IFSC code (11 digit)



## COMMON APPLICATION FORM

For first time investors for Lumpsum Investments / SIP Investments / Zero Balance folio registration.

(PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM. ALL SECTIONS TO BE COMPLETED IN ENGLISH IN BLACK/BLUE COLOURED INK AND IN BLOCK LETTERS)

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2. FATO	CA AND CRS DETA	ILS FOR INDIVIDU	ALS (Including So	ole Proprietor. Refer In	struction No. 2	3)		
ESIDENT JOIANS	The below informat	ion is required for all a	applicants/guard	lian.				
		Place / Ci	ty of Birth	Country	of Birth		Country of Citizenship	/ Nationality
First Ap	pplicant / Guardian					Indian	U.S. Others	
Second	Applicant					Indian	U.S. Others	
Third A	pplicant					Indian	U.S. Others	
RESIL ]	If 'YES' please fill for	ident (i.e., are you or ALL countries (oth a Citizen / Resident	er than India)	in which you are a	a Resident f	or tax purpose	Yes N	0
		Country of Tax Residency		ication Number nal Equivalent		ntification Type other please specify	Addre	ss Type
First App	olicant / Guardian						Resi Regd	l. Office Business
Second .	Applicant						Resi Regd	l. Office Business
Third Ap	plicant						Resi Regd	l. Office Business
Overse	as Address							
							City	
State				Country			Zipcode	
		•						
Sr. No.	Nominee N	lame	PAN	(%)	lationship with Investor	Nominee da of birth	Name	Guardian Signature
1						D D M M Y	Y	
2						D D M M Y	Y	
3						D D M M Y	Y	
I/W	/e DO NOT wish	to nominate and si	gn here	You/ Sole App	licant	Second A	pplicant	Third Applicant
4. INV	ESTMENT DETAI	LS (For multiple scheme	s ref instruction n	o. 22) (Investors app	lying under D	rect Plan must select "[	DIRECT" against scheme name,	Refer Instruction No. 2.)
Sr. No.		s	cheme			Plan	Option	Amount
1						Direct Re	egular	
2						Direct Re	egular	
3						Direct Re	egular	
Total				In words			I	In figures

5. PAY	MENT DETAILS											
No	on-Third Party Payment Thi	rd Party Paymer	nt (Please attach	'Third Parl	ty Paymen	Declarat	ion Form	')				
Mode	Mode Cheque DD Axis Bank Debit Mandate Date D D M M Y Y Y Y Cheque / DD No.											
Amount (in figures	Amount (in figures) (in words)											
Pay-in A/	Pay-in A/c No.											
Account type Savings Current NRE NRO FCNR Others Specify												
IFSC code	(11 digit)		MI	CR Code (	(9 digit)							
Drawn or	n bank / branch name & addre	SS										
	AT ACCOUNT DETAILS (OPT		n the annihilation fo			af the A/a	الانب اوام وا	the end and		inant) Dafau I		No. 10
(Please	ensure that the sequence of name	as mentioned i	n the application to	orm matche	es with that	or the Ayo	<u>neia witr</u>			. ,	nstruction i	NO. 19.
NSDL:	Depository Participant Name  Beneficiary A/c No.							—— DP	ID: I	N		
	Deficition of the second											
CDSL:	Depository Participant Name											
	Beneficiary A/c No.											
Enclos	ed Client Master	Transaction	/ Statement Cop	y / DIS Co	ору							
7 DEC	LARATION AND SIGNATURE											
		ho SID / VIM of t	the scheme and SA	I of the Av	ic Mutual E	ınd (The F	Fund) I/w	o horoby:	apply for uni	to of the scho	mo I havo	road and
understoo source on Act, Anti N been indu "Know You Scheme, ii the law.)" Mutual Fu policy whii my invest communic	Having read and understood the content of the SID / KIM of the scheme and SAI of the Axis Mutual Fund (The Fund), I/we hereby apply for units of the scheme. I have read and understood the terms, conditions, details, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate source only and does not involve designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directives 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 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 belongs to me/us. In event "Know Your Customer" process is not completed by me/us to the satisfaction of the Mutual Fund, (I/we hereby authorize the Mutual Fund, 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 undertake such other action with such funds that may be required by the law.) The ARN holder has disclosed to me/us all the commissions (trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds amongst which the Scheme is being recommended to me/ us. I / we give my / our consent to collect personal data or information as prescribed in the privacy policy which is available on the website of the AMC / Fund. I /We give my consent to AMC and its agents to contact me over phone, SMS, email or any other mode to address my investment related queries and/or receive communication pertaining to transactions/ non-commercial transactions/ promotions/ potential investments and other communication material irrespective of my blocking preferences with the Customer Preference Registration Facility.										egitimate come Tax nor have . In event ted in the equired by of various ne privacy o address and other	
50,000 in that I/We	irm that I/We do not have any ex n a year (Applicable for Micro inve have remitted funds from abroad irm that details provided by me/u:	stment only.) wit d through approv	h your fund house, ved banking chann	. For NRIs	only - I / W	e confirm	that I am	/ we are I	Non Residen	ts of Indian n	ationality/o	origin and
provided b	ATION: I / We have understood to me/us on this Form is true, concept the same.											
usage (ii) I/ We her	DECLARATION: I/ We hereby policiting and (ii) well dating/authenticating and (ii) eby provide my/our consent for a limitual fund (s) and their Registration (s).	updating my/ or sharing/disclosing	ur Aadhaar numbe g of the Aadhaar r	er(s) in acc number(s)	cordance wi including c	th the Aad emograph	dhaar Act nic inform	, 2016 (aı ation witl	nd regulatio h the asset i	ns made ther	eunder) ar	nd PMLA.
You	/ Sole Applicant /Guardian	Sec	ond Applicant			Third Ap	plicant		Р	ower of Attor	ney Holder	r

Date D D M

Place

## 8. QUICK CHECKLIST KYC acknowledgement letter (Compulsory for MICRO Investments) Self attested PAN card copy Plan / Option / Sub Option name mentioned in addition to scheme name Multiple Bank Accounts Registration form (if you want to register multiple bank accounts so that future payments can be made from any of the accounts) Email id and mobile number provided for online transaction facility SIP Registration Form for SIP investments Relationship proof between guardian and minor (if application is in the name of a minor) **FATCA** Declaration Additional documents attached for Third Party payments. Refer instruction No. 7. CONNECT **Toll Free Axis MF IFA CONNECT EasyInvest Risk** Easy SMS 1800 221322/ An app that goes beyond transactions http://online.axismf.com 1800 3000 3300 SMS HELP to 92120 10033 **Managed** Download the app **Download** or Invest online without **Additional Contact No.** Transact and get folio visit the web portal **Products** any prior registration details on the go 8108622211 (https://ifaconnect.axismf.com)

9. DEBIT MANDATE (Only for Axis Bank Account holders. N	ow you don't have to issue a cheque if you hold an Axis Bank Account).	To be processed in CMS software under client code "AXISMF"
I/ We Name (	of the account holder(s)	Application No.
authorise you to debit my/our account no.  Account type Savings NRO NRE  Axis Bluechip Fund Axis Long Term Equit  Axis Focused 25 Fund Axis Arbitrage Fund  Axis Equity Hybrid Fund Axis Growth Oppor	Axis Equity Saver Fund Axis Multicap F	to pay for the purchase of Specify  Die Advantage Fund Axis Midcap Fund  Lund Axis Dynamic Equity Fund  Axis MF Multiple Schemes
Amount (in Figu	res)	
Signature of First Account Holder	Signature of Second Account Holder	Signature of Third Holder
Date DDMMYYYY		

**WE ACKNOWLEDGE YOUR APPLICATION** Received subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form.

From

Cheque No.	Date	Amount	Scheme	Stamp & Signature

Application No.