input type="radio"/> Growth <input type="radio"/> Daily Dividend <input type="radio"/> Weekly Dividend <input type="radio"/> Monthly Dividend <input type="checkbox"/> SHIP <input type="radio"/> Growth <input type="radio"/> Daily Dividend <input type="radio"/> Weekly Dividend <input type="radio"/> Monthly Dividend Under each Plan in case of Dividend Option (Please tick) <input type="radio"/> Dividend Payout <input type="radio"/> Dividend Reinvestment There will be compulsory reinvestment of dividend under Daily Dividend Option	<b>Default Option: RIP / Growth / Dividend Reinvestment (please refer Instruction I)</b>
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**APPLICATION MONEY DETAILS (Cheque / DD to be drawn in the name of the Scheme)**

Please enclose separate Cheques/Demand Draft for each scheme.

<b>Scheme Name</b> _____	
Gross Amount in Rs. <input style="width:100%;" type="text"/>	DD Charges Rs. (if any)* <input style="width:100%;" type="text"/>
Net Amount in Rs. <input style="width:100%;" type="text"/>	
Amount of Investment(Rs in Words) _____	
Drawn on Bank _____	Branch _____
Cheque/DD No. _____	Dated ___/___/___

<b>Scheme Name</b> _____	
Gross Amount in Rs. <input style="width:100%;" type="text"/>	DD Charges Rs. (if any)* <input style="width:100%;" type="text"/>
Net Amount in Rs. <input style="width:100%;" type="text"/>	
Amount of Investment(Rs in Words) _____	
Drawn on Bank _____	Branch _____
Cheque/DD No. _____	Dated ___/___/___

<b>Scheme Name</b> _____	
Gross Amount in Rs. <input style="width:100%;" type="text"/>	DD Charges Rs. (if any)* <input style="width:100%;" type="text"/>
Net Amount in Rs. <input style="width:100%;" type="text"/>	
Amount of Investment(Rs in Words) _____	
Drawn on Bank _____	Branch _____
Cheque/DD No. _____	Dated ___/___/___

**OVERSEAS ADDRESS**

(Mandatory for NRI/FII applications in addition to mailing address) (PO Box Address is not sufficient)

Overseas Address in case of NRI/FIIs \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_

Country \_\_\_\_\_ Tel. (Office) \_\_\_\_\_

Tel. (Res.) \_\_\_\_\_ Fax \_\_\_\_\_

**YOUR BANK ACCOUNT DETAILS (Mandatory) Refer Instruction - F**

All communication and payments will be made to the first applicant or to the Karta in case of HUF.

<b>Name of Your Bank</b>											<b>Branch</b>										
<b>Your Account No.</b>																					
<b>Account No. (in words)</b>																					
<b>Bank Address</b>																					
	City					PIN					MICR Code										
<b>Account Type</b>	<input type="checkbox"/> Savings	<input type="checkbox"/> Current	<input type="checkbox"/> NRO	<input type="checkbox"/> NRRN	<input type="checkbox"/> NRE	* IFSC Code for NEFT															

\* This is a 11 Digit Number, obtain it from your Bank Branch

**Example for filling the Account number:**

Ac. No.	0	0	9	7	4	6	1	5	2
In words	Zero	Zero	Nine	Seven	Four	Six	One	Five	Two

(Please attach copy of cancelled cheque)

**DIRECT CREDIT FACILITY FOR REDEMPTION / DIVIDEND / REFUND PAYOUTS**

Tata Mutual Fund directly credits the Redemption/Dividend/Refund payout into the investor's Bank Account in case the account is with **ICICI Bank Ltd./HDFC Bank Ltd./Axis Bank/IDBI Bank/Standard Chartered Bank/Kotak Mahindra Bank/HSBC Bank/Deutsche Bank/Centurion Bank of Punjab/ABN Amro Bank/Oriental Bank of Commerce/ Centurion Bank of Punjab/State Bank of India (Core banking centers only).**

I/We understand that the instruction to the bank for Direct Credit/NEFT/ECS will be given by the Mutual Fund & such instruction will be adequate discharge of Mutual Fund towards redemption/dividend/refund proceeds. In case of bank not crediting my/our bank account with/without assigning any reason thereof or if the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Tata Mutual Fund responsible. I/We understand that in case account number furnished by me/us, if found incorrect, I/We would not hold Tata Mutual Fund responsible for the credit going to the wrong account. Further, the Mutual Fund reserves the right to issue a demand draft/payable at par cheque in case it is not possible to make payment by DC/NEFT/ECS.

**If however you wish to receive Cheque payment, please tick here**

**DOCUMENTS TO BE SUBMITTED (Please tick (✓) whichever is applicable)**

- 1)  Memorandum & Articles of Association (Corporate) 2)  Board Resolution (Corporate) 3)  Authorised signatories list. 4)  Trust Deed (in case of a trust)
- 5)  Partnership Deed (for partnership firm) 6)  Copy of PAN card of all unitholders. 7)  KYC Confirmation. 8)  Power of Attorney.

**DECLARATION AND SIGNATURES**

**The Trustee, Tata Mutual Fund**

a. Having read and understood the contents of the Offer Document of the Scheme, I/ We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/ We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Government of India from time to time. I/ We have understood the details of the scheme and I/ We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption and undertaking such other action with such funds that may be required by the Law.

b. **For NRIs:** I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin and that I/ we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary.

I/ We confirm that details provided by me / us are true and correct.

c. I/We have read and understood the SEBI Circular no. MRD/DoP/Cir- 05/2007 dt. April 27, 2007 and SEBI Circular No. 35/MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/we are holding valid PAN card / have applied for PAN.

Date: \_\_\_\_\_

Signature(s) / Thumb Impression(s) Refer Instruction - 'C'	1st / Sole holder	2nd holder	3rd holder
	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>

**Tata Mutual Fund "Acknowledgment Slip" (To be filled in by Investor)**

Sr. No. :

Received application from Mr./Mrs./Master/M/s \_\_\_\_\_

Address : \_\_\_\_\_

PIN \_\_\_\_\_

						Signature of Authorised Staff and Office Seal/Stamp along with Date and Time of Receipt
Name of the scheme/s	Application for amount in Rs. (A)	DD charges (if any) in Rs. (B)	Net Amount or DD/ Pay Order drawn for Rs. (A-B)	Cheque/ DD/ Pay Order no.	Cheque/ DD/ Pay Order Dated	DD/ Cheque/ Pay Order drawn on-bank and branch (name)

Subject to realisation of cheque / Demand Draft and verification of mandatory information / document.

# Common Application Form for Equity, Monthly Income and Balanced Schemes

(For Lumpsum / Systematic Investments)



Expertise that's trusted

Sr. No.:

Please refer the instructions while filling the Application Form. Tick (✓) whichever is applicable. (Strike out which is not required)

## 1. DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Tata Mutual Fund)

<b>Distributor / Broker ARN</b>		<b>Sub-Broker Code</b>	
Existing Folio Number:		<input type="checkbox"/> SIP Form Attached	

## PAN AND KYC COMPLIANT STATUS DETAILS (MANDATORY)

	PAN # (Refer Instruction - E)	KYC Compliant Status** (If yes attach proof) KYC Mandatory for investment of Rs. 50,000 and above. (Refer Instruction - F)	
<b>First Applicant / Guardian*</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Second Applicant</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Third Applicant</b>		<input type="checkbox"/> Yes	<input type="checkbox"/> No

\*If the First Applicant is a Minor, then please state the details of Parent / Guardian. # Please attach PAN proof. \*\*Refer Instruction - E

## 2. SOLE / FIRST APPLICANT'S PERSONAL DETAILS (Please fill in Block Letters use one box for one alphabet leaving one box blank between two words, as it appears in your Bank Account)

Name	Mr	Ms	M/s																													
Date of Birth	D	D	M	M	Y	Y	Y	Y	Status:	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																					
Name of the Contact Person in case of Non-Individual																																
<b>Guardian Name</b> (if sole / First applicant is a Minor)																																
Name	Mr	Ms	M/s																													
Date of Birth	D	D	M	M	Y	Y	Y	Y	Status:	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																					
<b>Address</b> [P. O. Box Address is not sufficient] (Indian address in case of NRI's / FII's)																																
																								City			Pin code Mandatory					
																								State			Country					
<b>Contact Details</b>																																
Phone	O																						Extn.			Fax			Mobile			
	R																															
e-mail																																
I/We wish to receive the following via e-mail in lieu of physical document(s) (Please ✓) <input type="checkbox"/> Account Statement <input type="checkbox"/> Annual Report <input type="checkbox"/> Other Communication																																
<b>Overseas Address</b> (Mandatory in case of NRI / FII applicant in addition to mailing address)																																
																								City								
																								State			Country			Zip code		

I/We confirm that I am/we are non-residents of Indian nationality/origin & that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/FCNR Account.

Occupation (please ✓)	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Business	<input type="checkbox"/> Service	<input type="checkbox"/> Professional	<input type="checkbox"/> Housewife	<input type="checkbox"/> Retired	<input type="checkbox"/> Student	<input type="checkbox"/> Other
Are you applying as (please ✓)	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> Trust	<input type="checkbox"/> BOI	<input type="checkbox"/> Pvt. Ltd. Co.	<input type="checkbox"/> Societies	<input type="checkbox"/> Body Corporate		
	<input type="checkbox"/> NRI/NRO	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> AOP	<input type="checkbox"/> FII	<input type="checkbox"/> HUF	<input type="checkbox"/> FOF		
	<input type="checkbox"/> NRI/NRE	<input type="checkbox"/> Partnership	<input type="checkbox"/> Public Ltd. Co.	<input type="checkbox"/> On behalf of Minor	<input type="checkbox"/> PIO	<input type="checkbox"/> Others _____		

## 3. JOINT APPLICANT'S DETAILS

<b>Second Applicant</b>																											
Name	Mr	Ms	M/s																								
Date of Birth	D	D	M	M	Y	Y	Y	Y	Status:	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																
<b>Third Applicant</b>																											
Name	Mr	Ms	M/s																								
Date of Birth	D	D	M	M	Y	Y	Y	Y	Status:	<input type="checkbox"/> RI	<input type="checkbox"/> NRI																
<b>Mode of Holding</b> (please ✓) <input type="checkbox"/> Single OR <input type="checkbox"/> Joint OR <input type="checkbox"/> Anyone or Survivor <b>Default Option: Joint</b>																											
<b>Name of Power of Attorney holder (POA) if investment is being made by a Constituted Attorney:</b>																											
Name	Mr	Ms	M/s																								
PAN*																											

\* Refer Instruction - E. Kindly enclose copy of the proof of PAN. In case of a joint holding, PAN of all the joint holders should be mentioned in the application form.

## ACKNOWLEDGEMENT SLIP (To be filled by the investor)

Sr. No.:

Received from Mr. / Ms. / M/s.		
an application for Units of		
Plan	Option	Sub-option
alongwith Cheque / DD No.	Dated	Drawn on (Bank)
Amount (Rs.)		
Signature, Stamp & Date		

Subject to realisation of cheque / Demand Draft and verification of mandatory information / document.

**4. FIRST HOLDERS BANK ACCOUNT DETAILS (Mandatory) Refer Instruction G**

All communication/payments will be made to first applicant or to Karta in case of HUF. Bank account details of First Unitholder required without which the application would be rejected

Name of the Bank \_\_\_\_\_

Branch \_\_\_\_\_ Account Type  Savings  Current  NRO  NRRN  NRE

Account No. (in Fig.) \_\_\_\_\_

Account No. (in words) \_\_\_\_\_

Bank Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

PIN \_\_\_\_\_ MICR Code \_\_\_\_\_ (To be filled in only if dividend is to be paid through ECS).

\* **IFSC Code for NEFT**

Ac. No. \_\_\_\_\_ 9 7 4 6 1 5 2

In words \_\_\_\_\_ Nine Seven Four Six One Five Two

Example for filling the Account No. \_\_\_\_\_

\* This is a 11 Digit Number, kindly obtain it from your Bank Branch. (Please attach copy of cancelled cheque)

**5. DIRECT CREDIT FACILITY FOR REDEMPTION / DIVIDEND / REFUND PAYOUTS**

Tata Mutual Fund directly credits the Redemption/Dividend/Refund payout into the investor's Bank Account in case the account is with **ICICI Bank Ltd./HDFC Bank Ltd./Axis Bank/IDBI Bank/Standard Chartered Bank/Kotak Mahindra Bank/HSBC Bank/Deutsche Bank/ABN Amro Bank/Oriental Bank of Commerce/ Centurion Bank of Punjab/State Bank of India (Core banking centers only - subject to validation).**

I/We understand that the instruction to the bank for Direct Credit/NEFT/ECS will be given by the Mutual Fund & such instruction will be adequate discharge of Mutual Fund towards redemption/dividend/refund proceeds. In case of bank not crediting my/our bank account with/without assigning any reason thereof or if the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Tata Mutual Fund responsible. I/We understand that in case account number furnished by me/us, if found incorrect, I/We would not hold Tata Mutual Fund responsible for the credit going to the wrong account. Further, the Mutual Fund reserves the right to issue a demand draft/payable at par cheque in case it is not possible to make payment by DC/NEFT/ECS.

If however you wish to receive payouts by cheque, please tick here

**6. SCHEME DETAILS Refer Page 3 & 4 for correct scheme name**

Scheme Name \_\_\_\_\_ Plan \_\_\_\_\_

Options \_\_\_\_\_ Dividend Frequency \_\_\_\_\_

**[A] INVESTMENT DETAILS (Strike off whichever is not applicable)**

Gross Amount (A) \_\_\_\_\_ DD Charges (if any) (B) \_\_\_\_\_ Net Amount (Cheque / DD Amount) \_\_\_\_\_

Rs. \_\_\_\_\_ Rs. \_\_\_\_\_ A minus B \_\_\_\_\_

Mode of Payment \_\_\_\_\_ Dated \_\_\_\_\_

A/c No. \_\_\_\_\_ A/c Type \_\_\_\_\_ Cheque / DD No. \_\_\_\_\_

Drawn on Bank \_\_\_\_\_ Branch \_\_\_\_\_ City \_\_\_\_\_

**[B] SYSTEMATIC INVESTMENT**

Installment Amount (Rs.) \_\_\_\_\_ No. of Installments \_\_\_\_\_ Total Amount \_\_\_\_\_ SIP Period \_\_\_\_\_

Rs. \_\_\_\_\_ x \_\_\_\_\_ = Rs. \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

First SIP Installment Cheque Details :

Cheque No. \_\_\_\_\_ Rs. \_\_\_\_\_ Dated \_\_\_\_\_

SIP Date (Please ✓)  1st OR  07th OR  10th OR  20th SIP Frequency (Please ✓)  Monthly OR  Quarterly

From Cheque No. \_\_\_\_\_ To Cheque No. \_\_\_\_\_ No. of Cheques \_\_\_\_\_

Drawn on Bank \_\_\_\_\_ Branch \_\_\_\_\_ City \_\_\_\_\_

**SIP THROUGH AUTO-DEBIT (ECS)**  
Please fill up enclosed SIP Auto Debit (ECS) Facility Form and submit it together with this Application Form.

**SIP THROUGH POST-DATED CHEQUES**  
Please fill attached SIP form for Post Dated Cheques (PDCs)

**7. NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly) Refer Instruction - J**

Name and Address of the Nominees(s)	Nominee's Relationship with the 1st unitholder	Proportion (%) by which the units shared by will be shared by each nominee (% to aggregate to 100%)	Date of Birth	Name & Address of Guardian	Signature of Guardian
Nominee 1					
Nominee 2					
Nominee 3					

(to be furnished in case the nominee is minor)

**8. DECLARATION AND SIGNATURES. Refer Instruction - C**

**The Trustee, Tata Mutual Fund**

a) Having read & understood the contents of the Offer Document of the Scheme, I/We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt of India from time to time. I/We have understood the details of the scheme & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the AMC, I/We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b) For NRIs: I/We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I/ we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary. I/We confirm that details provided by me / us are true and correct. c) I/We have read & understood the SEBI Circular No. MRD/DoP/Cir-05/2007 dt. April 27, 2007 & SEBI Circular No. 35/MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/we are holding valid PAN card.

Date: \_\_\_\_\_

1st Unitholder Signature / Thumb Impression \_\_\_\_\_

2nd Unitholder Signature / Thumb Impression \_\_\_\_\_

3rd Unitholder Signature / Thumb Impression \_\_\_\_\_

**CHECKLIST**

**Tata Mutual Fund: Toll Free No. 1800-209-0101 (Open on all days). Email: kiran@tataamc.com, Website: www.tatamutualfund.com.**

**Checklist:** Documents as listed below are submitted along with this application .

Document List	Document List	Document List
1. PAN <input type="checkbox"/>	5. Memorandum & Articles of Association <input type="checkbox"/>	9. Overseas Auditor's Certificate <input type="checkbox"/>
2. KYC <input type="checkbox"/>	6. Trust Deed <input type="checkbox"/>	10. Notarised Power of Attorney <input type="checkbox"/>
3. Resolution / Authorisation to invest <input type="checkbox"/>	7. Bye-Laws <input type="checkbox"/>	11. Foreign Invest Remittance Certificate (FIRC) <input type="checkbox"/>
4. Authorised Signatories List with Specimen Signature <input type="checkbox"/>	8. Partnership Deed <input type="checkbox"/>	12. Others _____ <input type="checkbox"/>

All documents in 3 to 8 above should be originals / true copies certified by the Director's / Trustee / Company Secretary / Authorised Signatory / Notary Public.