

JM FINANCIAL MUTUAL FUND **COMMON APPLICATION FORM** (please ✓) as per your status Resident Non-Resident Serial No: ED DISTRIBUTOR INFORMATION FOR OFFICE USE ONLY Internal Sub-Broker Code **Employee Unique Identification No.** In-House number as per Date, Time and Number as per Time Name & ARN of Distributor / RIA Code (as alloted by Distributor) (EUIN)^ K-BOLT **Stamping Machine** 130842 E215826 ^Mandatory: Furnishing of EUIN is mandatory for all transactions (Purchase/Switch/SIP/STP) or following declaration should be signed by the investor (Please < the box). Declaration: "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker." Signature of Third Applicant Signature of Second Applicant "Upfront commission shall be paid directly by the investor to the AMFI registered Distributor based on the investor's assessment of various factors including the service rendered by the distributor". **INVESTMENT DETAILS (PIs Refer instruction No. 5)*?? Scheme Name** Plan **Option** Sub-Option JM *In case of any ambiguity / incomplete information, the default plan / option / sub-option will be applicable as per the scheme's Key Information Memorandum, Scheme Information Document & Statement of Additional Information. ?? Investor desirous of investing directly with the AMC without availing the services of any Distributor/Broker, will have to clearly write "Direct" under above column titled as "Plan". 1. TRANSACTION CHARGES (PLEASE REFER INSTRUCTIONS / KIM AND TICK ANY ONE) Applicable for transactions routed through a distributor who has 'opted in' for transaction charges. I/We am/are a First Time Investor in Mutual Fund Industry. (Rs 150 will be deducted.) I/We am/are an **Existing Investor** in Mutual Fund Industry. (Rs 100 will be deducted.) 2. EXISTING UNIT HOLDER'S INFORMATION (Please fill in your details mentioned below and proceed to section 4) Folio No. **KYC Identification Number (KIN)** (For C-KYC Compliant Investors) 3. APPLICANT INFORMATION (It is mandatory to submit verified copy of PAN prooffor all investments failing which application will be rejected) (Pls Refer instruction no. 8) Date of Birth (Mandatory) (To be filled in block letters. Use one box for one alphabet, leaving one box blank between name and surname) Full Name of Sole/1st Applicant/Minor/Non-individual: (As per Aadhar card) (Pls submit documentary proof in case of minor) D D M M Full Name of Guardian (in case of Minor) / Contact Person (In case of non-individual investors) / Karta (in case of HUF) / Partner (in case of Partnership Firm): Relationship with Minor [Pl. \sqrt{]} Pls submit documentary proof Mother Father Legal Guardian Address (DO NOT REPEAT NAME) in full of Applicant/Parent OR Guardian of Minor. Indian address in case 1st Applicant is NRI/FII/PIO (Post Box No. alone is not sufficient) Location/City Dist. Pin/Zip Code & Country STD Code Tel. State Email-ID [†]Require Hard Copy of Annual Report Yes 🔲 No 🗔 Date of Birth (Mandatory) Mobile No. 5 SMS and/Email ID will be used as the default mode of communication if the mobile no. and/or Email ID is furnished. **Full Name of Second Applicant** (As per Aadhar card) **Full Name of Third Applicant** (As per Aadhar card) Aadhaar No. (12 digits) (Pls attach proof of enrollment) Permanent Account Number (PAN)/ KYC ref. no. /PEKRAN (Mandatory) Pls refer Instructions / KIM Pls refer to Instruction/KIM for further details. (Not Mandatory) for details. Pl.(√) 1st Applicant Guardian (in case 1st applicant is minor) 2nd Applicant 3rd Applicant

a. Status of Sole/1st appicant			Mode of Holding Pl.(\checkmark)	4b. Occupation Det	tails (please tick ✓)						
Resident Individual (RI) On behalf of minor RI NRI NRI PIO & HUF AOP/BOI	7. Banks 8. Body Corporate Listed Unlisted 9. Company 10. Financial Institution 11. Flls 12. Government Body	13. Partnership Firm 14. Proprietorship Firm 15. Society 16. Trust 17. Others& (pl.specify)	1. Single 2. Joint* 3. Either or Survivor/s (* Default, in case of ambiguity when applicants are more than one)	Agriculturist Business Housewife Professional Private sector service	6. Public Sector / Govt. service 7. Retired 8. Student 9 Others (pl. specify)						
c. Gross Annual Income (Please tick 🗸)	4d. F	For Individuals / HUFs (Pleas	e tick ✓)^	4e. For Non-Individuals (Companies, Trust, Partnership etc.) (Please tick ✓)^							
Polow 1 loc 1 Flore] F 10126	am Politically Exposed Person		Foreign Exchange	/ Money Changer Services						

I am related to Politically Exposed Person

Gamin / Gambling / Lottery / Casino Services

Money Lending / Pawning

Not Applicable

[&] US and Canada Investors are not permitted to invest in our Schemes. ^ In case, not ticked, it will be considered as Not Applicable. + In case, not ticked, it will be treated to have "opted out".

Not Applicable

Below 1 Lac 1 - 5 Lacs

10 - 25 Lacs > 25 Lacs - 1Crore > 1 Crore "OR"

as on ____/ ___/ (Not older than 1 year)

Net Worth in (Mandatory for Non-Individuals) ₹

5 - 10 Lacs

5. BANK PARTIC may furnish multiple b																									ne ban	ık ma	andate	e dep	icting	the r	name	of the	1st/	sole a	pplica	ant) I	nvesto
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6. INVESTMENT	AND	PAYM	ENT	DET	TAIL:	S (Pls	refer	r Inst	tructi	ions/	/ KIM	espe	ciall	y Thi	rd Pa	arty)	For e	each a	appli	catio	on an	d fo	r eacl	n pla	n/opt	tion	sepai	rate	cheq	ue/l	DD to	1					
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DP ID No. IN							Benef	ficiar	у Ассо	ount	No.								Tar	rget	ID No.																
55 in case of any ambiguity	, AMC is	at its di	scretio	n to e	ither a	llot uni	its as p	er De	mat in	ıforma	ation o	or in ph	nysica	l mode	. Kind	lly refe	r State	ement	of Add	dition	al Info	rmati	on and	Sche	me Info	orma	tion Do	cume	nt for	detail	s.						
8. POWER OF AT	TORI	NEY (PoA)) HO	LDE	R'S	/ PE	RMI	ITTE	DΤ	HIR	D PA	ART	Y'S (WH	o IS	ISS	UIN	G TH	HE (CHEC	QUE) DE	TAI	LS (PI	ls ref	er par	a on	Third	Party	/ Pam	ent)					
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Parent/Grand Pare	ent/Rel	ative in	case	of lst	Appl	icant b	peing	a mii	nor			Em	ploy	er (in	case	of dec	luctio	on fro	m sala	ary)				Cus	todian	n on	behalt	f of F	II/Clie	nt.							
Full Name of PoA/	Third I	Party				\perp			\perp																							\perp		\perp			
PAN No. of PoA/Th	ird Pa	rty							\perp					[Ple	ease •	√] K	YC C	ompl	iant		\	Yes		N	lo (F	Pleas	e atta	ch K	/C ack	nowl	edge	ment 8	չ Ref	er inst	ructio	on no	. 10)
9. FOR INVESTME	NT B	Y NRI	/PIO/	FII (US a	nd Ca	anad	a In	vest	orsi	not r	oerm	itte	d)																							
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Applicable to NRIs only: / W Ordinary Account / FCNR Acco																																				sident	External
10. NOMINATION	DETA	ILS (F	Pls Ret	fer in	ıstruc	tion /	KIM f	for d	etails))																											
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I/We hereby no												,						,						the p	ercen	tage	(%) in	ndica	ted a	gainst	t the	Name(s) of	the No	omine	ee(s).	I/We
also understand		. ,																								(0/)	į.	100		540()				6.1			
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11. LIST OF DOCL	JMEN	TS AT	TAC	HED	{pls	menti	ion be	elow	the de	etails	of do	cume	ents (other	than	cheq	ue & I	DD) at	tache	ed wi	ith the	e forr	n}														
Mandatory Verified PAN Copy(ios)				=	ATCA/(ation	for al	l hold	lers		L				thoris	satio	n to in	nvest						-	tories	with	Spec	imen S	ignat	ture(s))		
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12. DECLARATION	& SIG	NATU	RES	<u>, , , , , , , , , , , , , , , , , , , </u>																																	
Having read and understoo Mutual Fund for units of th this investment. I/We furth applicable laws or any noti Trustee/Fund would not be investment in any of the so I/we hereby further agree I mode), payable to him Ltd (JM Financial AMC), wt "The ARN holder has disclo Consent for sharing Inf- Financial Trustee Co. Pvt. Lt	ne Schen ner decla ification responsi hemes of that the for the nich is the ormation	ne as ind are that s, directi ble if the of the Fu Fund ca differe ne Invest ne/us all	licated the amions isset invested invested in directed to the control of the column (We here)	above nount sued b tment cover/o ctly cre mpet Managommis reby c	e and a invest by any is ultra debit r dedit all ing Sc ger to ssions	agree to ted by n govern avires th my/our the div cheme: the sch (in the	o abide me/us i mental nereto a folio(s) vidend se of valemes o form of e disclos	e by the in the il or stand il	he term e Schem tatutory ne inves h the pe uts and is Muti Financi I comm	ns and me is of sy auth stmen enal i d rede sual F cial Mu nission g of m	d cond derived hority nt is con nteres emptio emptio utual F n or an	itions, d throu from ti ntrary t t and t on amo from Fund. It y othe persor	rules ugh le ime to to the take an ount to amou t wou er moo	and regitima o time. relevan ny app o my ba ngst w ld rece le), pay format	gulati ate sou It is es nt cons ropria ank de vhich ive con yable stion to	ions of urces a xpressl stitution te action etails good the Sommiss to him to the Ju	the So nd is r y unde on aga iven a chem ion/di for th idicial	cheme not hel erstood ocumen ainst m above. ' he is be istribut he diffe	I/We ld or do d that whats. I/whele las in the last	have lesign we have auton case ARN I recon less frompe Regul	not received for live the object the classic the classic formula for the class	ceived the p expre this l heque r has ded t Finan cheme Autho	d and wourpose ses auth Fund to e(s)/pa discloto me/cial AN es of va	vill no of co ority l rejec ymen sed to 'us". J IC for arious	t receiv ntraver rom ou t the ap t instru o me/u M Fina distribu Mutua	ve non ntion ur con pplica umen us all uncial uting il Fun liance	r will be of any stitution, ret is/are the constitution the constitution that is service the much of legitudes.	e indu act, ronal devert retur omm es Pvi utual n amo	rules, r ocume the un ned un ission t. Ltd. fund u ongst v ligatio	y any regulated and store to the comment of the com	rebate tions of invest dited, by my the fo iated f the s the Sc M Fina	or gifts or any st in the u restrain /our bar rm of t to JM Fi chemes heme is	i, direct tatute units on me/u nkers i t rail c inanci is launce s being MC/JM	ctly or in e or legi of the Sc us from for any commis ial Asse ched by g recom I Financ	ndirectislation cheme makin reaso ssion et Man / JM Fi nmeno cial Mu	tly, in n or ar and th ng any n wha or any agem inancia ded to utual F	making ny othe ne AMC, furthe tsoever y othe ent Pvt al AMC. me/us' und/JM
Signature of Sole	/First	Applic	ant/0	iuard	dian/	Auth.	. Sign	ator	у			Sign	natui	e of S	Seco	nd Ap	plica	ant //	luth.	Sign	nator	у				S	ignat	ure	of Th	ird A	pplic	ant/A	uth.	Signa	atory		
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