

COMMON APPLICATION FORM

Application No.: 15/ (if applicable) Distributor ARN and Name Sub Broker Name & ARN Branch/RM Internal Code EUIN (Refer note below) For Office use only 130842 E215826 ARN-☐ I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned, Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors assessment of various factors including the service rendered by the distributor. ☐ I am a First Time Investor in Mutual Fund Industry. ☐ I am an Existing Investor in Mutual Fund Industry. Sole / First Applicant's Signature Mandatory 1. FIRST APPLICANT'S DETAILS Name of First Applicant (Should match with PAN Card) PAN (1st Applicant / Guardian) ☐ KYC (Y/N) **Existing Folio Number** Name of Guardian if Minor POA PAN ☐ KYC (Y/N) Date of Birth D D / M M / Y Y Y Y On Behalf of Minor Date of Birth Guardian named is: Proof attached * ☐ Father ☐ Mother ☐ Court Appointed 2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS (in capital) Mobile +91 Address Landmark Pin Code City State 3. KYC DETAILS (Mandatory) 3a. Status of Sole/1st Applicant (Please tick ✓) ○ Indian Resident Individual ○ Minor (Resident) ○ Minor NRI ○ NRI (Repatriable) ○ NRI (Non-Repatriable) ○ PIO O Sole Proprietorship O HUF - Indian O HUF - NRI O Partnership Firm O Limited Partnership (LLP) O Public Ltd. Co. O Private Ltd. Co. O Body Corporate O Bank OFIs O Insurance Companies O Government Body O AOP/BOI O Trust O Society O Provident Fund O Superannuation / Pension Fund O Gratuity Fund O Mutual Fund OFIL ONPO/NGO OFPI-Category I/II/III OFCRA OGDN ODefence Establishment ONPS Trust O Others_ _(Please Specify) 3b. Occupation Details (Please tick √) ○ Private Sector Service ○ Public Sector Service ○ Government Service ○ Business ○ Professional ○ Agriculturist O Retired O Housewife O Student O Forex Dealer O Others (Please Specify) 3c. Gross Annual Income (Please tick √) ○ Below 1 Lac ○ 1-5 lacs ○ 5-10 Lacs ○ 10-25 Lacs ○ >25 Lacs ○ >25 Lacs - 1 Crore ○ >1 Crore Net Worth in (Mandatory for Non-Individuals) ₹ _as on D D / M M / Y Y Y (Not older than 1 year) 3d. For individuals For Non-Individual Investors (Companies, Trust, Partnership etc) I. Is the company an Indian Listed Company or Subsidiary / Controlled by an Indian Listed Company:

(If No. please attach mandatory UBO declaration) O YES ONO O I am Politically Exposed Person II. Foreign Exchange / Money Changer Services **OYES** ONO O I am Related to Politically Exposed Person III. Garning / Gambling / Lottery/Casino Services OYES ONO O Not Applicable IV. Money Lending / Pawning OYES ONO 4. JOINT APPLICANTS (IF ANY) DETAILS Mode of Holding (Please tick √) ☐ Single Joint ☐ Either or Survivor Anyone or Survivor 2nd Applicant Name (Should match with PAN Card) PAN (2nd Applicant) ☐ KYC (Y/N) a. Occupation Details (Please tick ✓) OPrivate Sector Service O Public Sector Service O Government Service O Business O Professional O Agriculturist O Retired O Housewife O Student O Forex Dealer O Others (Please Specify) b. Gross Annual Income O Below 1 Lac O 1-5 lacs O 5-10 Lacs O 10-25 Lacs O > 25 Lacs - 1 CroreO > 1 Crore or NET worth ₹ C. Others (Please tick√) ○ Politically Exposed Person (PEP) ○ Related to Politically Exposed Person (PEP) ○ Not Applicable 3rd Applicant Name (Should match with PAN Card) PAN (3rd Applicant) ☐ KYC (Y/N) a. Occupation Details (Please tick ✓) OPrivate Sector Service ○ Public Sector Service ○ Government Service ○ Business OProfessional OAgriculturist O Retired O Housewife O Student O Forex Dealer O Others (Please Specify) b. Gross Annual Income O Below 1 Lac O 1-5 lacs O 5-10 Lacs O 10-25 Lacs O > 25 Lacs - 1 CroreO > 1 Crore or NET worth ₹ C. Others (Please tick √) ○ Politically Exposed Person (PEP) ○ Related to Politically Exposed Person (PEP) ○ Not Applicable

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

ESCORTS MUTUAL FUND

Received, subject to realisation and verification an application for purchase of Units as mentioned in the application form.

Application No.: 15/

(if applicable)

ESCORTS

Scheme Cheque no. Amount Bank Name Date

Any of the applicants has a Count	ry of birth / Citizenship / Nation	ality or Tax Residency, other than I	India; Yes No? Mandatory to	o tick any one. If Yes, provide info	ormation as required below.
Sole/First App	licant/Guardian	2nd A	pplicant	□3rd Appl	licant POA
Country of Birth		Country of Birth		Country of Birth	
Country of Citizenship/ Nationality		Country of Citizenship/ Nationality		Country of Citizenship/ Nationality	
Are you a US	☐ Yes ☐ No	Are you a US	☐ Yes ☐ No	Are you a US	☐ Yes ☐ No
Specified Person? Country of Tax Residency#	please provide Tax Payer Id	Country of Tay Posidency	please provide Tax Payer Id.	Specified Person? Country of Tax Residency#	please provide Tax Payer id
(other than India)	Taxpayer Identification No	(other than India)	Taxpayer Identification No.	(other than India)	Taxpayer Identification No
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ranch Address	City			Pin	
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. SCHEMES (Please	tick√)	(Alan	esec (x eign)		
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=2	Esco	rts Opportunities Fund	Escorts Leading Sec		
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