

 <b>NMF II Platform</b>		IIN No.:	<b>Investor Form</b>	
<b>Advisor/Distributor : Code/Name</b>				
<b>UnitHolder Information</b>				
<b>Name of the First Applicant :</b>				
<b>PAN/Exempt No.:</b>	<b>Date of Birth :</b>	<b>Tax Status* :</b>	<b>cKYC Ref No. :</b>	
<b>Father Name :</b>		<b>Mother Name :</b>		
<b>Name of Guardian :</b>	<b>Date of Birth :</b>	<b>PAN/Exempt No. :</b>	<b>cKYC Ref No. :</b>	
<b>Contact Address :</b>				
<b>City :</b>	<b>Pincode :</b>	<b>State :</b>	<b>Country :</b>	
<b>Tel.(Off) :</b>	<b>Tel.(Res) :</b>	<b>Email :</b>		
<b>Fax.(Off) :</b>	<b>Fax.(Res) :</b>	<b>Mobile:</b>		
<b>Mode of Holding :</b>	<b>DP ID :</b>	<b>Occupation :</b>		
<b>Name of Second Applicant :</b>		<b>PAN/Exempt No. :</b>		
<b>Second Applicant Email:</b>		<b>Second Applicant Mobile :</b>		
<b>Second Applicant Date of Birth :</b>		<b>Second Applicant cKYC Ref No. :</b>		
<b>Name of Third Applicant :</b>		<b>PAN/Exempt No.:</b>		
<b>Third Applicant Email :</b>		<b>Third Applicant Mobile :</b>		
<b>Third Applicant Date of Birth :</b>		<b>Third Applicant cKYC Ref No. :</b>		
<b>Other Details</b>				
<b>Overseas Address (If investor is NRI) :</b>				
<b>City :</b>	<b>Pincode :</b>	<b>Country :</b>		
<b>Bank Mandate Details</b>				
<b>Name of Bank :</b>		<b>Branch :</b>		
<b>A/c No. :</b>	<b>A/c Type :</b>	<b>IFSC Code :</b>	<b>MICR No. :</b>	
<b>Bank Address :</b>				
<b>City :</b>	<b>Pincode :</b>	<b>Country :</b>		
<b>Nomination Details</b>				
<b>Nominee Name 1 :</b>	<b>Date of Birth:</b>	<b>Relationship :</b>	<b>Percentage :</b>	
<b>Guardian Name(If nominee 1 is minor) :</b>		<b>Guardian PAN :</b>		
<b>Nominee Address :</b>				
<b>City :</b>	<b>Pincode :</b>	<b>State :</b>		
<b>Nominee Name 2 :</b>	<b>Date of Birth:</b>	<b>Relationship :</b>	<b>Percentage :</b>	
<b>Guardian Name(If nominee 2 is minor) :</b>		<b>Guardian PAN :</b>		
<b>Nominee Name 3 :</b>	<b>Date of Birth:</b>	<b>Relationship :</b>	<b>Percentage :</b>	
<b>Guardian Name(If nominee 3 is minor) :</b>		<b>Guardian PAN :</b>		
<b>Declaration and Signature</b>				
<p>I/We confirm that the information provided by me/us is true and correct. I/We acknowledge that the responsibility of the information provided in the registration form 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 and/or erroneous 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 transactions including 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 provided at the time of 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 NMF II is pertaining to me/us and all communication/correspondence/transactions related alerts shall be sent to same email id/mobile no.</p> <p>I/We confirm that for existing investments, I/we had gone through, understood the contents of the Scheme Information Document and Key Information Memorandum, addenda issued from time to time regarding each Mutual Fund Scheme, in which I/We had chosen to subscribe / redeem. I/We will also ensure that I/we shall 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.</p> <p>I/We hereby authorize NSE to collect the following data/ information pertaining to my / our mutual fund investments from all Asset Management Companies (AMCs) and their respective Registrar and Transfer Agents with whom I/We transact: -</p> <ol style="list-style-type: none"> <li>Distributor wise transaction data for historical, present and future transactions carried out through various transaction platforms including transaction request submitted at any point of acceptance of the AMCs subject to the condition that the Distributor is registered with NSE NMF II platform.</li> <li>Scheme wise consolidated unit balance available in my account(s) as and when required.</li> </ol> <p>I/We hereby authorize the Distributor, NSE &amp; AMC (including its Registrars) to utilize my/our KYC information, such as identity, address and signature for the purpose of validation and to comply with the legal and regulatory requirements. I/We accept that for any transaction submitted offline i.e. with wet signatures, the signature available 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 within its rights to carry out further checks to validate the authenticity of the request or reject any such offline request.</p>				
<b>Date :</b>		<b>Place :</b>		
<b>Signature 1st Applicant :</b>		<b>Signature 2nd Applicant :</b>		<b>Signature 3rd Applicant :</b>
<b>*Documents Required:</b>				
Trust : Trust Deed and Authorised Signatory List Partnership Firm : Partnership Deed and Authorised Signatory List. Societies : Bye-Laws and Authorised Signatory List FII & LLP : Overseas Auditors Certificate, Authorised Signatory List ,Board Resolution/Authorisation to Invest Corporate : Board Resolution and Authorised signatory List Minor : Proof of Date of Birth For all investors, a Cancelled cheque should also be mandatorily submitted as proof of bank account. Individual Investor – Additional KYC and FATCA compliance mandatory for IIN activation. Corporate / HUF Investor – Additional KYC, FATCA and UBO compliance mandatory for IIN activation. Note: For Corporate and HUF investors all forms have to be submitted in physical post making necessary submissions on NMF II platform. Once the submissions are made on the platform printed version of forms will be generated from NMF platform.				
This Investor Form was generated through NMF II platform.				

Sponsor Bank Code  Utility Code

Tick(✓)  
 CREATE  
 MODIFY  
 CANCEL

I/We hereby authorize  NSE Clearing - New Mutual Fund Platform to debit tick (✓)  SB  CA  CC  SB-NRE  SB-NRO  Others

Bank A/c number

with Bank  IFSC  or MICR

an amount of Rupees  ₹

FREQUENCY  Monthly  Quarterly  Half Yearly  Yearly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

IIN  Mobile No.

Mandate ID  Email ID

I agree for the debit mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule for charges of the bank.

PERIOD

From	<input type="text" value="D D"/>	<input type="text" value="M M"/>	<input type="text" value="Y Y Y Y"/>
To	<input type="text" value="D D"/>	<input type="text" value="M M"/>	<input type="text" value="Y Y Y Y"/>

Or  Until Cancelled

Signature of Primary Account Holder \_\_\_\_\_ Signature of Account Holder \_\_\_\_\_ Signature of Account Holder \_\_\_\_\_

1. \_\_\_\_\_ Name as in bank records 2. \_\_\_\_\_ Name as in bank records 3. \_\_\_\_\_ Name as in bank records

• This is to confirm the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account, based on the instructions as agreed & signed by me.  
 • I have understood that I am authorised to cancel/amend this mandate by a appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorised the debit.

**PLEASE DO NOT SUBMIT THE FORM WITHOUT THE ENTRY IN THE SYSTEM.**

Write Name of your Bank (as in Cheque/pass book) <b>Mandatory</b>	Write Your Bank a/c no. (as in Cheque/pass book) <b>Mandatory</b>	Mention any one of Your bank code IFSC or MICR code (as in Cheque/pass book) <b>Mandatory</b>	Tick Bank account type <b>Mandatory</b>	Mention the date
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UMRN  Date

Sponsor Bank Code  Utility Code

Tick(✓)  
 CREATE  
 MODIFY  
 CANCEL

I/We hereby authorize  NSE Clearing - New Mutual Fund Platform to debit tick (✓)  SB  CA  CC  SB-NRE  SB-NRO  Others

Bank A/c number

with Bank  IFSC  or MICR

an amount of Rupees  ₹

FREQUENCY  Monthly  Quarterly  Half Yearly  Yearly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

IIN  Mobile No.

Mandate ID  Email ID

I agree for the debit mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule for charges of the bank.

PERIOD

From	<input type="text" value="D D"/>	<input type="text" value="M M"/>	<input type="text" value="Y Y Y Y"/>
To	<input type="text" value="D D"/>	<input type="text" value="M M"/>	<input type="text" value="Y Y Y Y"/>

Or  Until Cancelled

Signature of Primary Account Holder \_\_\_\_\_ Signature of Account Holder \_\_\_\_\_ Signature of Account Holder \_\_\_\_\_

1. \_\_\_\_\_ Name as in bank records 2. \_\_\_\_\_ Name as in bank records 3. \_\_\_\_\_ Name as in bank records

• This is to confirm the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account, based on the instructions as agreed & signed by me.  
 • I have understood that I am authorised to cancel/amend this mandate by a appropriately communicating the cancellation/amendment request to the user entity/corporate or the bank where I have authorised the debit.

Write Payment Start date <b>Mandatory</b>	Sign as per Bank records (Sign of all account holders primary & Joint required) <b>Mandatory</b>	Write Name of Bank account holders - as per bank records (All signatories name required) <b>Mandatory</b>	Write Mandate Amount (In both figure & words) To be debited <b>Mandatory</b>
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Mandatory columns to be filled		
① Date in DD/MM/YYYY format	② Select the Account type	③ Customer's bank account number
④ Name of the bank	⑤ IFSC code of customer bank	⑥ Amount in Words
⑦ Amount in figures	⑧ ACH start date	⑨ Name(s) of the customer(s) and Signature(s)



## INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM

### A. IMPORTANT POINTS:

1. Self attested copy of PAN card is mandatory for all clients, including Promoters/Parents/Karta/Trustees and whole time directors and persons authorized to deal in securities on behalf of company/firm/others.
2. Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification. In case the original of any document is not produced for verification, then the copies should be properly attested by entities authorized for attesting the documents, as per the list mentioned under [E].
3. If any proof of identity or address is in a foreign language, then translation into English is required.
4. Name & address of the applicant mentioned on the KYC form, should match with the documentary proof submitted.
5. If correspondence & permanent addresses are different, then proofs for both have to be submitted.
6. Sole proprietor must make the application in his individual name & capacity. If you are a sole proprietor, please use the KYC Application Form for Individuals.
7. For foreign entities, CIN is optional; and in the absence of DIN no. for the directors, their passport copy should be given.

### B. Permanent Account Number (PAN):

PAN is a mandatory requirement for all applicants except those who are specifically exempt from obtaining PAN (listed in Section D).

### C. Proof of Address (POA):

List of documents admissible as Proof of Address:

(\* Documents having an expiry date should be valid on the date of submission)

- Latest Land Line Telephone Bill
- Latest Electricity Bill
- Latest Bank Passbook / Bank Account Statement
- Registered Lease / Sale Agreement of office premises

- Proof of Address issued by Bank Managers of Scheduled Commercial Banks / Multinational Foreign Banks / Gazetted Officer / Notary Public / Elected Representatives to the Legislative Assembly / Any other document approved by AMFI as a valid address proof
- Registration Certificate issued under Shops and Establishments Act Documents having an expiry date should not be more than three months old as on the date of submission of this form.

### D. Exemptions/clarifications to PAN (\*Sufficient documentary evidence in support of such claims to be collected.)

1. In case of transactions undertaken on behalf of Central Government and/or State Government and by officials appointed by Courts e.g. Official liquidator, Court receiver etc.
2. Investors residing in the state of Sikkim.
3. UN entities/multilateral agencies exempt from paying taxes/filing tax returns in India.
4. SIP of Mutual Funds up to Rs. 50,000/- p.a.
5. In case of institutional clients, namely, FIs, MFs, VCFs, FVCIs, Scheduled Commercial Banks, Multilateral and Bilateral Development Financial Institutions, State Industrial Development Corporations, Insurance Companies registered with IRDA and Public Financial Institution as defined under section 4A of the Companies Act, 1956, Custodians shall verify the PAN card details with the original PAN card and provide duly certified copies of such verified PAN details to the intermediary.

### E. List of people authorized to attest the documents:

1. Notary Public, Gazetted Officer, Manager of a Scheduled Commercial/ Co-operative Bank or Multinational Foreign Banks. Documents need to be certified true by Director / Company Secretary. Name, Designation & Seal should be affixed on the copy.
2. In case of NRIs, authorized officials of overseas branches of Scheduled Commercial Banks registered in India, Notary Public, Court Magistrate, Judge, Indian Embassy/Consulate General in the country where the client resides are permitted to attest the documents.

### F. In case of Non-Individuals, additional documents to be obtained from non-individuals, over & above the POI & POA, as mentioned below:

Type of entity	Documentary requirements
<b>Corporate</b>	<ul style="list-style-type: none"> <li>• Copy of the balance sheets for the last 2 financial years (to be submitted every year)</li> <li>• Copy of latest share holding pattern including list of all those holding control, either directly or indirectly, in the company in terms of SEBI takeover Regulations, duly certified by the company secretary/Whole time director/ MD(to be submitted every year)</li> <li>• Photograph, POI, POA, PAN and DIN numbers of whole time directors/two directors in charge of day to day operations</li> <li>• Photograph, POI, POA, PAN of individual promoters holding control – either directly or indirectly</li> <li>• Copies of the Memorandum and Articles of Association and certificate of incorporation</li> <li>• Copy of the Board Resolution for investment in securities market</li> <li>• Authorised signatories list with specimen signatures</li> </ul>
<b>Partnership firm</b>	<ul style="list-style-type: none"> <li>• Copy of the balance sheets for the last 2 financial years (to be submitted every year)</li> <li>• Certificate of registration (for registered partnership firms only)</li> <li>• Copy of partnership deed</li> <li>• Authorised signatories list with specimen signatures</li> <li>• Photograph, POI, POA, PAN of Partners</li> </ul>
<b>Trust</b>	<ul style="list-style-type: none"> <li>• Copy of the balance sheets for the last 2 financial years (to be submitted every year)</li> <li>• Certificate of registration (for registered trust only). Copy of Trust deed</li> <li>• List of trustees certified by managing trustees/CA</li> <li>• Photograph, POI, POA, PAN of Trustees</li> </ul>
<b>HUF</b>	<ul style="list-style-type: none"> <li>• PAN of HUF</li> <li>• Deed of declaration of HUF/List of coparceners</li> <li>• Bank pass-book/bank statement in the name of HUF</li> <li>• Photograph, POI, POA, PAN of Karta</li> </ul>
<b>Unincorporated Association or a body of individuals</b>	<ul style="list-style-type: none"> <li>• Proof of Existence/Constitution document</li> <li>• Resolution of the managing body &amp; Power of Attorney granted to transact business on its behalf</li> <li>• Authorized signatories list with specimen signatures</li> </ul>
<b>Banks/Institutional Investors</b>	<ul style="list-style-type: none"> <li>• Copy of the constitution/registration or annual report/balance sheet for the last 2 financial years</li> <li>• Authorized signatories list with specimen signatures</li> </ul>
<b>Foreign Institutional Investors (FII)</b>	<ul style="list-style-type: none"> <li>• Copy of SEBI registration certificate</li> <li>• Authorized signatories list with specimen signatures</li> </ul>
<b>Army/Government Bodies</b>	<ul style="list-style-type: none"> <li>• Self-certification on letterhead</li> <li>• Authorized signatories list with specimen signatures</li> </ul>
<b>Registered Society</b>	<ul style="list-style-type: none"> <li>• Copy of Registration Certificate under Societies Registration Act</li> <li>• List of Managing Committee members</li> <li>• Committee resolution for persons authorised to act as authorised signatories with specimen signatures</li> <li>• True copy of Society Rules and Bye Laws certified by the Chairman/Secretary</li> </ul>

Details of Promoters/Partners/Karta/Trustees and whole time directors forming a part of  
Know Your Client (KYC) Application Form for Non-Individuals

**Name of Applicant** \_\_\_\_\_

**PAN of the Applicant**

Sr. No.	PAN	Name	DIN (For Directors)/ UID (For Others)	Residential/ Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed	Photograph
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

Details of Promoters/Partners/Karta/Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals (*contd.*)

Sr. No.	PAN	Name	DIN (For Directors)/ UID (For Others)	Residential/ Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed	Photograph
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		<input type="checkbox"/> PEP <input type="checkbox"/> RPEP <input type="checkbox"/> NO	

Name & Signature of the Authorised Signatory(ies)

Date ||/|||/||||

**PEP:** Politically Exposed Person  
**RPEP:** Related to Politically Exposed Person