COMMON APPLICATION FORM

Please read instructions carefully. Please strike off any sections that are not relevant or not applicable.



All sections should be filled in	n English and in BLOCK LE	TTERS only.					Applicati	on No.						
1. DISTRIBUTOR IN	IFORMATION													
ARN/RIA Code/Portfolio Manager's Registration (PMRN) #	Sub Broker's A	RN Internal Code for Su Employee				ployee Ur ition Num	nique ber (EUIN)	FOR OFFICE USE ONLY Registrar/Bank Serial No./ Date and Time of Receipt						
ARN-280217	ARN-			E- (Of Individual Relationshi	e/ he Distributor	.)								
execution for "execution-only execution-only" transaction will y the employee/relationship in	" transaction (only where E thout any interaction or adv	share with the Investment Advised EUIN box is left blank) (Refer Instrict by the employee/relationship to fithe distributor and the distributor Signal	ruction No.II(manager/sal or has not ch	10)). – I/We h	ereby cor ne above risory fee:	nfirm that distributor	the EUIN to r or notwith	oox has beer estanding the	intention advice o	•	oriatenes			
TRANSACTION CHAR (Please ✓ any one of the bel (Refer Instruction No.XII)	low)	☐ I am a first time investor in mu Applicable for transactions routed the investor to the AMFI registered	through a d	istributor who	has 'opte	d in' for tra	ansaction	charges. Upf	ont com	mission sh	all be pa	id direct	ly by	
	ETAILS (Please refe	r Instruction No. II) All fiel	ds are ma	ındatory.		MOE	E OF O	PERATION		□ Single □ □ Joint (De	•			
Folio No	Ma. MAIO							D-44 D	41 5	БМ	М		/ \	
1st APPLICANT* Mr AN/PEKRN*	Ms. M/S	KIN^ ☐ Proof Attached					Aadhar	Date of Bi (Optional)	rth D	D M	MY	_ T _ Y	Y	
GUARDIAN NAME IF MINOR /CONT FOR NON INDIVIDUALS) /POA HOI								Date of	Birth	D M	l M	YY	Υ	
EGAL ENTITY IDENTIFICATIO	ON (LEI) CODE ^s													
Mandatory in case of Minor**			GUARDI	AN/POA HOLI	DER									
Guardian's Relationship with r	minor - Court Appointed Guar	rdian	PAN/PE	(RN*						X X	X	$\langle X $	X	
Proof of Date of Birth -		diali	KIN^ □	Proof Attached								X	X	
☐ Birth Certificate ☐ F	Passport Others		Aadhar (Optional)										
	Ms. M/S	KINIA D. Drasf Attacked					A = 415 = 2	Date of Bi	rth D	D M	M Y	Y	′ Y	
AN/PEKRN*		KIN [↑] □ Proof Attached					Aadnar	(Optional)						
	Ms. M/S							Date of Bi	rth D	D M	MY	YY	′)	
AN/PEKRN*		KIN [^] □ Proof Attached					Aadhar	(Optional)						
													_	
CKYCR) has to fill the 14 digit EI is applicable for Non-Indiv	t KYC Identification Number vidual investor including HU	ble to be rejected.** Mandatory in r (KIN). IF, not applicable to individuals,mi	inor & NRI ir	vestor.	RECOF	RDS)		I / FII Applica		under Gen		Trecords		
	HOUSE / FLA	AT NO.						HOUSE / FL	AT NO.					
	STREET ADD	DRESS					(STREET ADI	RESS					
CITY / TOW	/N	STATE				CITY / TO	NWN				STATE			
(COUNTRY	PINCO	DE			COU	INTRY				PINCO	DDE		
el No.			Residenc	е		Mobile	No.							
mail ID	Please Sp	ecify in BLOCK LETTERS				If no	t filled, det	ault ISD cod	e will be	assumed a	as +91 (li	ndia)		
☐ All communications will be	sent by default to the regis	tered E-mail ID / Mobile No. In ca	se you wish	to receive phy	sical com	nmunicatio	on (please	✓ here)	Trees	are green	gold – S	Save Tre	es	
I . TAX STATUS (Ple	ease √)													
☐ Resident Individual	☐ Foreign National	☐ Public Limited Company	☐ Gove	ernment Body		□A	OP/BOI			☐ Defence Establishment				
□ Guardian	☐ Sole Proprietorship	☐ Private Limited Company	☐ Fina	ncial Institution	1	□ Tr	rust / Socie	ety / NGO		☐ Person of Indian Origin				
□ HUF	☐ Partnership Firm	☐ Body Corporate	□ FII					organization/0	Charities					
□ NRI-NRE	□ LLP	□ Bank	☐ Fore	ign Portfolio Ir	vestor / F	FII □Q	FI			☐ Nation	nal Pensi	on Syste	∍m	
□ NRI-NRO	☐ Gratuity Fund	☐ Other												

5. DEMAT ACCOUNT	DETAILS	(OPTIONAL)										
NSDL: Depository Participant (<u> </u>	ccount Numbe	r (NSDL only)		CD	SL: Depository	Participant ((DP) ID (CDS	SL only)		
Enclosure (Please tick any	box) 🗆 C	Client Master Li	st (CML)	☐ Trans	saction cum ho	olding Statem	ent	☐ Cance	lled Delive	ry Transact	ion Slip (DIS)		
Investor opting to hold units in E 6. BANK DETAILS (N	MANDATOR	Y) (Please i	efer Instru	ction No.	V)								
Mandatory information - If left be months in case the pay-out bank is mentioned here.													
Account Number					Acc	ount Type 🗆 C	urrent 🗆 Sa	vings □ NRO	□ NRE □ F	CNR 🗆 Oth	ers (please specify		
Bank Name & Branch													
Branch City				IFSC Cod	de			MICE	R Code				
7 . FATCA AND CRS DE	TAILS - For I	ndividuals [lr	ncluding Sol	e Proprieto	r] (MANDAT	ORY) (Refe	· Instruction	on III)					
Non-Individual investors should		•	,	,				•	0				
Are you a tax resident (i. f "YES" please fill for ALL count	-		, -	-					•	ident in the r	espective countries		
TEO picase illi for AEE couri	ES" please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen/ Resident/ Green Card holder/ Tax Resident in the respect Place/City of Birth Country of Birth Country of Birth Country of Coun												
First Applicant / Guardian		lace/Oily of Billin			Country of Birth		□ Indian I	□ U.S. □ Oth	•	ship / Ivaliona	шцу		
Second Applicant								□ U.S. □ Oth					
Third Applicant							+	□ U.S. □ Ot					
				Tay I	dentification Nu	mher		3	Identification	nn Tyne			
	Cou	ntry of Tax Reside	ency		unctional Equiv			TIN	or other ple	ease specify)			
First Applicant / Guardian							Reasons		□ A	□В	C		
Second Applicant							Reasons		□ A	□ B	C		
Third Applicant ☐ Reason A → The co							Reasons		A	□ B	C		
☐ Residential ☐ Registent nnexure 1A (Form for Additional Legal Entity) are available on t	al KYC, FATCA & he website of AN	R CRS Annexure	for Individual Ac	counts) and 1	*	mate Beneficial		Residential ding additional		red Office C			
8. KYC DETAILS (MAN	,												
OCCUPATION [Please tid	Private Sector	Public Sector	Government	Business	Professional	Agriculturist	Retired	Housewife	Student	Forex	Others		
	Service	Service	Service		Troideoidhai	7 igrioditariot		11000011110	Otadoni	Dealer	Othoro		
First Applicant / Guardian											(Please specify)		
Second Applicant											(Please specify)		
Third Applicant											(Please specify)		
GROSS ANNUAL INCOME [F													
First Applicant / Guardian		ac □ 1-5 Lacs Mandatory for Nor		Lacs 🗆	10-25 Lacs	□ >25 Lac	cs-1 crore	□ >1 cr	rore	as on (N	ot older than 1 year)		
Second Applicant		c 1-5 Lacs		s 🗆 10-25 I	Lacs □ >25 I			OR Net worth	₹	10 0.1 (11			
Third Applicant	□ Below 1 La	c □ 1-5 Lacs	□ 5-10 Lac	s 🗆 10-25 l	Lacs □ >25 I	_acs-1 crore □	3 >1 crore	OR Net worth	₹				
9. PEP DETAILS** (MAN	IDATORY)												
				Applicant		2nd Applicant		3rd Applic			Guardian		
Are you Politically Exposed Pe	. ,			es 🗆 No		☐ Yes ☐ No		☐ Yes □			Yes □ No		
Are you related to a Politically				es 🗆 No] Yes □ No		☐ Yes □			Yes □ No		
*Politically Exposed Persons (oliticians, senior government/ju	PEP) are define idicial/military of	d as Individuals (ficers, senior exe	who are or have cutives of state-	e been entrust owned corpora	ted with promine ations, importan	ent public funct t political party	officials, etc.	eign country, e	e.g., Heads o	of States or o	of Governments, seni		
10. INVESTMENT & PA (Refer Instructions		AILS Please r	efer SID of r	espective s	cheme for P	lans, Sub-o	ptions an	d Dividend	frequency	y			
Scheme name TRUSTMF				Plan: Di	rect Regu	ılar Optio	n: 🗆 Growth	n (Default) 🗆 I	DCW* Reinv	estment \square	IDCW* Payout		
						IDCV	/* Income Di	stribution cum	Capital With	drawal optior	1		
Mode of payment : □ Self □	1 Third Party Pa	vment								•			
Please fill the 'Third Party Payr	•	•		ividend Frequ	ency#:								
Payment mode: DD D	Cheque	Fund Transfer	□ RTGS/	NEFT									
Amount (figures)	<u> </u>	Cheque	e/DD/UTR/UMR	No.						eque Date	D D M M Y Y		
Account No.					Acco	ount Type 🗆 S	aving 🗆 Cu	rrent □ NRO		FCNR □ 0	thers (Please specify)		

Default frequency for Dividend Reinvestment of IDCW option would be Daily; *Default frequency for Dividend Payout of IDCW* option would be Monthly.

Bank & Branch Name

NOMINATION DETAILS - I/We wish to nominate - \square Yes \square No If ticked "No", please sign here FOR INDIVIDUALS (SINGLE OR JOINT APPLICANTS) (REFER INSTRUCTIONS XIII) In case of Minor, Date of Birth of Minor Sr Name of Nominee Relationship with Investor Nominee's Signature (Optional)/In case of No & Guardian Name Minor-Guardian's Signature (Mandatory)

The percentage of allocation / share in favour of each of the nominees should be indicated against their name and such allocation / share should be in whole numbers without any decimals making a total of 100 percent

12. DECLARATION & SIGNATURE(S)

3

I/We have read, understood the terms and conditions of the scheme related documents and agree to comply with the same as an Unitholder. I/We hereby apply for allotment of Units of the Scheme(s) and confirm and declare as under

- I/We am/are eligible Investor(s) as per the scheme related documents and not prohibited by any order/ruling /judgement passed by any Statutory Authority. The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India. I/We hereby consent for providing transactions data feed, portfolio holdings, NAV etc. in respect of my/our transactions under Direct Plan to the RIA/Portfolio Managers registered in the concerned folio,
- IWe hereby provide my/our consent to TRUST Asset Management Private Limited for (i) collecting, / sharing (ii) validating/authenticating with Unique Identification Authority of India ("UIDAI") by itself or through its Registrar and Transfer Agent ("RTA"); and (ii) downloading and updating my/our Aadhaar number(s) and associated demographic information (including updated information) in my/our accounts/folios under the scheme,based on my/our Income Tax Permanent Account Number ("PAN") in accordance with the Aadhaar Act, 2016, PMLA and rules & regulations made thereunder and applicable SEBI guidelines. I/We hereby further authorise TRUST MF /AMC for sharing/disclosing of the Aadhaar number(s) and associated demographic information (including any updated information) by itself or through its RTA, depository participants, and asset management companies of other SEBI registered mutual funds, and their RTAs, for the purpose of updating the same in my/our accounts/folios based on my/our PAN.
- 1 / We confirm that I am / we are Non Resident Indians / Person(s) of Indian Origin / Foreign Portfolio Investors but not (i) United States persons as per applicable Regulations or (ii) residents of Canada, and I / we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary / FCNR Account maintained in accordance with applicable RBI guidelines.
- The information given by me /us in or along with this application form is true and correct and I/ We agree to furnish such other further/additional information as may be required by the TRUST MF /AMC. I/We undertake to promptly inform the TRUST MF /AMC /Registrars and Transfer Agent (RTA) in writing about any change in the information furnished by me/us from time to time.

 I/We shall be liable and responsible for any loss, claims suffered, directly or indirectly by TRUST MF /AMC / RTA/ SEBI Intermediaries, arising out of any false, misleading, inaccurate and incomplete (d)
- (e) information furnished by me/us at the time or investing/redeeming the units. I/We hereby unconditionally and irrevocably indemnify and at all time keep indemnified, save and harmless TRUST MF /AMC /Trustee and their officers, directors and employees against all actions, proceedings, claims, losses, damages, charges and expenses incurred or suffered /paid by TRUST MF /AMC in this regard and in case of any dispute regarding the eligibility, validity and authorization of my/our transactions.

 The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing
- (f) Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

 I/We hereby confirm that i/we have not been offered/ communicated any indicative portfolio and/ or any indicative yield by the TRUST MF /AMC /its distributor for this investment and have not
- (g) The field y continued live lave not been induced by any rebate or gifts, directly or indirectly, to make this investment.

17 We will be bound and shall ablue by the terms and conditions as prescribed by the TNOST Will 7AWIC as afficience from the to time.														
Second	Applicant		Third Applicant	t										
P [Application No.		Stamp & Signature	TRUST MUTUAL FUND										
Amount (Rs.)			Scheme											
	·	W	Website ww.trustmf.com											
	Second Amount (Rs.)	Second Applicant Application No.	Application No. Amount (Rs.) Email ID	Application No. Application No. Stamp & Signature Amount (Rs.) Scheme Email ID Website										

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

CHECKLIST FOR DOCUMENTATION

Please submit the following documents with your application (where applicable).

	Documents	Individuals	NRIs	Minors	^Companies/ Body Corporates	^Trusts	^Societies	^HUF	^Partnership	^FPIs	^IIP/ FIIs*	Investments through Constituted Attorney
1.	Certificate of Incorporation/Registration				✓	✓			✓	✓	✓	
2.	Resolution/Authorization to invest				✓	✓	✓		✓	✓	✓	
3.	List of Authorized Signatories with Specimen Signature(s)@			√	√	√		✓	✓	✓	✓	
4.	Memorandum & Articles of Association				✓							
5.	Trust Deed					✓					✓	
6.	Bye-Laws						✓					
7.	Partnership Deed/Deed of Declaration							✓	✓			
8.	Notarized Power of Attorney											✓
9.	Proof of PAN (including for guardian)	√#	✓	√#	✓	✓	✓	✓	✓	✓	✓	✓
10.	Proof of KYC/CKYC - KIN number	√#	✓	√#	✓	✓	✓	✓	✓	✓	✓	✓
11	Proof of Aadhaar Card (Optional)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
12.	Overseas Auditor's Certificate (applicable for DTAA)		✓							✓		
13.	Foreign Inward Remittance Certificate		✓							✓		
14.	Date of Birth Certificate or School Living Certificate or Passport of Minor			√								
15.	Document evidencing relationship with Guardian			√								
16.	Declaration for Identification of Beneficial ownership			√	√	✓		✓	✓	✓		
17.	FATCA/CRS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	

All documents for entities above should be originals/true copies certified by the Director/Trustee/Company Secretary/Authorized Signatory/Notary Public

@ Should be original or true copy certified by the Director/Trustee/Company Secretary/Authorized Signatory/Notary Public, as applicable.

* For FIIs, copy of SEBI registration certificate should be provided.

[#] If PAN/PEKRN/KYC proof of Minor is not available, PAN/PEKRN/KYC proof of Guardian should be provided.

[^] Existing Mutual Fund investor who are KYC compliant, the above mentioned documents are not required. Board Resolution & Authorised Signatory List with speciman signatures is mandatory.

Instructions to Unit holders to fill the Application form

I General Instruction

Please read the Key Information Memorandum/Scheme Information Document of the Scheme and Statement of Additional Information and addendum issued from time to time carefully before investing in the Scheme. Unit holders are requested to read and acquaint themselves about the prevailing Load structure on the date of submitting the Application Form

Upon signing and submitting the Application Form and tendering payment it will be deemed that the unit holders have accepted, agreed to and shall comply with the terms and conditions detailed in the Scheme Documents. Applications complete in all respects, may be submitted at the Official Points of Acceptance of TRUST Mutual Fund /TRUST Asset Management Private Company.

The Application Form should be completed in ENGLISH and in BLOCK LETTERS only. Please tick in the appropriate box for relevant options wherever applicable. Do not overwrite. For any correction/ changes if made in the Application Form, the Applicant(s) shall enter the correct details pursuant to cancellation of incorrect details and authenticate the corrected details by counter-signing against the changes. Applications incomplete in any respect are liable to be rejected. TAMPL_TRUST AMC Trustee Private Limited have absolute discretion to reject such Application Forms.

II Application Information

- Name should be given in full without any abbreviations. Preferably write exactly as it appears in your PAN or as it appears in the incorporation document as the case may be.
- Name, Date of birth of the Minor, Name of Parent/Legal Guardian and relationship with minor is mandatory for investment on behalf of Minor applicant.
- Name of the contact person, email and telephone no. should be mentioned in case of investments by Company, Body Corporate, Trust, Society, FII and other non-individual applicants.
- 4. The signature should be in English or in any of the Indian languages. Thumb Impressions must be attested by a magistrate or a notary public or a special executive magistrate under his/her official seal. Application by minor should be signed by the guardian. In case of HUF, the Karta should sign on behalf of the HUF.
- In case an unit holder opts to hold the Units in demat form, the applicant(s) details mentioned in Section 2, should be the same as appearing in demat account held with the investor's Depository Participant.
- The Official Point of Acceptance Center/Collection Center will affix time stamp/manual stamp and return the acknowledgement slip from the application form, to acknowledge receipt of the Application. No separate receipt will be issued for the application money.
- 7. Please fill in all the fields to prevent rejection of your Application Form. Please refer to the checklist provided herein to ensure that the necessary details and attachments are made available. The application complete in all respects along with the cheque/fund transfer instructions must be submitted to the nearest Official Point of Acceptance/Collection Center. Applications which are incomplete, invalid in any respect or not accompanied by cheque or fund transfer instructions for the amount payable are liable to be rejected.
- Unit holders must write the Application Form number/Folio number on the reverse of the cheques accompanying the Application Form.
- 9. Direct Application: Unit holders subscribing under Direct Plan of the scheme will have to indicate "Direct Plan" against the scheme name in the application. Unit holders should also indicate "Direct" in the ARN column of the application form. However, in case Distributor code is mentioned in the application form, but "Direct Plan" is indicated against the scheme name, the application will be processed under Direct Plan. Further, where application is received for Existing Plan without Distributor code or "Direct" mentioned in the ARN Column, the application will be processed under Direct Plan.
- 10. Employee Unique Identification Number (EUIN): SEBI has made it compulsory for every employee/relationship manager/sales person of the distributor of Mutual Fund products to quote the EUIN obtained by him/her from AMFI in the Application Form. EUIN, particularly in advisory transactions, would assist in addressing any instance of mis-selling even if the employee/relationship manager/ sales person later leaves the employment of the distributor. Individual ARN holders including senior citizens distributing Mutual Fund products are also required to obtain and quote EUIN in the Application Form. Hence, if your investments are routed through a distributor please ensure that the EUIN is correctly filled up in the Application Form.

However, if your distributor has not given you any advice pertaining to the investment, the EUIN box may be left blank. In this case, you are required to provide a duly signed declaration to this effect. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column separately provided in addition to the current practice of affixing the internal code issued by the main ARN holder and the EUIN of the Sales Person (if any) in the EUIN space.

11. In case of NRI investment, complete postal address should be stated. P.O. Box address alone is not sufficient. NRIs/FIIs should necessarily state their overseas address failing which application may be rejected. In addition, Indian address should be stated for correspondence.

The physical application form(s) for transactions (in non-demat mode) from such U.S. person will be accepted only at the Official Point of Acceptance of transactions of the Fund in India. Additionally, such transactions in physical application form(s) will also be accepted through

- Distributors of the AMC and other platforms in India, subject to receipt of such additional documents/undertakings, etc., as may be stipulated by the AMC/Trustee from time to time.
- Investment through constituted Attorney should necessarily be signed by the constituted Power of Attorney holder.
- 13. In case of application by minor, they shall only be the sole unit holder in a folio. Joint holding is not allowed. Details of the natural parent viz., father or mother or court appointed legal Guardian must be mentioned for investments made on behalf of a minor. Please fill the parent's name in case of first applicant and date of birth of all unit holders. Payment for investment by means of Cheque, Demand Draft or any other mode shall be accepted from the bank account of the minor or from a joint account of the minor with the guardian only.
- 14. As per AMFI Circular No. 135/BP/77/2018-19, email id and Mobile Number of the Primary Unit Holder of the Folio to be provided. In cases where the email address/mobile No. is not provided in the application form, the email address/mobile no. of the first applicant as per the KYC data will be taken as the email address/mobile No. The email address of one unit holder shall not be allowed/updated against folios of other/multiple unit holders, unless a specific written request is received in this regard, duly signed by the unit holders in such folios belong to the same family (applicable in respect of individual unit holders only).
 - 'Family' for this purpose shall mean self, spouse, dependent children, dependent parents as specified in SEBI Circular No. CIR/MIRSD/15/2011 dated Aug 02, 2011, addressed to all Stock Exchanges
- 15. In case, if the application has more than one unit holder and the mode of holding is not specified in the application form, the default option for holding would be considered to be "Joint". However, in all such cases, communications, proceeds of all dividend/redemption will be paid to the first named holder.
- Legal Entity Identifier (LEI) The Legal Entity Identifier (LEI) is a 20-digit number used to uniquely identify parties to financial transactions worldwide.

The LEI system has been introduced for all payment transactions of value INR 50 crore and above undertaken by entities (non-individuals) using Reserve Bank-run Centralised Payment Systems viz. Real Time Gross Settlement (RTGS) and National Electronic Funds Transfer (NEFT).

The circular states that "Entities can obtain LEI from any of the Local Operating Units (LOUs) accredited by the Global Legal Entity Identifier Foundation (GLEIF), the body tasked to support the implementation and use of LEI. In India, LEI can be obtained from Legal Entity Identifier India Ltd. (LEIL) (https://www.ccilindia-lei.co.in), which is also recognized as an issuer of LEI by the Reserve Bank under the Payment and Settlement Systems Act, 2007".

III FATCA & CRS details

The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income tax Rules, 1962, which require Indian financial institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit holders. In relevant cases, information will have to be reported to tax authorities/appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the folio(s) or any proceeds in relation thereto. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with us or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information. If you have any questions about your tax residency, please contact your tax advisor. Further if you are a Citizen or resident or green cardholder or tax resident other than India, please include all such countries in the tax resident country information field along with your Tax Identification Number or any other relevant reference ID/Number. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form. The Fund/AMC reserves the right to reject any application or compulsorily redeem the units held directly or beneficially in case the applicant/unit holder fails to furnish the relevant information and/or documentation or is found to be holding units in contravention of the FATCA provisions.

IV Implementation of Aadhaar & PAN requirements

It is mandatory for all unit holders to quote their Permanent Account Number (PAN) (except MICRO SIP Investments) and submit certified copy of the PAN card issued by the Income Tax Department, irrespective of the amount of investment, while making an application for Purchase of Units. In case of joint holding, PAN details of all holders should be submitted. In case the application is on behalf of minor, PAN details of the Guardian must be submitted.

Implementation of the Prevention of Money-laundering (Maintenance of Records) Second Amendment Rules, 2017 with respect to seeding of Aadhaar number:

The Ministry of Finance (Department of Revenue) in consultation with the Reserve Bank of India has made certain amendments to the Prevention of Money-laundering (Maintenance of Records) Rules, 2005, namely, the Prevention of Money-laundering (Maintenance of Records) Second Amendment Rules, 2017. These Rules have come into force with effect from June 1, 2017. These Rules, inter alia, make it mandatory for investors to submit Aadhaar number issued by the Unique Identification Authority of India (UIDAI) in respect of their investments. However, the date for mandatory submission of Aadhaar in respect for accounts/folios of a new investor has been deferred by an order passed by Hon'ble Supreme Court. Further, pursuant to the notification on Prevention of Money-laundering (Maintenance of Records) Amendment Rules, 2019, Aadhar can be accepted as a valid document for proof

COMMON SIP REGISTRATION FORM & NACH MANDATE

Please read instructions carefully. Please strike off any sections that are not relevant or not applicable.



						CI	EAR • CREDIBLE • CONSISTENT					
					Application No.							
DISTRIBUTOR INFOR	MATION											
ARN/RIA Code/Portfolio Manager's Registration (PMRN)#	Sub Broker's ARN	Internal Code for Sub-Broker Employee		Employee Unique tification Number (EUIN)	Se	FOR OFFICE USE ONLY Registrar/Bank Serial No./ Date and Time of Receipt						
ARN-280217	ARN-		E- (Of Individual A Relationship Ma	RN holder or of employee/ nager/Sales Person of the Di	stributor)							
without any interaction or advice by manager/sales /sub broker of the	ransaction (only where EUI by the employee/relationshi	N box is left blank) – I/We here p manager/sales person of the a tor has not charged any advisor	by confirm that the Eabove distributor or no	JIN box has been intentionall twithstanding the advice of intention.	y left blank by me/us -appropriateness, if a	Mutual Fund. by me/us as this is an "execution-only" transaction ness, if any, provided by the employee/relationship Signature of Third Unit Holder						
		O.grad		0.00.	0.9.1414							
1. UNITHOLDER INFORM. Folio No.	ATION	Logal Entity	Identification(LEI) C	ado\$								
		Legal Entity		Julia			<u> </u>					
1st/Sole Unit Holder Name	Mr. Ms. M/s											
Second Applicant Name	Mr. Ms. M/s											
Third Applicant Name	Mr. Ms. M/s											
PAN/PEKRN of First Applicant	(0) : (0) (0)	Second Ap	plicant		Third Applicant							
2. INVESTMENT DETAILS Scheme TRUSTMF	(Choice of Plan [Plea	ase ✓])		Plan (Ple	200 ()	Pogular	□ Direct					
	I IDCW* Reinvestment	☐ IDCW* Payout D	ividend Frequency _	Flail (Fle	ase v)	Regular	Dilect					
*IDCW- Income Distribution cun				ual investor including HUF, no	ot applicable to indivi	iduals minor & I	VRI investor					
Note: Default Option will be Gr	<u> </u>			dar invocator including From, its	or applicable to main		WW. IIIVOOLOI.					
Enrolment Period: From Date		Y Y To Date M M		OR Perpetual (99 years)	(Default)							
First SIP Instalment via: Cheque	No		on Bank and Branch		(=====)							
Amount: ₹												
Each SIP Amount: ₹			nt in Words									
_		onthly (SIP)	It III Words		□ Ouerterly	· (CID)						
Frequency: (Please ✓) (Minir	num instalment amounting	to Rs. 1,000/- (plus in multiple	of Re. 1/-)	(Minimum instalmen	☐ Quarterly (SIP) amounting to Rs. 3,000/- (plus in multiple of Re. 1/-) (Minimum instalments – 4)							
Date D D		n instalments – 6) iny day from 1st to 28th of the m	nonth.)	Date D D Preferre		Debit Date (Any day from 1st to 28th of the month.)						
I/We hereby authorize TRUST Mu												
NACH Mandate to register and sta			,,,g		, , , , , , , , , , , , , , , , , , ,	,						
3. DEMAT ACCOUNT	DETAILS (OPTION	NAL)										
NSDL: Depository Participant (DP) ID (NSDL only)	Beneficiary Account Nur	mber (NSDL only)	CDSL	.: Depository Participant (DP) ID (CDSL only)							
4 DEGLADATION 9 0	IONATURE (O)											
4. DECLARATION & S		Information Degument(s) and	Ctatament of Addition	al Information and the terms	oanditions of CID o	annalment through	sh Diract Dobit/NACH and					
I/We have read and understood agree to abide by the same. I/We same. I/We hereby declare that the	e hereby apply for the units	of the scheme for enrolment un	der the SIP of the foll	owing Scheme(s)/ Plan(s) / O	ption(s) and agree to	o abide by the te	erms and conditions of the					
I/We authorise the bank to honor Asset Management Private Limit part of the bank for executing th information, I/We would not hold been induced by any rebate or git to him/them for the different com	ur the instructions as menti led / Trust Mutual Fund (inc e direct debit instructions of the user institution respon- fts, directly or indirectly, in	oned in the application form. I/V cluding its affiliates), and any of of additional sum on a specified sible. I/We undertake to keep su making this investment. The AR	Ve also hereby authorits officers directors, date from my accountificient funds in the form the following the foll	rise bank to debit charges tow personnel and employees, sl nt. If the transaction is delaye unding account on the date of d to me/us all the commission	vards verification of the hall not be held responded or not effected at fexecution of standings (in the form of trail)	this mandate, if onsible for any all for reasons	any. I/We agree that Trust delay/wrong debits on the of incomplete or incorrect We have not received nor					
Date D D M M Y Y Y	Signature	of First Applicant.	Signature	of Second Applicant.	S	Signature of Third Applicant.						
This form should be accompanie		,										
_·····×							<u>*</u>					
TRUST MUTUAL FUND - A		T SLIP		Application No.	Stamp & S	Stamp & Signature TRUST MUTUA FUND						
From	•						CLEAR + CESTEBLE + CONSISTENT					
Instrument No	Dated	SID Fraguency	SIP Amount (Ps	1	Col	home						

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.



ONE TIME BANK MANDATE (NACH/OTM/DIRECT DEBIT FORM)

Tick (✓)]	UMRN	F	0	R	0	F	FF		С	Е	l	J	SE		0	N	L	Υ		Date	D	D	M M	YY	Υ	Υ
CREATE ✓ MODIFY	Sponsor Ban	k Code		FOR OFFICE USE ONLY Utility Cod									de FOR OFFICE USE ONLY														
CANCEL	I/We hereby	authorize		TRUST MUTUAL FUND										to de	bit (tio	ck ✔)	SB	CA	CC	SB-NRE	SB-NRC	Otl	her				
	it No.																										
With Bank	Name	e of customers	of customers bank IFSC											or M	IICR												
an amount of rupees	f rupees IN WORDS																₹		11	I FIGU	RES						
Frequency 🗵 Monthly 🗵 Quarterly 🖾 Half yearly 🖾 Annually 🗹 As & when presented DEBIT TYPE 🖾 Fixed amount 🗹 Maximum Amount																											
Reference/Application	No.															Pho	ne No). [
Scheme Name																Em	ail ID										
I agree for the debit of	mandate proce	ssing charges	by th	e ba	nk wh	om I am	aut	thorizir	ng to o	debit	t my a	ccount a	as p	oer late	st sc	hedul	e of c	harge	es of t	he ba	nk.						
From D D M M Y Y Y Y Y													nature of Account Holder As per Bank Record					Signature of Account Holder As per Bank Record									
or Until ca		1. Name as in Bank records								2. Name as in Bank records						3. Name as in Bank records											
be made from my/our a carrying this mandate for	This is to inform that I/We have registered for NACH (Debit Clearing) / Direct Debit / SI facility and that the payment towards my/our investments in the Schemes of TRUST Mutual Fund / TRUST AMC shall be made from my/our above mentioned bank account with your Bank. I/We hereby authorize the representatives of TRUST Asset Management Private Limited, Investment Manager to TRUST Mutual Fund carrying this mandate form to get it verified and executed. I/We authorize the Bank to debit my/our above-mentioned bank account for any charges towards mandate verification, registration, transactions, returns, etc, as applicable for my/our participation in NACH/Direct Debit/SI.																										

Terms and conditions

- Please refer the Key Information Memorandum (KIM) and Scheme Information Document (SID) of the respective Scheme for applicable NAV, risk factors, load (exit entry) and other information on the respective schemes before investing.
- Complete Application form and SIP Enrollment Form along with the first cheque should be submitted to the AMC/KFIN Investor Service Centres (ISCs).
- Investors should mandatorily give a cheque for the first Installment. The
 first cheque should be drawn on the same bank account which is to
 be registered for NACH. Alternatively, the cheque may be drawn on
 any bank, for which investor should provide a photocopy of the cheque
 or cancelled cheque of the bank/ branch for which NACH is to be
 registered.
- First SIP cheque and subsequent SIP installments via NACH should be of the same amount.
- If the date of debit to the investors account happens to be a non business day as per the fund, execution of the debit will not happen on the day of the holiday and allotment of units will happen as per the terms and conditions listed in the concerned SID.
- 6. Incorrect/Incomplete applications are liable to be rejected.
- TRUST Asset Management Private Limited reserves the right to reject any application without assigning any reason thereof and the Trustee reserves the right to change/modify the terms and conditions of SIP.
- 8. NACH instructions will take a minimum of one month for registration with the bank and hence the first debit will be carried out only after one month, on the SIP date mentioned on the form. The AMC reserves the right to modify the SIP period depending on the one month period for registration to ensure minimum number of installments as mentioned in SID.
- 9. The mandate registration form will be submitted through National Automated Clearing House (NACH) and Banks participating in Direct Debit Facility. This facility is offered to investors having Bank accounts in select banks and the list is available on NPCI website. i.e. www.npci. org.in. The list may be modified/updated/changed/removed at any time in future entirely at the discretion of National Payments Corporation of India (NPCI) without assigning any reasons or prior notice. Standing instructions for investors in such Banks will be discontinued. We will inform you on such discontinuation.
- Incase investors bank account is available under NACH Facility; registration will be done through NACH platform.
- New investors, who wish to enroll for SIP through NACH, should fill the Common Application Form & SIP NACH mandate.
- 12. Initial cheque should be drawn on any bank, which is situated at & is a member of the Banker's Clearing House located at the place where the SIP application is submitted or payable at par & should participate in local MICR clearing. Please contact the nearest designated Investor Service Centre for the updated list. For outstation applications, the initial DD has to be payable at the nearest AMC locations. No outstation cheques will be accepted. The cheque should be drawn in favor of the Scheme chosen (e.g. Pay TRUSTMF LIQUID FUND) & crossed A/c Payee Only.
- Payments will be accepted by NACH mode. For this purpose, investors/ unit holders are required to give NACH mandate Form to debit their bank accounts at periodic intervals & credit the subscription proceeds to TRUST Mutual Fund Bank Account.
- Returned/Dishonored cheque/NACH Rejects will not be presented again for collection. If the 1st installment cheque is dishonored, the SIP processing/registration will be rejected.
- 15. The SIP Enrollment will be discontinued in cases where three consecutive SIP installments are not honored or the bank account is closed and no request for change in bank account has been submitted.
- 16. If investor has not provided the SIP frequency/period date, the default SIP frequency would be monthly & the SIP installments would be the minimum number of installments of the respective Schemes as specified in the SID. The default date will be considered as 10th of the month for Monthly option.
- A duly filled & signed SIP NACH mandate along with the first cheque (if investment is in the new Scheme).
- The investor may choose to discontinue this facility by giving 30 Calendar days written notice to any of AMC/ Registrar Investor Service centers.

- Request for change in bank mandate to be submitted atleast 30 Calendar days before the due date of next SIP installment.
- The bank account provided for NACH (Debit) should be in the list of banks participating in NACH.
- MICR code or IFSC code should be mandatorily filled on NACH mandate, MICR code starting and or ending with 000 are not valid for NACH.
- The investor agrees to abide by the terms and conditions of NACH facility of NPCI as applicable at the time of investment and as may be modified from time to time.
- 23. The investor undertakes to keep sufficient funds in the account till the date of execution of the debit. The investor hereby declares that the particulars given overleaf are correct and complete. The Fund, its Registrars, Auto Debit Banks and other service providers shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligation under this agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riots, strike, mutiny, revolution, fire, flood, fog, war, change of government policies, unavailability of banks, computer system, force majeure events or any other cause of peril which is beyond their reasonable control and which has the effect of preventing the performance of contract by them.
- 24. Investors will not hold TRUST Asset Management Private Limited, its registrars, banks and other service providers responsible if the transaction is delayed or not effected or the investor's bank account is debited in advance or after the specific SIP date due to the local holidays or any other reason.
- 25. SIP in a folio of minor will be registered only upto the date of minor attaining majority though the instruction may be for the period beyond that date.
- SIP registration will be automatically terminated upon receipt of intimation of death of the Unit holder.
- Incorrect, incomplete or ambiguous forms will not be accepted and will be returned to the investor within 10 business days via normal post.
- To avail of SIP in separate schemes via NACH facility, an investor will
 have to fill a separate form for each Scheme. A single form cannot be
 used for different Schemes simultaneously.
- As per Prevention of Money Laundering Act, 2002, it is mandatory for all investors to be KYC compliant.

30. Employee Unique Identification Number (EUIN):

SEBI has made it compulsory for every employee/relationship manager/sales person of the distributor of Mutual Fund products to quote the EUIN obtained by him/her from AMFI in the Application Form. EUIN, particularly in advisory transactions, would assist in addressing any instance of mis-selling even if the employee/relationship manager/sales person later leaves the employment of the distributor. Individual ARN holders including senior citizens distributing.

Mutual Fund products are also required to obtain and quote EUIN in the Application Form. Hence, if your investments are routed through a distributor please ensure that the EUIN is correctly filled up in the Application Form. However, if your distributor has not given you any advice pertaining to the investment, the EUIN box may be left blank. In this case, you are required to provide a duly signed declaration to this effect. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column separately provided in addition to the current practice of affixing the internal code issued by the main ARN holder and the EUIN of the Sales Person (if any) in the EUIN space.

31. Legal Entity Identifier (LEI) -

The Legal Entity Identifier (LEI) is a 20-digit number used to uniquely identify parties to financial transactions worldwide.

The LEI system has been introduced for all payment transactions of value INR 50 crore and above undertaken by entities (non-individuals) using Reserve Bank-run Centralised Payment Systems viz. Real Time Gross Settlement (RTGS) and National Electronic Funds Transfer (NEFT).

The circular states that "Entities can obtain LEI from any of the Local Operating Units (LOUs) accredited by the Global Legal Entity Identifier Foundation (GLEIF), the body tasked to support the implementation and use of LEI. In India, LEI can be obtained from Legal Entity Identifier India Ltd. (LEIL) (https://www.ccilindia-lei.co.in), which is also recognized as an issuer of LEI by the Reserve Bank under the Payment and Settlement Systems Act, 2007".