

# COMMON APPLICATION FORM



PLEASE FILL ALL FIELDS WITH BLACK BALL POINT, IN BLOCK LETTERS AND ALL FIELDS ARE MANDATORY

Investors must read the KIM, Instructions and Product Labeling on front page before completing this Form.

Application No: \_\_\_\_\_

1 DISTRIBUTOR INFORMATION (Refer Instruction No. 1)						FOR OFFICE USE ONLY	
Distributor ARN/ RIA	Sub-Agent Code/ Bank Branch Code	Sub Agent ARN Code	EUIN No.	CO Code	MO Code	Sales Code	Date/Time of Receipt
ARN-77875			E027739				

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

I/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.

Sole/1 <sup>st</sup> applicant/Guardian/ Authorised Signatory/POA	2 <sup>nd</sup> applicant/Authorised Signatory	3 <sup>rd</sup> applicant/Authorised Signatory
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2 TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction No. 1(a))	
In case the purchase / subscription amount is ₹ 10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/ subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.	<input type="checkbox"/> I confirm that I am a First time investor across Mutual Funds. <input type="checkbox"/> I confirm that I am an existing investor in Mutual Funds.

3 EXISTING UNIT HOLDER INFORMATION [Please fill in your Folio Number and proceed to Scheme and Payment Details] (Refer Instruction No. 2(a))	
Folio No.	_____

4 MODE OF HOLDING	
<input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor (Default)	

5 FIRST APPLICANT'S DETAILS (Refer Instruction No. 2(b))	
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> M/s	
Name (1 <sup>st</sup> )	_____
Date of Birth	<input type="checkbox"/> DDMMYY PAN _____ <input type="checkbox"/> KYC Proof Enclosed   Nationality _____ Country of Birth _____
Status of First/ Sole Applicant [Please tick (✓)]	<input type="checkbox"/> Individual <input type="checkbox"/> Non - Individual [For Non - individual - please attach FATCA, CRS & Ultimate Beneficial Ownership (UBO) Self Certification Form] (Refer Instruction No. 14 & 15) (Mandatory)
<input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI-Repatriation <input type="checkbox"/> NRI-Non Repatriation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust <input type="checkbox"/> HUF <input type="checkbox"/> AOP <input type="checkbox"/> PIO <input type="checkbox"/> Company <input type="checkbox"/> Fils <input type="checkbox"/> Minor through guardian <input type="checkbox"/> BOI <input type="checkbox"/> OCI <input type="checkbox"/> Body Corporate <input type="checkbox"/> LLP <input type="checkbox"/> Society / Club <input type="checkbox"/> Foreign National Resident in India <input type="checkbox"/> FPI <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Non Profit Organisation <input type="checkbox"/> Others _____ (please specify)	
For Investments "On behalf of Minor"	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Other   Relationship with minor <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Legal Guardian
NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON - DESIGNATION (in case of non-individual Investors)/ POA HOLDER DETAILS	
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> M/s	_____
Designation	PAN _____ <input type="checkbox"/> KYC Proof Enclosed   Mobile +91 _____

Please note that your address details will be updated as per your KYC record with KRA.

Mailing address	_____
City	_____
State	_____
Pine Code	_____
Email ID	_____
Mobile	+91 _____
Tel.	_____

SECOND APPLICANT'S DETAILS (Refer Instruction No. 2(c))	
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.   Nationality _____ Country of Birth _____ Mobile +91 _____	
Name (2 <sup>nd</sup> )	_____
PAN	<input type="checkbox"/> KYC Proof Enclosed   Email ID _____

THIRD APPLICANT'S DETAILS	
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.   Nationality _____ Country of Birth _____ Mobile +91 _____	
Name (3 <sup>rd</sup> )	_____
PAN	<input type="checkbox"/> KYC Proof Enclosed   Email ID _____

6 ADDITIONAL KYC DETAILS (Mandatory) (Refer Instruction No. 2(c))				
Occupation details for	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	Guardian
Private Sector Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Sector Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Government Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agriculturist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retired	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housewife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proprietorship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others (Please specify)	_____	_____	_____	_____
Non-Individual Investors involved/ providing any of the mentioned services	<input type="checkbox"/> Foreign Exchange / Money Changer Services <input type="checkbox"/> Gaming / Gambling / Lottery / Casino Services <input type="checkbox"/> Money Lending / Pawning <input type="checkbox"/> None of the above			

Politically Exposed Person (PEP) details:	Is a PEP	Related to PEP	Not Applicable
1 <sup>st</sup> Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 <sup>nd</sup> Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 <sup>rd</sup> Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guardian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Authorised Signatories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promoters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Karta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whole-time Directors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trustee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## ACKNOWLEDGEMENT SLIP (TO BE FILLED IN BY THE SOLE/FIRST APPLICANT)

Application No: \_\_\_\_\_

Received from: Mr. / Ms. / M/s \_\_\_\_\_ an application for allotment of units under Scheme \_\_\_\_\_, Plan \_\_\_\_\_, Option \_\_\_\_\_  
 Cheque/DD No \_\_\_\_\_ Dated \_\_\_\_/\_\_\_\_/\_\_\_\_ Amount (₹) \_\_\_\_\_ Drawn on Bank and Branch \_\_\_\_\_.

Please note: All unit allotments are subject to realization of cheques/Demand Drafts and subject to the terms and conditions of relevant Scheme Information Document and Statement of Additional Information.

Stamp, Signature & Date

**6 ADDITIONAL KYC DETAILS Mandatory (Contd...)** (Refer Instruction No. 2(c))

Gross Annual Income Range (in Rs.)	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	Guardian	Gross Annual Income Range (in Rs.)	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	Guardian
Below 1 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10-25 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-5 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25 lac- 1 cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-10 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	> 1 cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year) \_\_\_\_\_

as on  

DD	MM	YYYY							

**EMAIL COMMUNICATION INFORMATION** (Refer Instruction No. 7)

I/wish to receive the following document(s) physically in lieu of Email.   
 Account Statement   
 News Letter   
 Annual Report   
 Other Statutory Information

**7 FATCA & CRS INFORMATION (for Individual including Sole Proprietor) (Self Certification)** (Refer Instruction No. 14)

The below information is required for all applicant(s)/ guardian  
**Address Type:**  Residential or Business   
 Residential   
 Business   
 Registered Office (for address mentioned in form/existing address appearing in Folio)  
**Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India?**   
 Yes   
 No

If Yes, please provide the following information [mandatory]

Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

Category	First Applicant (including Minor)	Second Applicant/ Guardian	Third Applicant
Place/ City of Birth			
Country of Birth			
Country of Tax Residency			
Tax Payer Ref. ID No ^			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 3			
Tax Payer Ref. ID No. 3			
Identification Type [TIN or other, please specify]			

^ In case Tax Identification Number is not available, kindly provide its functional equivalent.

**8 BANK ACCOUNT DETAILS - Mandatory (Payout Bank - If left blank, application will be rejected)** (Refer Instruction No. 3)

Name of the Bank																													
Account Number																A/C Type (Please ✓)	<input type="checkbox"/> Savings	<input type="checkbox"/> Current	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> FCNR	<input type="checkbox"/> Others							
Branch Address																													
City																State								PIN Code					
MICR Code										(Please enter the 9 digit number that appears after your cheque number)																Cancelled copy of a cheque required in case of investments not through cheque			
IFSC Code (RTGS/NEFT)												(11 Character code appearing on your cheque leaf)																	

**9 SCHEME AND PAYMENT DETAILS (Payment through Cash/Non-MICR Cheques/Outstation Cheques not accepted)** (Refer Instruction No.4 & 8)

Scheme Name																									
Plan																Option									
Sub Option																Dividend Frequency									
Investment Amount (₹)											DD Charges if any (₹)						Net Amount (₹)								
Cheque/ DD No.						Drawn Bank											Branch/City								
Account Type*	<input type="checkbox"/> S/B	<input type="checkbox"/> NRE*	<input type="checkbox"/> Current	<input type="checkbox"/> NRO	<input type="checkbox"/> FCNR*	*Kindly provide photocopy of the payment Instrument or Foreign Inward remittance Certificate (FIRC) evidencing source of funds																			
Please (✓)	<input type="checkbox"/> RTGS	<input type="checkbox"/> Fund Transfer	<input type="checkbox"/> Letter dated	D	D	M	M	Y	Y	Bank A/c No.															

**FOR MORE INFORMATION**

Call us at (Toll Free)  
**1800-103-2263 & 1800-266-2676**

Alternate Number  
**020-4011 2300 & 020-6685 4100**

Email us at  
**service@boiaxa-im.com**

Website  
**www.boiaxa-im.com**

**REDEMPTION / DIVIDEND REMITTANCE**

(Refer Instruction No. 5)

Electronic Payment (It is the responsibility of the Investor to ensure the correctness of the IFSC code/ MICR code for Electronic Payout at recipient/destination branch corresponding to the Bank details.)  
 Cheque Payment

**10 DEMAT ACCOUNT DETAILS – (Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with the Depository Participant). (If Demat Account details are provided below units will be allotted by default in electronic mode only) (Refer Instruction No. 10)**

National Securities Depository Limited (NSDL)	DP Name																		
	DP ID No.	I	N											Beneficiary Account No.					
Central Depository Services (India) Limited (CDSL)	DP Name																		
	Target ID No.																		

**11 NOMINATION DETAILS for Individuals [Minor / HUF / POA Holder / Non Individuals cannot Nominate] (Refer Instruction No. 6)**

[Please (✓) and sign]  I/We do not wish to Nominate

Sole/1<sup>st</sup> Applicant/Guardian

2<sup>nd</sup> Applicant

3<sup>rd</sup> Applicant

**OR**

I/We wish to nominate as under:

Name and Address of Nominee(s)	Relationship with Applicant	Date of Birth	Name and Address of Guardian	Signature of Nominee (Optional)/ Guardian of Nominee (Mandatory)	Proportion (%) in which the units will be shared by each Nominee (should aggregate to 100%)
		(to be furnished in case the Nominee is a minor)			
Nominee 1					
Nominee 2					
Nominee 3					

**12 DECLARATION**

I/We have read and understood the contents of the Scheme Information Document and Statement of Additional Information of BOI AXA Mutual Fund including the section on Who cannot invest and Prevention of Money Laundering. I/We hereby apply for Allotment/Purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. I/We hereby declare that I/We am /are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We hereby authorise BOI AXA Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/BOI AXA Mutual Fund and /or Distributor /Broker / Investment Advisor. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct, complete and truly stated.

I/We are aware that the information provided/collected in this application form is necessary in relation to operation of my/our investment account. I/We hereby give consent for sharing my/our data/information with any third party as may be required by BOI AXA Mutual Fund for the purpose of providing services to me/us or for opening, continuing and operating my/our investment account/folio.

I/ We confirm that the ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him by the different competing 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 FUND/ AMC/ ITS DISTRIBUTOR FOR THIS INVESTMENT.

**Applicable to NRI only:** I/We confirm that I am/we are Non-Resident Indian/Person of Indian Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/NRO/FCNR Account. I/We undertake that all additional purchases made under this Folio will also be from funds received from abroad through approved banking channels or from funds in my/our NRE/NRO/FCNR Account.

**CERTIFICATION:** I/ We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I/ We also confirm that I/ We have read and understood the FATCA & CRS Terms and Conditions above and hereby accept the same.

**SIGN HERE**

(Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft / Payment Instrument.)

<b>SIGNATURE(S)</b>	First/ Sole Applicant/ Guardian/ PoA/ Authorised Signatory	
	Second Applicant/ Authorised Signatory	
	Third Applicant/ Authorised Signatory	

**CHECKLIST (Please submit the following documents with your application (where applicable). All documents should be original/ true copies Certified by a Director/Trustee/Company Secretary/Authorized signatory/ Notary Public).**

Document Checklist	Individual	Company	Society	Partnership Firms	Investment through POA	Trusts	NRI	FII	HUF	AOP & BOI	Demat Holder
PAN Card [Micro investments, Investor(s) from Sikkim, government officials specifically exempt] & KYC Acknowledgement	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Resolution/ Authorisation to invest		✓	✓	✓		✓		✓		✓	
List of authorised signatories with specimen signatures		✓	✓	✓	✓	✓		✓		✓	
Memorandum & Articles of Association		✓									
Trust Deed						✓					
Bye-laws			✓								
Partnership Deed				✓							
Notorised POA (signed by investor and POA Holder)					✓						
Bank Account Proof (Latest available)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Demat Statement (Latest available)											✓
Client Master Statement (Latest available)											✓
HUF Deed									✓		
Overseas Auditor's Certificate & SEBI Regn. Certificate								✓			
UBO		✓	✓	✓		✓		✓	✓	✓	
FATCA & CRS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

## Investor Service Centres

### FOR ONGOING TRANSACTION

#### BOI AXA Investment Managers' Branches - Investor Service Centers (ISC)

• **Ahmedabad** - Shop No.- 405, 4th Floor, Zodiac Plaza, Plot no: - 229, Village Kochrab, H. L. College Road, Navrangpura, Ahmedabad - 380 009. • **Bangalore** - 957, Regus Business Centre, Bangalore Pvt. Ltd., Level 9, Raheja Towers, 26 - 27, Mahatma Gandhi Road, Bangalore - 560 001. • **Bhopal** - F. F. 16, Part B, Mansarovar Complex, Near Habibganj Railway Station, Bhopal - 462 016. • **Chandigarh** - 205, Megabyte Business Centre, SCO-333-334, 1st Floor, Sec-35B Chandigarh - 160 022. • **Chennai** - Cabin No. 203, Apeejay Business Center No: 39/12, Haddows Road, Nungambakkam, Chennai - 600 034. • **Hyderabad** - Cabin No. 23, Apeejay Business Centre, Tresorie, The Park, 22 Rajbhavan Road, Somajiguda, Hyderabad - 500 082. • **Jaipur** - Office no.154, 1st Floor, Ganpati Plaza, M I Road, Jaipur - 302 001. • **Kolkata** - Cabin 06, Block - A, 8th Floor, Apeejay House, 15 Park Street, Kolkata - 700 016. • **Lucknow** - Office No-504, 5th Floor, Sriram Tower, 13 Ashok Marg, Hazratganj, Lucknow - 226 001. • **Mumbai** - B/204, Tower 1, Peninsula Corporate Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai - 400 013. • **New Delhi** - Room No. 610, Avanta Business Center, 4th Floor, Statesman House, Barakhamba Road, Connaught Place, New Delhi - 110 001. • **Pune** - Apeejay Business Centre, 1st Floor, Pride House, S.No. 108/7, Shivajinagar, University Road, Pune - 411 016. • **Vadodara** - 118, 1st Floor, Siddharth Complex, R C Dutt Road, Alkapuri, Vadodara - 390 005.

#### Kavya Computershare Private Limited Locations - Investor Service Centers (ISC)

• **Agra** - F-1, 1st Floor, Deepak Wasan Plaza, Above HDFC Bank, Sanjay Place, Agra - 282 002. • **Ahmedabad**: 201, Shail Building, Opp: Madhusudhan House, Nr. Navrangpura Telephone Exchange; Navrangpura Ahmedabad - 380 006. • **Allahabad**: Rsa Towers, 2nd Floor, Above Sony TV Showroom, 57, S P Marg, Civil Lines, Allahabad - 211001. • **Amritsar**: 72-A, Taylor'S Road, Aga Heritage Gandhi Ground, Amritsar - 143 001. • **Anand**: B/42, Vaibhav Commercial Center, Nr TVS Down Town Show Room, Grid Char Rasta, Anand - 388 001. • **Asansol**: 114 /71, G.T. Road, Near Sony Centre, Bhanga Pachil, Asansol - 713 303. • **Bangalore**: 59, 'Skanda' Puttanna Road, Basavanagudi, Bangalore - 560 004. • **Belgaum**: CTS No 3939/ A2 A1, Above Raymonds Show Room, Beside Harsha Appliances, Club Road, Belgaum - 590 001. • **Bhagalpur**: 2nd Floor, Chandralok Complex, Ghantaghar, Radha Rani Sinha Road, Bhagalpur - 812 001. • **Bhopal**: Kay Kay Business Centre, 133, Zone I, M P Nagar, Bhopal - 462 011. • **Bhubaneswar**: 2nd & 3rd Floor, Janardan, House, A 181, Saheed Nagar, Bhubaneswar - 751 007. • **Bokaro**: B-1, 1st Floor, City Centre, Sector- 4, Near Sona Chandi-Jewellers, Bokaro - 827 004. • **Borivali**: A-1, Himanshu Building, Sodawala Cross Lane Near Chamunda Circle, Borivali (West), Mumbai - 400 092. • **Chandigarh**: SCO-2423-2424 1ST Floor, Above TVS Showroom, Sec 22C Chandigarh - 160 022. • **Chennai**: Flat No F11, First Floor, Akshya Plaza.(Erstwhile Harris Road), Opp Chief City Metropolitan Court, #108, Adhithanar Salai, Egmore, Chennai - 600 002. • **Cochin**: Building Nos.39 Ali Arcade, 1st floor, Near Atlantis Junction, Kizhavana Road, Panampilly Nagar, Cochin - 682 036. Ernakulum District. • **Coimbatore**: 3rd Floor, Jaya Enclave, 1056-1057, Avinashi Road, Coimbatore - 641 018. • **Dehradun**: Kaulagarh Road, Near Sirmour Marg, Above Reliance Webworld, Dehradun - 248 001. • **Dhanbad**: 208, New Market, 2nd Floor, Katras Road, Bank More, Dhanbad - 826 001. • **Gandhinagar**: Plot No. - 945/2, Sector - 7/C, Gandhinagar - 382 007. • **Ghaziabad**: 1st Floor, C-7, Lohia Nagar, Ghaziabad - 201 001. • **Gorakhpur**: Above V.I.P. House, Ajdacent A.D. Girls Inter College, Bank Road Gorakhpur - 273 001. • **Guwahati**: 1st Floor, Bajrangbali Building, Near Bora Service Station, GS Road,

Guwahati - 781 007. • **Gwalior**: 2nd Floor-Rajeev Plaza, Jayendra Ganj, Lashkar, Gwalior, M.P.- 474 009. • **Hubli**: CTS 483/A1/A2, Gr floor, Sri Ram Plaza, Club Road, Behind Kotak Mahindra Bank, Hubli - 580 023. • **Hyderabad**: 8-2-596 Karvy Plaza, Avenue 4, Street No.1, Banjara Hills, Hyderabad - 500 034. • **Indore**: 19/1, New Palasia, Balaji Corporate-203, 204 & 205, 2nd Floor, Above ICICI Bank, Near Curewell Hospital, Janjeerwala Square, Indore, Madhya Pradesh - 452 001. • **Jabalpur**: 43, Naya Bazar, Opposite shyam talkies Jabalpur (M.P.) 482 001. • **Jaipur**: S-16 A, 3rd Floor Land Mark, Opposite Jaipur Club Mahavir Marg, C- Scheme Jaipur - 302 001. • **Jalandhar**: 1st Floor, Shanti Towers, SCO No. 37, PUDA Complex, Opposite Tehsil Complex, Jalandhar - 144001. • **Jamshedpur**: 2nd Floor, R R Square, SB Shop Area, Near Reliance Foot Print & Hotel - BS Park Plaza, Main Road, Bistpur, Jamshedpur 831001. • **Jodhpur**: 203, Modi Arcade; Chupasni Road, Jodhpur - 342 001. • **Kanpur**: 15/46, Ground Floor, Opp: Muir Mills, Civil Lines, Kanpur - 208 001. • **Kolhapur**: 605/1/4 E Ward, Near Sultane Chambers, Shahupuri 2nd Lane Kolhapur - 416 001. • **Kolkata**: Apeejay House (Beside Park Hotel), 15 Park Street, C Block, 3rd Floor, Kolkata - 700 016. • **Lucknow**: 1st Floor, A.A. Complex, Thaper House, 5 Park Road, Hazratganj, Lucknow - 226 001. • **Ludhiana**: SCO - 136, First Floor Above Airtel Show Room, Feroze Gandhi Market, Ludhiana - 141 001. • **Madurai**: Rakesh Towers, 30-C, Bye Pass Road Ist Floor, Opp Nagappa Motors, Madurai - 625 010. • **Moradabad**: Om Arcade, Parker Road, Above Syndicate Bank, Chowk Tari Khana, Moradabad - 244001. • **Mumbai**: Office number: 01/04 24/B, Raja Bahadur Compound Ambalal Doshi Marg, Behind Bombay Stock Exchange, Fort Mumbai - 400 001. • **Muzaffarpur**: 1st Floor, Shukla Complex, Near ICICI Bank, Civil Court Branch, Company Bagh, Muzaffarpur - 842 001. • **Nagpur**: Plot No.2/1, House no. 102/1, Mangaldeep Apartment, Mata Mandir Road, Opp. Khandelwal Jewellers, Dharampath, Nagpur - 440 010. • **Nasik**: S-12, Second Floor, Suyojit Sankul, Sharanpur Road Nasik - 422 002. • **New Delhi**: 305, 3rd Floor New Delhi House, Bara Khamba Road Connaught Place New Delhi - 110 001. • **Noida**: 307 Jaipuria Plaza; D 68 A, 2nd Floor Opp Delhi Public School, Sector 26 Noida - 201 301. • **Panipat**: 1st Floor, Krishna Tower Above Amertex, G.T. Road, Panipat - 132 103. • **Panjim**: Flat No.1-A, H. No. 13/70, Timotio Bldg, Heliodoro Salgado Road, Next to Navhind Bhavan (Market Area) Panjim - 403 001. • **Patna**: 3A, 3rd Floor, Anand Tower, Beside Chankya Cinema Hall; Exhibition Road, Patna - 800 001. • **Pune**: Mozaic Bldg, CTS No.1216/1, Final Plot No.576/1 TP, Scheme No.1, F C Road, Bhamburda, Shivaji Nagar, Pune - 411 004. • **Raipur**: Room No. TF 31, 3 Rd Floor, Millennium Plaza Behind Indian Coffee House, G E Road, Raipur - 492 001. • **Rajkot**: 104, Siddhi Vinayak Complex Dr Yagnik Road, Opp Ramkrishna Ashram Rajkot - 360 001. • **Ranchi**: Room No. 307, 3Rd Floor, Commerce Towers, Beside Mahabir Towers, Main Road, Ranchi - 834 001. • **Shillong**: Mani Bhawan, Lower Thana Road, Police Bazar, Shillong - 793 001. • **Siliguri**: Nanak Complex, Near Church Road, Sevoke Road, Siliguri - 734 001. • **Solapur**: Block No.06, Vaman Nagar, Opp. D-Mart, Jule Solapur, Solapur, Maharashtra - 413004. • **Surat**: G-6 Empire State Building, Near Parag House, Udhna Darwaja Ring Road Surat - 395 002. • **Thane**: Yashwant Tower, Ram Maruti Road, Opp. Pooja Hotel, Naupada, Thane, Mumbai - 400 602. • **Udaipur**: 201-202, Madhav Chambers, Opp G P O, Chetak Circle, Udaipur - 313001. • **Ujjain**: 101, Aastha Tower, 13/1, Dhanwantri Marg, Free Gunj Ujjain - 456 010. • **Vadodara**: 203, Corner point, Jetalpur Road, Vadodara - 390 007. • **Varanasi**: D-64/132, KA 1st Floor, Anant Complex, Sagra, Varanasi - 221 010. • **Vijayawada**: 39-10-7, Opposite Municipal Water Tank, Labbipet, Vijayawada - 520 010. • **Vile Parle**: 104, Sangam Arcade, V P Road, Opposite Railway Station, Above Axis Bank ATM, Vile Parle (west), Mumbai - 400 056. • **Visakhapatnam**: Door No: 48-8-7, Dwaraka Dimond, Ground Floor, Srinagar, Visakhapatnam - 530016.

AMC Website: [www.boiaxa-im.com](http://www.boiaxa-im.com) is also an Investor Service Centre (for online transactions) for individual investors only.

Note:

- Investors desiring to purchase/ redeem Units in the Schemes through the Stock Exchange Facility may do so through Eligible Stock Brokers. Eligible Stock Brokers are considered as Official Points of Acceptance for transactions through Stock Exchange Facility.
- Investors who are holding Units in Demat mode may transact only through the Stock Exchange Facility. Further, such Unit holders must submit their nonfinancial requests such as change in bank mandate, address, etc only to their Depository Participants.

# FOR NON-INDIVIDUALS - SUPPLEMENTARY KNOW YOUR CLIENT (KYC), FATCA, CRS & ULTIMATE BENEFICIAL OWNERSHIP (UBO) SELF CERTIFICATION FORM



Name of the entity

Type of address given at KRA  Residential or Business  Residential  Business  Registered Office  
 \*Address of tax residence would be taken as available in KRA database. In case of any change, please approach KRA & notify the changes\*

Folio Number  /  /

PAN  Date of incorporation

City of incorporation  Country of incorporation

Entity Constitution Type (Please tick as appropriate)  Partnership Firm  HUF  Private Limited Company  Public Limited Company  Society  AOP/BOI  Trust  Liquidator  
 Limited Liability Partnership  Artificial Juridical Person  Others  specify

**Please tick the applicable tax resident declaration:**

1. Is "Entity" a tax resident of any country other than India  Yes  No (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

Country	Tax Identification Number*	Identification Type (TIN or Other, please specify)

\*In case Tax Identification Number is not available, kindly provide its functional equivalent\$.  
 In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here

**ADDITIONAL KYC INFORMATION**

Gross Annual Income (Rs.)  Below 1 Lac  1 - 5 Lacs  5 - 10 Lacs  10 - 25 Lacs  >25 Lacs - 1 Crore  >1 Crore

OR

Net-worth (Mandatory for Non-Individuals) ₹  as on           (Not older than 1 year)

Politically Exposed Person (PEP) Status\* (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)  PEP  Related to PEP  Not Applicable

Is the entity involved in any of the mentioned services:  Foreign exchange/ Money changer  Gaming/ Gambling/ Lottery (Casinos, betting syndicates)  
 Money lending/ Pawning  Not applicable

\*PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

**FATCA & CRS Declaration** (Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

**PART A** (to be filled by Financial Institutions or Direct Reporting NFEs)

We are a, Financial institution <sup>6</sup> <input type="checkbox"/>	GIIN <input type="text"/>
	<b>Note:</b> If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below
OR	Name of sponsoring entity <input type="text"/>
Direct reporting NFE <sup>7</sup> <input type="checkbox"/> (please tick as appropriate)	<input type="text"/>
GIIN not available (please tick as applicable) If the entity is a financial institution,	<input type="checkbox"/> Applied for <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category <sup>10</sup> <input type="text"/> <input type="text"/> <input type="checkbox"/> Not obtained - Non-participating FI

**PART B** (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")

1	Is the Entity a publicly traded company <sup>1</sup> (that is, a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange <input type="text"/>
2	Is the Entity a related entity <sup>2</sup> of a publicly traded company (a company whose shares are regularly traded on an established securities market)	Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company <input type="text"/> Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company <b>or</b> <input type="checkbox"/> Controlled by a Listed Company Name of stock exchange <input type="text"/>
3	Is the Entity an active <sup>3</sup> NFE	Yes <input type="checkbox"/> Nature of Business <input type="text"/> Please specify the sub-category of Active NFE <input type="text"/> <input type="text"/> (Mention code-refer 2c of Part D)
4	Is the Entity a passive <sup>4</sup> NFE	Yes <input type="checkbox"/> Nature of Business <input type="text"/>

<sup>1</sup> Refer 2a of Part C | <sup>2</sup> Refer 2b of Part C | <sup>3</sup> Refer 2c of Part C | <sup>4</sup> Refer 3(ii) of Part C | <sup>6</sup> Refer 1 of Part C | <sup>7</sup> Refer 3(vii) of Part C | <sup>10</sup> Refer 1A of Part C



# SIP SHIELD AUTO DEBIT/ NACH FACILITY : REGISTRATION CUM MANDATE



INVESTORS SUBSCRIBING TO THE SCHEME THROUGH SIP AUTO DEBIT FACILITY TO COMPLETE THIS FORM COMPULSORILY ALONGWITH COMMON SIP SHIELD FORM

Application should be submitted atleast 30 days before processing of Monthly SIP SHIELD  
For terms & conditions refer overleaf

Application No:

**1 INVESTOR DETAILS** (Please refer Point No. 10 for Micro SIP)

Folio No. / Application No.																							
Name of 1st Applicant																							
Name of 2nd Applicant																							
Name of 3rd Applicant																							

**2 SIP DETAILS**

Scheme Name																							
Plan										Option													
Sub Option										Dividend Frequency													

Please refer the scheme specific SID and SAI to know the Plan, Option & Sub-Options related information.

Frequency (Please ✓)	<input checked="" type="checkbox"/> Monthly	SIP Date	<input type="checkbox"/> 1st	<input type="checkbox"/> 7th*	<input type="checkbox"/> 10th	<input type="checkbox"/> 15th	<input type="checkbox"/> 20th	<input type="checkbox"/> 25th	#Default date is 7th														
Instalment Amount (In figures)										Drawn on Bank /Branch Name													
Mandatory Enclosures (Please ✓)	<input checked="" type="checkbox"/> Monthly		If the first instalment is not by cheque				<input type="checkbox"/> Blank Cancelled Cheque																
Enrolment Period	From	D	D	M	M	Y	Y	Y	Y	To	D	D	M	M	Y	Y	Y	Y	Enrolment period has to be for a minimum period of 3 years and can be extended upto age of 55 years of the first applicant.				

**DECLARATION & SIGNATURE:** I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above to debit my/our account directly or through participation in Auto Debit/ NACH Facility. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I / We would not hold the user institution responsible. I / We will also inform AMC, about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

I/ We confirm that the ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

**Applicable to NRI only:** I/We confirm that I am/we are Non-Resident Indian/Person of Indian Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/NRO/FCNR Account. I/We undertake that all SIP Installments made under this Folio will also be from funds received from abroad through approved banking channels or from funds in my/our NRE/ NRO/FCNR Account. We are not citizens/ residents of USA or Canada.

SIGNATURE (S) (as in our records)	1st Applicant	2nd Applicant	3rd Applicant

**DEBIT MANDATE FORM NACH / DIRECT DEBIT**

BOI AXA Investment Managers

Tick

CREATE

MODIFY

CANCEL

UMRN FOR OFFICE USE ONLY

Date DDMMYYYY

Sponsor Bank Code [For Office use only] Utility Code [For Office use only]

I/We hereby authorize BOI AXA Mutual Fund to debit (tick ✓) SB/CA/CC/SB-NRE/SB-NRO/Other

Bank a/c number

with Bank [Name of customers bank] IFSC [ ] or MICR [ ]

an amount of Rupees [Amount in words] ₹ [ ]

FREQUENCY  Mthly  Qty  H -Yrly  Yrly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

Reference 1 [ ] Phone No. [ ]

Reference 2 [ ] Email ID [ ]

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank

PERIOD	From	DDMMYYYY	Signature Primary Account holder	Signature of Account holder	Signature of Account holder
	To	DDMMYYYY			
	Or	<input type="checkbox"/> Until Cancelled	1. Name as in bank records	2. Name as in bank records	3. Name as in bank records

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/Corporate to debit my account, based on the instruction as agreed and signed by me.
- I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate of the bank where I have authorized the debit.

**ACKNOWLEDGMENT SLIP (To be filled by the investor)**

Folio No.						Investor Name					
Scheme Name	(Scheme Name)										
Plan						Option					
SIP Period From	DDMMYYYY	to	DDMMYYYY	<input type="checkbox"/> Till further Notice							

Stamp & Signature