Common Application Form for FIBCF, FIPF, FIPP, FIOF, TIGF, FIIF, FIFCF, FIF, FFF, TICAP, TIPP, FIT, TIEIF, FIHGCF, FTIBF, FTDPEF & FTLF

Sl. No.

Distributor information			For Office Use Only						
Advisor Code*		Sub-Advisor Code*	:	Application received					
ARN-1619		Branch :							
* AMFI Registered Distributors		Representative :							
Existing Unitholders (Please provide the following details in full; Please refer Instruction 2)									
First Applicant Name									
Customer Folio 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* \square or K	YC Application	No.*		Date of Birth [#] □ D D M M Y Y Y Y ppy or □ Form 49A & □ Form 60 ^ Gender □ Male □ Femal					
				☐ Trust ☐ Society ☐ HUF ☐ Bank ☐ AOP					
□ Sole Proprietorship □ Minor through Guardian [#] □ FI □ FII □ Others (Please specify)Nationality and Country of Residence									
Name of Second Applicant		Date of Birth# DDMMYYYYY							
Proof of KYC enclosed* \(\sigma\) or K	YC Application	No.*	Endered EDAN Cod Co	Date of Birth# D D M M Y Y Y Y					
PAN No. (Mandatory)\$									
Nationality and Country of Residence									
Name of Third Applicant									
Proof of KYC enclosed* □ or K	YC Application	No.*		Date of Birth# D D M M Y Y Y Y					
PAN No. (Mandatory)\$ Enclosed: □ PAN Card Copy or □ Form 49A & □ Form 60 ^ Gender □ Male □ Female									
Status: □ Resident Individual □ NRI/PIO □ Minor through Guardian# □ Others (Please specify)									
Nationality and Country of Residence Name of Guardian									
	YC Application	No *		Date of Birth D D M M Y Y Y Y					
Proof of KYC enclosed* □ or KYC Application No.* □ □ Date of Birth □ □ □ M M Y Y Y Y Y □ PAN No. (Mandatory)\$ □ □ Enclosed: □ PAN Card Copy or □ Form 49A & □ Form 60 ^ Gender □ Male □ Female									
Status: Resident Individual NRI/PIO Others (Please specify)									
Nationality and Country of Residence									
*Please provide any one of the following: 1. Copy of the KYC acknowledgement issued by CVL or 2. KYC Application with necessary documents. (Mandatory for all Investors). \$PAN: In terms of SEBI circular dated April 27, 2007, verification of PAN is mandatory for all Unitholders (including joint holders, guardians in case of minors and NRIs) w.e.f. July 2, 2007									
of form 60 is mandatory for invest	tments of Rs.50,0	00 and above #Date of Bi	rth - mandatory for Minors and all	verification, which will be returned across the counter). ^Submiss investments in TIPP(in TIPP, only individuals may invest).					
I/We would like to invest in	1			Mode of Operation					
Separate cheque/demand draft required for ea plan/option you may refer to the KIM for m also fill in the option exercise form available	ne(s) and the requested to Single Joint Either or Survivor(s								
Scheme Names (Please tick (✔))				Power of Attorney (POA) Details					
□ FIBCF □ FIPF □ FIPP □ FIOF □	TIGF TIEIF								
□ 20's Plan □ 30's Plan □ FTLF □ 40's Plan □ 50's Plan	☐ TICAP	□ Education Plan □ FII	☐ BSE Sensex Plan						
□ 50's Plus Floating Rate Plan		□ NSE Nifty Plan	Proof of KYC enclosed* □ or KYC Application No.						
Plan /Options (Please tick (✔))									
☐ Lumpsum ☐ Growth ☐ Dividend Payout ☐ Dividend Payout									
Amount Invested	<u>'</u>	Date of Birth D D M M Y Y Y							
Net Amount Paid		Status: (Please tick (🗸))							
Payment Details* Cheque/DD No.	Bank, Bar	☐ Resident Individual ☐ NRI/PIO							
	Dank, Dan	☐ Others (Please specify)							
Please use separate application forms for Lumpsum and Syst. If you have an existing account in the scheme mentioned above.	tematic Investment Plan, ple	ication form. lease tick here Gender:							
If you have an existing account in the schome mentioned above, this purchase will be treated as an additional purchase in the same account. If you prefer to have a new account in the same schome please tick bere limited in the same account in the same schome please tick bere limited in the same account in the same schome please tick bere limited in the same account in the same schome please tick bere limited in the same account in the same schome please tick bere limited in the same account in the same schome please tick bere limited in the same schome please tick bere limited in the same account at the same schome please tick bere limited in the same account in the same schome please tick bere limited in the same sc									
Acknowledgement Sl. No.									
Received from									
Pin									
Scheme Name	Plan/Option		Payment Details						
Lumpsum Amount Cheque/DD N				Cheque/DD No Date					
	Plan								

Address (Man	datory if you have not completed	your KYC process via CVL, else the addres	s of the 1st Holder as registered wit	h CVL will be automatically updated	l in our records)			
City		State	Country	Pincode				
Overseas Address	for NRIs/PIOs							
City		State	Country	Pin/Zip				
Contact Deta	ils (Please provide your contact	details even if you have already submitted yo		, , ,				
	ole Proprietorship Firm, please prov	ide the name of Sole Proprietor. If HUF, please	e provide the name of Karta. In case of	other Non-Individuals, please provide	the details of Contact Person.			
Name								
Tel STI	O Code	Office	Residence		Fax			
Email			Mobile					
Franklin Tem	oleton 'Easy' Services							
other informatic Email Address:	eton Easy e-Update: Receive a on instantly by Email * o receive the above by email wish to receive the above by em eton Easy Web: Access your a apletonindia.com using your F	count and transact online at	3. Franklin Templeton Easy Call: Just call 1800 425 4255 or 6000 4255 to access your account using TPIN ☐ Yes, I would like to receive my TPIN 4. Franklin Templeton Easy Mobile: Get instant SMS alerts to confirm your transactions * Mobile Number ☐ I/We wish to register for SMS updates on my/our mobile phone. ☐ Yes ☐ No * Note: Where the investor has not opted for any option or has opted for both options, the application will be processed as per the default option, i.e., receive the account statement,					
	ike to receive my HPIN			espondence by E-mail and receive				
Bank Detail	s (Mandatory - For new investo	ors)						
Bank Name (Do not abbreviate)								
Account No.			Branch/City					
Please provide the fi	ıll account number I				1			
Branch Address				Pin				
Account type	For Residents □ Savings	□ Current For Non-Residents						
Direct Credit Facility is cu & Axis Bank. Please prov reserves the right to effect	nrrently available with: ABN Amro Bank ide a cancelled, signed cheque of the ba payments of dividends and redemptions	*NEFT code es, please refer detailed instructions in page 6. (Citibank, Centurion Bank of Punjab, Development (the account you wish to register for Direct Credit. If y by way of a cheque or payment instrument till such ti and as shown in your account statement. Franklin Temple	you do not provide a cancelled and signed on me that the account details provided can be	*MICR code Bank, ICICI Bank, Kotak Mahindra Bank, St. cheque, Franklin Templeton will record the verified. I/We DO NOT wish to avail direc	new bank details as provided, but t credit facility (Please tick) □			
Nomination D	etails							
Nominee N	ame & Address							
Guardian na	me & address (if nominee	is a minor)						
			Signature of Nom	ninee/Guardian				
Declaration								
hereby apply to the Trust terms, conditions, rules a us. I/We have not recei	ees of Franklin Templeton Mutual Fund nd regulations of the Fund as on the da yed nor been induced by any rebate or g	nt of the Fund, the Key Information Memorandum If for units of Franklin Templeton Mutual Fund as in the of this investment and confirm that the monies in ifts, directly or indirectly in making this investment.	dicated above, and agree to abide by the vested in the fund legally belong to me /	Signatures				
the United States Securiti approved banking channe I/We hereby declare that	es Act of 1933, as amended from time t els or from my/our monies in my/our N all the particulars given herein are true,	correct and complete to the best of my/our knowled	nonies are remitted from abroad through ge and belief. I further agree not to hold	First/Sole Applicant/Guardian				
promptly inform the mut representatives, distribut activities performed by t	ual fund of any changes to the informati ors ('the Authorised Parties') are not li nem on the basis of the information pr	ase of any of the above particulars being false, incorn on provided hereinabove and agree and accept that the able or responsible for any losses, costs, damages a ovided by me as also due to my not intimating / de	ne Mutual Funds, their authorised agents, rising out of any actions undertaken or lay in intimating such changes. I hereby	Second Applicant				
authorize the mutual fund to disclose, share, remit in any form, mode or manner, all / any of the information provided by me to Authorised Parties including Financial Intelligence unit-India (FIU-IND) including all changes, updates to such information as and when provided by me without any obligation of advising me/us of the same. I hereby agree to provide any additional information / documentation that may be required by the Authorised Parties, in connection with this application."								
I/We confirm and declar www.franklintempletoni	e that I/ We have read and understoo ndia.com. I/ We agree and shall abide b e use of HPIN/ TPIN/ Email services	d the terms and conditions for HPIN usage and o y the norms, terms and conditions for HPIN usage facility.	nline transactions/ TPIN/ Email Services e and online transactions/ TPIN/ Email se	and also the disclaimer and terms and co ervices and agree not to hold Franklin Tem	nditions as posted on the website, pleton Investments responsible for			
Date:	Place							
Disclaimer: In the event may be redeemed at app of subscriptions in scher Agency that the KYC is	of any KYC Application Form being licable NAV, subject to payment of ex me where Units are under a lock – in p final and if the Central Agency infor	subsequently rejected for lack of information / d t load, wherever applicable. Such redemption proc period as prescribed in the respective offer Docum ns that the KYC is cancelled, the original amount	leficiency / insufficiency of mandatory do eeds will be despatched within a maximum ents (including ELSS Schemes) or a New invested will be refunded.	ocumentation, the investment transaction in period of 21 days from date of acceptan Fund Offer, allotment will be done only	will be cancelled and the amount ce of application. However, in case on confirmation from the Central			



For investment related enquiries, please contact:

Franklin Templeton Investments Service Centres

Ph: 1-800-425 4255 (For MTNL/BSNL users only. Local call rates apply) or 6000 4255 (For non-MTNL/non-BSNL users, please prefix the city STD code if calling from a mobile phone) Email: service@templeton.com

www. franklintempletonindia.com

CHECK LIST: Please ensure the following: • Application form is complete in all respects and signed by all Applicants • Bank Account details are filled • You have registered Permanent Account Number (PAN) for all holders, including joint holders, guardians & NRI s and submitted the necessary proof (refer instructions) • Appropriate Options are filled up • Cheques/DDs should be drawn in favour of the respective fund name • If you are investing for the first time, please ensure that you fill in the contact details for us to contact you in case of any discrepancy in the form. • You have provided a copy of the KYC acknowledgement or submitted the KYC Application and entered the application No. for all applicants, guardians for minors and POA holders