

TATA MUTUAL FUND Mulla House, Ground Floor, M. G. Road, Fort, Mumbai - 400 001 Application Form For Tata Mutual Fund



Refer Sec. B

ALL THE DETAILS REQUESTED IN THE FORM ARE MANDATORY FOR EACH OF THE APPLICANTS $$$\rm Sr. No.: \ C$$

1. Advisor / Distributor Information

ARN / RIA [^] Code	N-280217	Sub-Broke	er ARN Code	Su	b-Broker	/ Bank Br	anch Co	de	EUIN Code				
Internal Code In case the subscription am other than First time mutual commission shall be paid dir ^ By mentioning RIA code, 1	ount is ₹ 10,000 I fund investor) w rectly by the investor (we authorize vo	without any in provided by th or more and vill be deducted for to the AM	ation for "execution-only" tran teraction or advice by the en e employee/relationship mar your Distributor has op ed from the subscriptio FI registered Distributor to the SER Degistered li	nployee/relationshi nager/sales person ted to receive t n amount and p rs based on the	ip manager/ of the distri ransaction baid to the investors'	sales person o butor and the o charges, ₹ distributor assessment	f the above distributor h 150/- (for Units wil of variou	distributor nas not cha r First tin II be issu us factors	or notwithstanding t ged any advisory fees ne mutual fund in ed against the ba including the ser	he advice of in-a s on this transact nvestor) or ₹ lance amount vice rendered	appropr tion. 100/- t inve by th	(for i sted.	investor Upfront tributor.
Sole / 1 st App	licant Signatur		2 nd	Applicant Sig Thumb Impre	nature /			i transaci	3 rd Applicar				
2. Applicant's In	formatio	1								Rof	or S	or A	A, C & J
	The Name of t	he Applicant	s should be as mention	ed in the PAN a	and the K	C acknowl	edgemen	it. There	can be upto 3 ho	Iders. No joir	nt hol	ders a	allowed
	under the US S	Securities Ac	or. Any applicants shou t of 1933 and corporat ase C-KYC No. is not a	tions or other o	entities o	rganised un	ider the la	aws of th	e U.S. For Invest	ors New to T			
Ist Applicant's Det	ails							Folio N	p.				
The first applicant >> will be the primary holder and all	Mr. Mr.	s. M/s.	PAN / PEKRN				C-KYC						
correspondence will be sent to him/her. Only the first holder can be a minor.	Name		1										
Existing Investors may mention the Folio no. and proceed to Sec. 4. Investors to ensure	Date of Birth		ΥΥΥΥΥ	In case o	f Minor:	Proof of E		Birth cei Passpor		nool leaving hers	-		
that PAN is linked to Aadhaar.	Mobile No.				Mobile Self		s to Pai						
	I hereby a	uthorize TA	AML/ TMF to send in	nportant info	rmation	and transa	action u	pdates	to me on What	App mobil	e nu	mbe	r.
Contact Person - Design	nation (Non In	dividual In	vestors) / Power o	of Attorney (POA) / I	Proprietor	/ Guar	dian de	tails (minor a	pplicant)			
POA / Proprietor / Guardian Details	Mr. I	Ms.					PAN /	PEKRN					
	Name												
For Non Individual >>	Entity Identif	ïer (LEI) Nu	mber Mandatory for	Transaction	Value of	INR 50 cr	ore and	above					
To be filled by ≫ Guardian			inor Applicant Legal Guardian	Proof of Re			aaving c	ortifica	te 🗌 Passport	Others			
	Mobile No.			Date of Birt		Jenoori		·KYC		- Others			
					4 M /	YYY	Y						
Tax Status													
	Resident I NRI-Repat NRI-Non-R Minor - Re Minor - NF Person of	riation epatriation sident Indiv RI	Vidual Hindu Partner Vidual Compa		mily 	Body of In Society / C Non Profit	ability Pa dividuals Club Organiz	s zation	ip Foreign Qualifie Foreign Foreign	as Citizen o National Re d Foreign 1 Portfolio Ir Institutiona	eside Inves ivest	ent ir stor or	
3. Contact Detai	ls											Refer	r Sec. D
Mailing address is ≫ required for initial communication. We will overwrite this	·												
address with the 1 st Applicants address								Ľ	ity				
as per the KRA	PIN			State				C	ountry				
records	Residence Ph	one (prefix	STD Code)	Office Phon	e (prefix	STD Coc	le)		Extn				
	Email							E	mail belongs to	D Self		Pare Chil	
	I/We wish to	receive ph	ot have email addre sysical copy of the	scheme-wise	annual				nary thereof	Yes		No - ≫	
TATA MUTUAL FUND				ledgement Slij					No.: C			~6	,
Received from Mr./Ms./M/s.						PAN			₹				
for purchase in									Subject to verif	ication and re	ealisa	tion.	

Overseas address			
Mandatory for Non- Resident Individuals and Overseas Investors in addition			
to the mailing address.			City
	State	ZIP Code	Country

4. Investment Instrument Details

Refer Sec. E

Refer Sec. F & Product Labels

The name of the » first applicant	Gross Amount (₹) (A)	DD Charg (B)	es (₹) (if any)	Net Amount (₹) (Cheque / DD Amount) (A - B)		
should be available on the investment						
Cheque.	Account Number		A/c Type	Dated		
Cheque/ DD to be drawn in fayour						
of 'Name of the Scheme'	Drawn on Bank			Cheque / DD No.		
	Branch			Branch City		

5. Investment Scheme Details

Scheme Name »	
Plan (select any one) ≫	Regular Direct
Option »	
Sub Option »	
Div. Payout Option (select any one) »	DCW Reinvestment DCW Payout

IDCW - Income Distribution cum Capital Withdrawal.

6. Bank Account Details

Refer Sec. G

The bank account details provided below will be held on record and considered as default bank mandate to pay redemption proceeds and IDCW payouts (if applicable).

This must be an Indian account. The 1 st applicant should be a holder in this	Bank Name			Branc	h
account.	Account number			A/C t	ype Savings Current NRO
					NRNR NRE
	MICR		IFSC for RTGS	IFSC	for NEFT
	Address				
	City	F	IN	State	
	City			State	
*					
Cheque Details					Acknowledgement Slip
Cheque/DD No	dated	A/c. No	Bar	ık	
Call (022) 6282 7777 (Monda	ay to Saturday 9:00 am to 5:30	pm)			Subject to realisation.

Mode of Holding	Single	[Joint	Any one or Survivor (De	efault)						
II nd Applicant's Detai	ls					Investors	to ensure	that PAN	is lir	iked to	Aadhaar
Mr. Ms.				Status		PAN / PEK	RN				
				🗌 Resident Individual	NRI						
Name				1							
Mobile No.		Mobile belong		Date of Birth		C-KYC					
		Self Spouse	Parent Child	D D M M / Y Y	YYY						
III rd Applicant's Detai	ils	•				Investors	to ensure	that PAN	is lir	iked to	Aadhaar
Mr. Ms.				Status		PAN / PEK	RN				
				Resident Individual	NRI						
Name											
Mobile No.		Mobile belon	gs to	Date of Birth		C-KYC					
		Self	Parent Child	D D M M / Y Y	YYY						
8. Know Your Cı	istomer (•				II				R,	fer Sec.
CATEGORIES		PLICANT (Inclu		SECOND APPLICAN	r / Guar			THIRD A	PPLIC		
Occupation »		ctor Service		Private Sector Service	-	ed		Sector Serv		Reti	
	Public Sec Governme Profession	ent Sector	Business Agriculturist	Government Sector	Agric	ulturist	🗆 Govern	Sector Servi Iment Secto			culturist
	 Profession Housewife Others (pl 	2	Forex Dealer Student	Professional Housewife Others (plaase specifie)	E Fore>	ent	Profess	wife	ر د	🗌 Stud	
Gross Annual Income »			1-5 Lacs	 Others (please specify) Below 1 Lac 	/		Below	(please spe	ectry)	□ 1-5	
	5-10 Lacs		10-25 Lacs	□ 5-10 Lacs	10-2	5 Lacs	🗆 5-10 L	acs		□ 10-	25 Lacs
	>25 Lacs-		⇒1 crore Non-individual)	>25 Lacs-1 crore Networth in	□>1 ci	ore	□ >25 La Networth	in i		□>1	crore
	₹	•	as on	₹			₹				as on
	(not older than			on D D / M M / (not older than 1 year)	YYY			/ M M than 1 year)	/		
Others »				Not Applicable							
	Politically	Exposed Perso Politically Exp		Politically Exposed Per Related to Politically E		erson	Politica	ally Expose d to Politica			Person
Additional KYC De	tails for N	Non - Indiv	iduals								
For Non Individuals »			mpany or Subside the UBO declaration	diary of Listed Company or ation)	Contro	lled by a Li	sted Comp	any:	Yes		0
only (Companies, Trust, Partnership			المتابية بالمتعالمة والمتعالمة	g any of the mentioned ser	vices						
riust, ruititeisinp						/ Casina S	andeae				
etc.)	Exercise Foreign Ex		ey Changer Servio	ces Gaming / Gambling None of the above		/ Casino S	ervices				
etc.)	Foreign Ex	change / Mone nding / Pawnir	ey Changer Servio Ig	ces Gaming / Gambling	/ Lottery	/ Casino S	ervices			Re	fer Sec. I
etc.)	Foreign Ex Money Lei	change / Mone nding / Pawnir	ey Changer Servic Ig e Act (FAT	ces Gaming / Gambling	/ Lottery S		ervices	THIRD AP	PLIC		fer Sec. I
etc.) 9. Foreign Accou	Foreign Ex Money Lei	change / Mone nding / Pawnir C omplianc	ey Changer Servic Ig e Act (FAT	es Gaming / Gambling None of the above CA) & CRS Detail	/ Lottery S		ervices	THIRD AP	PLIC		fer Sec. I
etc.) 9. Foreign Accou For Individuals	Foreign Ex Money Lei	change / Mone nding / Pawnir C omplianc	ey Changer Servic Ig e Act (FAT	es Gaming / Gambling None of the above CA) & CRS Detail	/ Lottery S		ervices	THIRD AP	PLIC		fer Sec. I
etc.) 9. Foreign Accou For Individuals Country of Birth »	Foreign Ex Money Lei Int Tax C	ichange / Mone nding / Pawnir omplianc PLICANT (inclu	ey Changer Servic Ig e Act (FAT	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S		Indian		[fer Sec. H
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth »	Firest App Int Tax C FIRST APF	ichange / Mone nding / Pawnir Complianc PLICANT (inclu Base specify) I or Business	ey Changer Service g e Act (FAT uding Minor) U. S. Residential	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI		Indian Others (F	Please speci ial or Busin	[fy)	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA »	First APF	achange / Mone nding / Pawnir Complianc PLICANT (inclu asse specify) I or Business	ey Changer Service g e Act (FAT uding Minor) U. S. Residential Business	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci	[fy)	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu Pase specify) I or Business [I Office	ey Changer Service g e Act (FAT ading Minor) U. S. Residential Business Yes	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI U. S. Resid	DIAN	Indian Others (F	Please speci ial or Busin	[fy)	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in »	First APF	achange / Mone nding / Pawnir Complianc PLICANT (inclu asse specify) I or Business	ey Changer Service g e Act (FAT ading Minor) U. S. Residential Business Yes	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin	[fy)	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax purposes?	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu Pase specify) I or Business [I Office	ey Changer Service g e Act (FAT ading Minor) U. S. Residential Business Yes	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin	[fy)	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax purposes? Country of Tax Residency 1 »	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu Pase specify) I or Business [I Office	ey Changer Service g e Act (FAT ading Minor) U. S. Residential Business Yes	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin	[fy)	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax purposes? Country of Tax Residency 1 » Tax Identification Number 1 » Identification Type 1 »	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu ease specify) I or Business [I Office [ete section belo	ey Changer Service g e Act (FAT ading Minor) U. S. Residential Business Yes	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin ed Office	[fy) ess	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax purposes? Country of Tax Residency 1 » Tax Identification Number 1 »	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu ease specify) I or Business [I Office [ete section belo	ey Changer Services e Act (FAT ading Minor) U. S. Residential Business Yes ow.	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT Chers (Please specify) Residential or Business Registered Office No	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin ed Office	[fy) ess	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax purposes? Country of Tax Residency 1 » Tax Identification Number 1 » Identification Type 1 » If TIN is not available please » tick the reason A, B or C *	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu ease specify) I or Business [I Office [ete section belo	ey Changer Services e Act (FAT ading Minor) U. S. Residential Business Yes ow.	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT Chers (Please specify) Residential or Business Registered Office No	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin ed Office	[fy) ess	ANT	ential
etc.) 9. Foreign Accou For Individuals Country of Birth » Place of Birth » Nationality » Type of address given at KRA » Are you also a resident in » any other country(ies) for tax purposes? Country of Tax Residency 1 » Identification Number 1 » Identification Type 1 » If TIN is not available please » tick the reason A, B or C * Country of Tax Residency 2 »	First APF	ichange / Mone nding / Pawnir ComplianC PLICANT (inclu ease specify) I or Business [I Office [ete section belo	ey Changer Services e Act (FAT ading Minor) U. S. Residential Business Yes ow.	ess Gaming / Gambling None of the above CA) & CRS Detail SECOND APPLICANT Chers (Please specify) Residential or Business Registered Office No	/ Lottery S / GUARI	DIAN	Indian Others (F Resident Register	Please speci ial or Busin ed Office	[fy) ess	ANT	ential

only if the authorities of the respective country of tax residence do not require the TIN to be collected); Reason C: Others- Please state the reasons thereof FATCA & CRS Related Details for Non Individuals: Please submit Form W8 BEN-E / Specified declaration (Enclosed)

TU. NOMMATION	Delans		Refer Sec.
Mandatory for Individual(s) applying singly or jointly.	You can nominate up to 3 persons to receive the Units allotted to y made to such Nominee(s) and Signature of the Nominee(s) acknow	ledging receipt thereof, shall be a valid disch	
Select any one »	Register nomination as below	I do not wish to nominate.	
1 st Nominee	Nominee Name		
	Relationship with Nominee		Date of Birth D D / M M Y Y Y Y Y
	Address		City
	State	PIN	Country
	Guardian Name in case of Minor	Allocation (%)	Signature of Nominee / Guardian

11. Demat Account Details

10 Nemination Details

2nd Nominee

3rd Nominee

Nominee Name

Nominee Name

Address

State

Address

State

Relationship with Nominee

Guardian Name in case of Minor

Relationship with Nominee

Guardian Name in case of Minor

Ensure that the sequence of names as mentioned in the application form	Depository participant Name	
account held with the Depository Participant.	Central Depository Securities Limited Target ID No.	National Securities Depository Limited DP ID No.
n case the details are found to be incorrect, nits will be allotted in physical mode.		I N Beneficiary Account No.

PIN

PIN

Allocation (%)

Allocation (%)

Signatures I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws. I / We hereby confirm and declare as under-

- (1)I/We have read, understood and hereby agree to comply with the terms and conditions of the scheme related documents and apply for allotment of Units of the Scheme(s) of Tata Mutual Fund ('Fund') indicated in this application form. //We am/are eligible Investor(s) as per the scheme related documents and am/are authorised to make this investment. The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of (2)
- I/we am/are eligible investor(s) as per the scheme related documents and am/are authorised to make this investment. The amount invested in the scheme(s) is through regulations related documents and am/are authorised to make this investment. The amount invested in the scheme(s) is through regulations for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India. The information given in / with this application form is true and correct and further agree to furnish such other further/additional information as may be required by the Tata Asset Management Limited (TAML)/ Fund and undertake to inform the AMC / Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished from time to time. That in the event, the above information and/or any part of it is/are found to be false/ untrue/misleading, I/We will be liable for the consequences arising therefrom. (3)
- (4)
- I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Mutual Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us. I/We hereby authorize you to share the account statement of the folio with the distributor /broker / advisor on record. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. (5) (6)
- 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 Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. (7)
- (8) I/We hereby confirm that I/We have not been offered/ communicated any indicative portfolio and/ or any indicative yield by the Fund/AMC/its distributor for this investment
- I / We agree that the unit balance(s) reflecting in the account statement is subject to realisation of Cheque accompanying the purchase request, PAN validation and KYC compliance. (9)
- (10) For Foreign Nationals Resident in India only: I/We will redeem my/our entire investment/s before I/We change my/our Indian residency status. I/We shall be fully liable for all consequences (including taxation) arising out of the failure to redeem on account of change in residential status. (11) For NRIS/ PIO/OCIs only: I/We confirm that my application is in compliance with applicable Indian and Foreign laws.
- (12)
- For NRIs/ PIO/OCIs only: I/We confirm that my application is in compliance with applicable Indian and Foreign Iaws. I/We hereby accord my/our consent to TATA AMC for receiving the promotional information/ material via email, SMS, telemarketing calls, etc. on the mobile number and email provided by me/us in this Application Form. Date:

1 st Applicant Signature /	2 nd Applicant Signature /	3 rd Applicant Signature /
Thumb Impression	Thumb Impression	Thumb Impression

Date of Birth

Citv

Country

Date of Birth

City

Country

D D / M M / Y Y Y

Signature of Nominee / Guardian

Signature of Nominee / Guardian

Refer Sec. M

FUND	, Ground Flo	. FUND or, M.G. Road, Fort, Mumbai r Tata Retirement Savin		This product is suitat PROGRESSIVE PLAN: - 100%) savings scheme MODERATE PLAN: - 1 equity oriented (betw planning to individual Current Income A d for retirement plannin advisors if in doubt a	 Long Term Capi e which provides Long Term Capita veen 65%-85%) sa investors. CONSE lebt oriented (bett og to individual in 	ital Appreciation. tool for retirement A Appreciation & avings scheme ERVATIVE PLAN: ween 70%-100%) nvestors. *Invest	An equity orien ent planning to in Current Income. which provides to Long Term Cap savings scheme w tors should cons	dividual investors. • A predominantly pol for retirement ital Appreciation & /hich provides tool	EXC O MELS
		HE FORM ARE MANDATORY	FOR EACH C	OF THE APPLI	ICANTS	Sr.	No.:		
I. Advisor / Distribu	itor Informa	ation							Refer Sec
ARN / RIA [^] Code ARI	N-280217	Sub-Broker ARN Code	Sub-	Broker / Bank	Branch Coo	de	EUIN Code		
Internal Code		OR Declaration for "execution- this is an "execution-only" transact distributor or notwithstanding the a distributor and the distributor has	ion without any in advice of in-appro not charged any a	nteraction or adv priateness, if any dvisory fees on t	ice by the er /, provided b this transacti	nployee/rela y the employ ion.	ationship mar yee/relations	nager/sales per hip manager/sa	rson of the abo ales person of t
other than First time mutual commission shall be paid dire ^ By mentioning RIA code, I / Sole / 1st Appli	fund investor) w ectly by the invest we authorize you cant Signature		n amount and pai rs based on the inv nvestment Advise Applicant Signa	d to the distribut restors' assessme r (RIA) the details ture /	tor. Units will ent of various	l be issued a s factors inc transaction	against the ba luding the ser s in the scher 3rd Applica	alance amount rvice rendered I nes(s) of Tata M nt Signature	invested. Upfro by the distribut Mutual Fund
	mpression		humb Impress	Ion			Inumb	mpression	
2. Applicant's Inform	ation							Refe	er Sec. A, C
^{ist} Applicant's Deta	as a minor. Any corporations or number. In case	e Applicants should be as mentioned in applicants should not be a resident of Ca other entities organised under the laws the C-KYC number is not available, kind	anada or a person v of the U.S. Individu	vho falls within the al Investors who a	e definition of are KYC KRA v	the term "U.S erified after	. Person" unde 10th Feb 2017	r the US Securiti , should additio	es Act of 1933 a
The first applicant » will be the primary holder and all	Mr. Ms	. M/s. PAN / PEKRN			С-КҮС				
correspondence will be sent to him/her. Only the first holder can be a minor.	Name								
Existing Investors may mention the Folio no. and proceed to Sec. 4	Date of Birth	(DOB) M M / Y Y Y Y	In case of I	Ainor: Proof of		irth certifi assport		hool leaving hers	
	Mobile No.				Mobile b Self	pelongs to	Pa		
	,	uthorize TAML/ TMF to send im	•	ation and trar	nsaction up	odates to r	ne on What	sApp mobile	number.
Power Of Attorney (POA) / Proprietor	r / Guardian details (minor ap	pplicant)						
POA / Proprietor / Guardian Details	Mr. N	۸s.			PAN / I	PEKRN			
	Name								
	Relationship	with the Minor Applicant	Proof of Rela	ionship					
Guardian	Mother	🛛 Father 🗌 Legal 🛛 Guardian	Birth certif	icate 🗌 Schoo	l leaving c	ertificate	Passport	Others	
	Mobile No.		Date of Birth		C-ł	<yc< td=""><td></td><td></td><td></td></yc<>			
			D D M	м / ү ү	Υ Υ				
Tax Status									
	Resident II NRI-Repatr NRI-Non-R Minor - Re	riation	 Minor - NRI Person of II Sole Proprio Hindu Undi 	ndian Origin Storship		🗆 Fo	reign Natio	zen of India nal Resident eign Investo	
3. Contact Detail	ls			· · ·					Refer Sec
Mailing address is »									
required for initial									
communication. We									
will overwrite this address with the 1 st						City			
Applicants address	PIN		State			Cou	ntrv		
as per the KRA		one (prefix STD Code)	Office Phone	(prefix STD C	ode)		·		
-	Email					E	Extn il belongs to	Colf	Parent
_						Ema	n beiorigs (0	Self Spouse	Child
		who do not have email addre receive physical copy of the s		nnual report o	or abridged	d summar	y thereof	Yes	No
%		Acl	knowledgeme	nt Slip		Sr.	No.:		>

Received from Mr./Ms./M/s.

for purchase in Tata Retirement Savings Fund - Plan: \Box Progressive \Box Moderate \Box Conservative

Cheque Details Overleaf / Subject to realisation.

₹.

PAN

Overseas address

Mandatory for Non-Resident Individuals and Overseas Investors in addition to the mailing address.			
manning address.			City
	State	ZIP Code	Country
4. Investment Instru	ment Details		Refer Sec. E
The name of the » first applicant should be available on the investment	Gross Amount (₹) (A)	DD Charges (₹) (if any) (B)	Net Amount (₹) (Cheque / DD Amount) (A - B)

Cheque/ DD to be drawn in favour of
'Tata Retirement
Savings Fund'

Gross Amount (<) (A)	(B)	es (<) (if any)	(A - B)
Account Number	·	A/c Type	Dated
Drawn on Bank			Cheque / DD No.
Branch			Branch City

Refer Sec. F & G

Refer Sec. G

5. Investment Scheme Details

Cheque.

 TATA RETIREMENT SAVINGS FUND

 Select any one
 Plan Name
 Please tick the appropriate option (any one per plan)

 Progressive Plan - Regular Plan
 Auto Switch Option 1 (Progressive to Moderate @ age 45; Moderate to Conservative @age 60),

 Progressive Plan - Direct Plan
 Auto Switch Option 2 (Progressive to Conservative @ age 60)

 Moderate Plan - Regular Plan
 Auto Switch Option 3 (Moderate to Conservative @ age 60)

 Moderate Plan - Regular Plan
 Auto Switch Option 3 (Moderate to Conservative @ age 60)

 Conservative Plan - Direct Plan
 Auto Switch Option 3 (Moderate to Conservative @ age 60)

 Conservative Plan - Direct Plan

6. Auto SWP Facility

Select any one only » Will be applicable after attaining 60		No Auto SWP			
years	OR	Fixed SWP (Select Frequency)	O Monthly	OR	O Quarterly (Default)
	OR	Fixed Amount (Frequency Monthly only) Rs.			

7. Bank Account Details

This must be an Indian account. The 1 st applicant	Bank Name		Branch
should be a holder in this account.	Account number		A/C type Savings Current NRO
The bank account			
details provided below will be held on record and	MICR	IFSC for NEFT	IFSC for RTGS
considered as default bank mandate to pay redemption proceeds and	Address		
IDCW payouts (if applicable).			
	City	PIN	State
%			*****
Cheque Details	Ac	knowledgement Slip	
Cheque/DD No	dated	A/c. No	Bank
Call (022) 6282 7777 (Md	onday to Saturday 9:00 am to 5:30 pm) •	SMS: TMF To 57575 · E-mail: eng T@	camsonline.com Subject to realisation.

8. Joint Applicant's Details

Country of Tax Residency 2 \gg Tax Identification Number 2 \gg

Identification Type 2 \gg

										-
Mode of Holdi	ng	Single		□ Joint	Any one or Survivor (E	Default)				
II nd Applicant's I	Detai	ls					Investors	to ensure th	nat PAN is li	inked to Aadhaar
Mr. Ms.					Status		PAN / PEK	RN		
					Resident Individual	NRI				
Name										
Mobile No.			Mobile belo	ngs to	Date of Birth		C-KYC			
			Self	Parent Child		YY				
III rd Applicant's	Deta	ils	1		'		Investors	to ensure th	nat PAN is li	inked to Aadhaar
Mr. Ms.					Status		PAN / PEK	(RN		
					Resident Individual	NRI				
Name										
Mobile No.			Mobile belo	-	Date of Birth		C-KYC			
			Self	Parent Child		YY				
9. Know Your C	usto	mer (KYC) I	Details		l					Refer Sec.
CATEGOR	RIES	FIRST APP	PLICANT (Inc	luding Minor)	SECOND APPLICAN	IT / GUAI	RDIAN	1		ICANT
Occupat	ion ≫	 Public Sec Governme Profession Housewife 	tor Service ent Sector nal e	Retired Business Agriculturist Forex Dealer Student	 Private Sector Service Public Sector Service Government Sector Professional Housewife Others (please specified) 	Busin Agrie Fore Stud	ness culturist x Dealer ent	Private Se Public Sec Governme Professio Housewif Others (p	ctor Service ent Sector nal e	Retired Business Agriculturist Forex Dealer Student
Gross Annual Inco	ome »	 5-10 Lacs >25 Lacs- Networth in 	1 crore (Mandatory fo	□ 1-5 Lacs □ 10-25 Lacs □ >1 crore or Non-individual)	Below 1 Lac 5-10 Lacs >25 Lacs-1 crore Networth in	□ 1-5 □ 10-2 □ >1 c	25 Lacs rore	Below 1 I 5-10 Lacs >25 Lacs Networth in	s -1 crore n	□ 1-5 Lacs □ 10-25 Lacs □ >1 crore
				as on	₹ onM	/ Y Y	Y Y		м м /	as on
		(not older than	1 year)		(not older than 1 year)			(not older tha	n 1 year)	
Oth	iers »		Exposed Per	son xposed Person	Not Applicable Politically Exposed Pe Related to Politically		Person		/ Exposed Pe	erson Exposed Person
10. Foreign Acco	ount	Tax Compl	iance Act	(FATCA) & CRS	5 Details					Refer Sec. H
For Individ	uals	FIRST API	PLICANT (ind	luding Minor)	SECOND APPLICAN	T / GUAR	DIAN	Т	HIRD APPLI	CANT
Country of	Birth \gg									
Place of	Birth \gg									
Natior	nality »		ase specify)	U. S.	 Indian Others (Please specify) 	🗆 U. S.		Indian Others (Plea	aco crocifu)	U. S.
Type of address given at	: KRA »		l or Business	Residential Business	Residential or Busines		dential ness		or Business	Residential Business
Are you also a reside any other country(ies) fo				☐ Yes	□ No	Yes		□ No		☐ Yes
purpo		If yes, compl	lete section b	elow.						
Country of Tax Residen	cy 1≫									
Tax Identification Numl	ber1≫									
Identification Ty	/pe 1 ≫									
If TIN is not available pl tick the reason A, B o		Reason 🗌	A 🗌 B	C	Reason 🗌 A 🗌 B	C		Reason	Α Β	C

If TIN is not available please \gg tick the reason A, B or C *	Reason 🗌 A	□ B □ C	Reason	A B	C	Reason	□ A □ B	C
* Reason A: The country whe only if the authorities of the		lder is liable to pay tax does of tax residence do not requ						

Refer Sec. E & F

11. Nomination Deta	ails		Refer Sec. L
Mandatory for Individual(s) applying singly or jointly.	You can nominate up to 3 persons to receive the Units allott made to such Nominee(s) and Signature of the Nominee(s) a	ed to you in your folio in the unfortunate event o cknowledging receipt thereof, shall be a valid dis	f death of all unit holders. All payments and settlements charge by the AMC/ Mutual Fund/ Trustees.
singly of jointly.	Register nomination as below	I do not wish to nominate.	
Select any one 🤉			
1 st Nominee	Nominee Name		
	Relationship with Nominee		Date of Birth D D I M M I Y Y Y Y
	Address		City
	State	PIN	Country
	Guardian Name in case of Minor	Allocation (%)	Signature of Nominee / Guardian
2 nd Nominee	Nominee Name		
	Relationship with Nominee		Date of Birth D D I M M Y Y Y Y
	Address		City
	State	PIN	Country
	Guardian Name in case of Minor	Allocation (%)	Signature of Nominee / Guardian
3 rd Nominee	Nominee Name		
	Relationship with Nominee		Date of Birth
	Address		City
	State	PIN	Country
	Guardian Name in case of Minor	Allocation (%)	Signature of Nominee / Guardian
	1st Applicant Signature / Thumb Impression	2 nd Applicant Signature / Thumb Impression	3 rd Applicant Signature / Thumb Impression

12. Demat Account Details

Ensure that the	Fill these details only if you wish to have your units in Demat mode.	
sequence of names as mentioned in the application form	Depository participant Name	
application form matches with that of the account held with the Depository Participant. In case the details are found to be incorrect, Units will be allotted in physical mode.	Central Depository Securities Limited Target ID No.	National Securities Depository Limited DP ID No. I N Beneficiary Account No.

13. Declaration and Signatures

Re	fer	Sec.	Ν
NE		JEL.	1 1

Refer Sec. M

I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws. I / We hereby confirm and declare as under: I / We have read, understood and hereby agree to comply with the terms and conditions of the scheme related documents and apply for allotment of Units of the Scheme(s) of Tata Mutual Fund ('Fund') indicated in this application form.
 I/We am/are eligible Investor(s) as per the scheme related documents and am/are authorised to make this investment. The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of the purpose of the scheme related documents and appleters in before the investment.

(3)

Application form. I/We anylae eligible Investor(s) as per the scheme related documents and anylae authorised to make this investment. 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. The information given in / with this application form is true and correct and further agree to furnish such other further/additional information as may be required by the Tata Asset Management Limited (TAML)/ Fund and undertake to inform the AMC / Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished from time to time. That in the event, the above information and/or any part of it is/are found to be false/ untrue/misleading, I/We will be liable for the consequences arising therefrom. I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Mutual Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) et without any intimation/advice to me/us. I/We hereby authorize you to share the account statement of the folio with the distributor /broker / advisor on record. //We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries 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 Schemes of various Mutual Funds from Amongst which the Scheme is being (4) (5)

(6) (7)

(8) (9) (10)

(11) (12)

Date:

1st Applicant Signature /	2 nd Applicant Signature /	3 rd Applicant Signature /
Thumb Impression	Thumb Impression	Thumb Impression

5 simple steps to open your Investment Account

Step 1	Complete the relevant sections of this Application Form in English and In CAPITAL.
Step 2	Sign and date this Application Form.
Step 3	Enclose your Investment Cheque/DD drawn in favour of "Name of the scheme", dated, signed and crossed 'A/c Payee only.'
Step 4	Attach the relevant documents as per the list below.
Step 5	Submit your application form to the Nearest Collection Centre. List of the Centre available on our website www.tatamutualfund.com and on page nos. 99 to 104.

	Documents	Companies / Trusts / Societies/ Partnership Firms / LLP / FIIs*	FPI	NRI/ OCI/ PIO	Minor	Investments through Constituted Attorney
1.	Board/ Committee Resolution/ Authority Letter	✓				
2.	List of Authorised Signatories with Specimen Signature(s) @	✓	✓			✓
3.	Notarised Power of Attorney					✓
4.	Account Debit Certificate in case payment is made by DD from NRE / FCNR A/c. where applicable			~		✓
5.	PAN Proof	✓	✓	1	√*	✓
6.	KYC Acknowledgement Letter / Print out of KYC Compliance Status	✓	✓	✓	√*	✓
7.	Proof of Date of Birth				~	
8.	Proof of Relationship with Guardian				~	
9.	PIO / OCI Card (as applicable)			✓		
10.	Certificate of registration granted by Designated Depository Participant on behalf of SEBI		1			
11.	Ultimate Beneficial Owner	✓	✓			✓
12.	FATCA & CRS	\checkmark	✓	✓	✓	✓

@ Should be original or true copy certified by the Director / Trustee / Company Secretary / Authorised 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.

INSTRUCTIONS FOR FILLING UP THE APPLICATION FORM

A. General Instructions:

- Please read the Key Information Memorandum (KIM)/ Scheme Information Document(s) (SID) of the Scheme and Statement of Additional Information (SAI) and addenda issued from time to time (Scheme Documents) carefully before investing in the Scheme.
- The Application Form should be completed in ENGLISH and in BLOCK LETTERS only.
- iii. Please tick in the appropriate box for relevant options wherever applicable. Do not overwrite. For any correction / changes 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. The AMC reserves the right to reject the application forms, in case the investor(s) has/have not countersigned in every place where such corrections/overwriting has/have been made.
- iv. Investors/Unitholders already having a folio with the Fund should fill in folio number, section 1, section 4, section 5, section 6, section 9 and section 10 only. The personal and the Bank Account details as they feature in the existing folio would apply to this investment and would prevail over any conflicting information, if any, furnished in this form. In case the name of the Unit holder as provided in this application does not correspond with the name appearing in the existing folio, the application form may be rejected, at the discretion of the AMC/ Fund. New investors wishing to make SIP investment will need to complete and submit both the Application Form and the SIP Registration Form.
- v. Applications complete in all respects, may be submitted at the Official Points of Acceptance (OPAs) of Tata Mutual Fund (TMF, the Fund).
- vi. The Application form number, PAN and Name of the Applicant should be written by the Applicants on the reverse of the cheques and bank drafts accompanying the Application Form.
- vii. Copies of the supporting documents submitted should be accompanied by originals for verification. In case the original of any document is not produced for verification, Mutual Fund/ AMC reserves the right to seek attested copies of the supporting documents.
- viii. Non-individual investors (Corporate, Societies, Trusts, etc.) are required to submit specified documents such as bylaws, trust deed, board resolutions, Authorized Signatory List and other similar documents along with the subscription application. Units allotted to the non-individual investors are subject to receipt and confirmation of correctness of such statutory documents. If required document(s) provided by the non-individual investors are inaccurate, then the transactions are liable to be reversed with all

costs and consequences to the investor. It is the responsibility of the Non-individual investors to inform TAML /TMF about any change to the Authorized Signatory List or Board resolution.

- ix. Upon signing and submitting the Application Form and tendering payment it will be deemed that the investors have accepted, agreed to and shall comply with the terms and conditions detailed in the Scheme Documents.
- x. Applications incomplete in any respect are liable to be rejected. Tata Asset Management Limited (the AMC) / Tata Trustee Company Limited (Trustee) have absolute discretion to reject any such Application Forms.
- xi. Units will be allotted subject to realization of payment proceeds.
- xii. Despatch of Account Statement:
 - a. On acceptance of application, a confirmation specifying the number of Units allotted will be sent by way of e-mail and/ or SMS to the applicant's registered e-mail address and/or mobile number within five business days from NFO closure and the date of transaction for ongoing scheme. The unit balance(s) in the account statement is subject to realisation of Cheque accompanying the purchase request, PAN validation and KYC compliance.
 - b. Tata Mutual Fund shall send first account statement for a new folio separately with all details registered in the folio by way of a physical account statement and/or an e-mail to the investor's registered address/email address not later than five business days from the date of subscription.
 - c. Thereafter a Single Consolidated Account Statement (CAS) on basis of PAN (PAN of the first holder & pattern of holding, in case of multiple holding) will be dispatched to unitholders having Mutual Fund investments & holding Demat accounts by Depositories within ten days from the end of the month in which transaction (the word 'transaction' shall include all financial transactions in demat accounts/Mutual Fund folios of the investor) takes place. In case there is no transaction in any of the mutual fund folios & demat accounts then CAS with holding details will be sent to the Unitholders on half yearly basis.
 - d. In other cases, i.e. where unitholders having no Demat account & only MF units holding, Tata Mutual Fund shall continue to send the CAS as is being send presently within ten days from the end of the month in which financial transaction takes place & on half yearly basis in case there is no financial transaction in any of the mutual fund folios.
 - e. In case statements are presently being dispatched by e-mail either by the Fund or the Depository then CAS will be sent

ΤΛΤΛ	
MUTUAL FUND	

Debit Mandate Form NACH (One Time Mandate - OTM)

Date D D M M Y Y Y Y

Choose (*) Sponsor Bank Code Citica use any Utily Code Citica use any Offer a use any Utily Code Citica use any Citica use any Offer a use any With Bank SB-ARE SB-ARE SB-ARO Other BANDY Bank Arc No: Bank Neene & Bank Code FEC Mith Bank Bank Neene & Bank Code FEC Bitter and and the presented (default) DEBIT TYPE F Exad Amount S Maximum Amount Bitterence / Floin No. Enail Id Scheme / Plain reference No. All Schemes of Tata Mutual Fund Sole Y Y Y Y Nome as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank Records Name as in Bank	FUND		L.	JMRN	[/ tppilouble	for Lumpsu	Addit		Office			i itog	JISU	ations	1												
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