

# COMMON APPLICATION FORM

Appl. CA

Date : DD / MM / YYYY

Investment Advisor's Name & ARN	Sub-Broker's Name & ARN	Official Acceptance Point	LG - Code	Bank Sr. No.
ARN-1619	ARN-1619	Stamp & Sign		

## 1. 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, Account Number and PAN details below and proceed to Section 4.

Name of Sole / First Holder : \_\_\_\_\_ Account No.: \_\_\_\_\_ / \_\_\_\_\_

## 2. NEW APPLICANTS' PERSONAL INFORMATION [Refer Guideline 2]

**SOLE/FIRST APPLICANT** Mr  Ms  Mrs  Dr  Date of Birth \_\_\_\_\_  
 \_\_\_\_\_  
 DD / MM / YYYY

First Name Middle Name Last Name

**GUARDIAN (in case Sole / First Applicant is a minor)** Mr  Ms  Mrs  Dr   
 \_\_\_\_\_  
 First Name Middle Name Last Name

**CONTACT PERSON (in case of Non-individual applicants)** Mr  Ms  Mrs  Dr   
 \_\_\_\_\_  
 Name Designation

**SECOND APPLICANT (Joint Holder 1)** Mr  Ms  Mrs  Dr   
 \_\_\_\_\_  
 First Name Middle Name Last Name

**THIRD APPLICANT (Joint Holder 2)** Mr  Ms  Mrs  Dr   
 \_\_\_\_\_  
 First Name Middle Name Last Name

**MODE OF OPERATION (where there are more than one applicants)**  
 First Holder only  Anyone or Survivor  Joint

**PAN\*** Enclosed (please ✓)

Sole / First Applicant	Second Applicant	Third Applicant
<input type="checkbox"/> PAN Proof or <input type="checkbox"/> Form 60 / 61 / 49A	<input type="checkbox"/> PAN Proof or <input type="checkbox"/> Form 60 / 61 / 49A	<input type="checkbox"/> PAN Proof or <input type="checkbox"/> Form 60 / 61 / 49A

\* Mandatory for all Investors (Indian & NRI) irrespective of the investment amount.

- Status (Please ✓)**
- Resident Individual
  - INRI on Repatriation Basis
  - NRI on Non-Repatriation Basis
  - HUF
  - Proprietorship
  - Partnership Firm
  - Private Limited Company
  - Public Limited Company
  - Mutual Fund
  - Mutual Fund FOF Scheme
  - Body Corporate
  - Registered Society
  - PF/Gratuity/Pension/ Superannuation Fund
  - TrustAOP / BOI
  - Foreign Institutional Investor
  - Others \_\_\_\_\_ (Please specify)
- Occupation (Mandatory) (Please ✓)**
- Business
    - Manufacturing  Trading
  - Service
    - Government  Non-Government
  - Professional
    - Medicine  Finance
    - Engineering  Legal
  - Retired
  - Housewife
  - Student
  - Agriculture
  - Others \_\_\_\_\_ (Please specify)

**RESIDENTIAL ADDRESS (Mandatory)**

\_\_\_\_\_

City \_\_\_\_\_ Pin Code \_\_\_\_\_ State \_\_\_\_\_ (Cell) \_\_\_\_\_  
 ☎ E-mail \_\_\_\_\_ ☎ Tel. \_\_\_\_\_ ☎ (Fax) \_\_\_\_\_

**OFFICE ADDRESS**

\_\_\_\_\_

City \_\_\_\_\_ Pin Code \_\_\_\_\_ State \_\_\_\_\_ (Cell) \_\_\_\_\_  
 ☎ E-mail \_\_\_\_\_ ☎ Tel. \_\_\_\_\_ ☎ (Fax) \_\_\_\_\_

**OVERSEAS ADDRESS (Mandatory for Non-Resident applicants)** Address for Correspondence (Please ✓)  Indian  Overseas

\_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ State \_\_\_\_\_  
 Country \_\_\_\_\_ Nationality \_\_\_\_\_

**To be filled by Applicant** Received from Mr./Ms. \_\_\_\_\_  
 an application for allotment of Units in the following Scheme:

Investment Details	Instrument Details	Amount
Scheme _____	No. _____ Dated DD/MM/YYYY	Rs. _____
Plan _____	Bank & Branch _____	
Option _____		

Please retain this slip duly acknowledged by the Official Acceptance Point till you receive your Account Statement.

**ACKNOWLEDGEMENT SLIP**  
 Appl. CA

Official Acceptance Point Stamp & Sign

**3. BANK ACCOUNT DETAILS (MANDATORY)****[Refer Guideline 3]**

Name of Bank \_\_\_\_\_  
 Branch \_\_\_\_\_  
 City \_\_\_\_\_ (Clearing Circle)  
 Account No. \_\_\_\_\_  
 MICR Code \_\_\_\_\_  
This is the 9 digit No. next to your Cheque No.  
 Account Type :  Current  Savings  NRO  NRE  FCNR  Others

**DIRECT CREDIT**

We offer a Direct Credit Facility with the following banks for paying out Dividend and Redemption Proceeds to you faster.

- ABN AMRO Bank
- AXIS Bank
- Centurion Bank of Punjab
- Citibank
- Corporation Bank
- Deutsche Bank
- HDFC Bank
- HSBC
- ICICI Bank
- IDBI Bank
- IndusInd Bank
- Kotak Mahindra Bank
- Standard Chartered Bank

If your bank account is with any of these banks, we will directly credit your dividend/redemption proceeds into the same.

If, however, you wish to receive a cheque payout, please tick the box alongside.

**4. INVESTMENT DETAILS****[Refer Guideline 4]**

Sl. No.	Scheme Name	Plan/Option/Sub-option	Amount Invested (Rs.)	Net Amount Paid (Rs.)	Payment Detail	
					Cheque/DD No.	Bank and Branch
1.			Less DD Charges			
2.			Less DD Charges			
3.			Less DD Charges			

If you are an NRI Investor, please indicate source of funds for your investment (Please ✓)

- NRE  NRO  FCNR  Others

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

**5. NOMINATION DETAILS (to be filled in by Individual(s) applying Singly or Jointly)****[Refer Guideline 5]**

I/We \_\_\_\_\_ and \_\_\_\_\_ do hereby nominate the undermentioned Nominee to receive the Units to my/our credit in Account No./Application No. \_\_\_\_\_ in the event of my/our death. I/we also understand that all payments and settlements made to such Nominee and signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustee.

**DETAILS OF NOMINEE**

NAME \_\_\_\_\_ Date of Birth \_\_\_\_\_  
DD / MM / YYYY  
 ADDRESS \_\_\_\_\_  
 City/Town \_\_\_\_\_ Pin \_\_\_\_\_  
 Tel. \_\_\_\_\_  
 Signature of Nominee \_\_\_\_\_

**DETAILS OF GUARDIAN (to be furnished in case Nominee is a Minor)**

(Strike off if this section is not applicable to you)

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 City/Town \_\_\_\_\_ Pin \_\_\_\_\_  
 Tel. \_\_\_\_\_  
 Signature of Guardian \_\_\_\_\_

**6. E-MAIL COMMUNICATION****[Refer Guideline 6]**

I / We would like to receive the following communication by E-Mail: [Please ✓]

- Account Statement  Monthly Update  ECS of Dividends  Transaction Confirmation  Annual Report

Please furnish your Email ID :

Your E-mail ID here \_\_\_\_\_

**7. DECLARATION AND SIGNATURES****[Refer Guideline 7]**

I / We have read and understood the contents of the Offer Document(s) of the respective Scheme(s) of Kotak Mahindra Mutual Fund. I / We hereby apply for allotment / purchase of Units in the Scheme(s) indicated in Section 4 above and agree to abide by the terms and conditions applicable thereto. I / We hereby declare that I / We are authorised to make this investment in the above-mentioned scheme(s) and that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of Income Tax Act, Anti Money Laundering Act, Anti Corruption Act or any other applicable laws enacted by the Government of India from time to time. I / We hereby authorise Kotak Mahindra Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my / our Investment Advisor and / or my bank(s) / Kotak Mahindra Mutual Fund's bank(s). I / We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.

**Applicable to NRIs seeking repatriation of redemption proceeds:** I / We confirm that I am / we are Non-Resident(s) of Indian Nationality / Origin and that I / We have remitted funds from abroad through approved banking channels or from funds in my/our NRE / FCNR Account.

**SIGNATURE(S)**

Sole / First Applicant



Second Applicant



Third Applicant

(To be signed by **All Applicants**)

Kotak Mahindra Mutual Fund  
 91/92, 9th Floor, Sakhar Bhavan, 230,  
 Nariman Point, Mumbai 400 021

☎ 022-6638 4400

✉ mutual@kotak.com www.kotakmutual.com

Computer Age Management Services Pvt. Ltd.  
 158, Rayala Towers, 4th Floor, Anna Salai, Chennai 600 002

☎ 044 2852 1596

✉ enq\_k@camsonline.com www.camsonline.com

**We are at your service on 1800-222-626 from 9.30 a.m. to 6.30 p.m. (Monday to Friday)**