Common Application Form (For Lumpsum)



Please read product labeling details available on cover page and the instructions before filling up the Application Form. Tick (🗸) whichever is applicable, strike out whichever is not required.

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Add convenience to your life with our value added service



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Simply send **S	SMS to 9212 132763 to avail the below facilities
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NAV	SMS NAV <space> last 6 digits of Folio No.</space>
Statement thru Email	SMS ESOA <space> last 6 digits of Folio No.</space>
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1800-2670-189 (Toll Free)

9 am to 6 pm - Monday to saturday on all Business Days
9 am to 2 pm on 2nd & 4th
Saturdays of the Month
www.barodamf.com

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NOMINATION DETAILS (To be filled in by individuals singly or jointly. Mandatory only for Investors who opt to hold units in Non-Demat Form) Refer Instruction VII.

Name and Address of the Nominee(s)	Relationship between Nominee & Investor	Date of Birth	Name & Address of Guardian (to be furnished in case the nominee is minor)	PAN	Signature of Guardian / Nominee	Proportion (%) by which the units will be shared by each nominee (% to aggregate to 100%)
Nominee 1		DDMMYYYY				
Nominee 2		DDMMYYYY				
Nominee 3		DDMMYYYY				

DECLARATION AND SIGNATURES

I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the Scheme. I/We hereby declare that I/We am/are authorized 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, rule, regulation, notification or direction or any other applicable laws issued by the Government of India or any regulatory or statutory authority. I/We have understood the details of the Scheme and in the event "Know Your Customer" process is not completed by me/us to the satisfaction of the AMC, I/We hereby authorize the AMC to redeem the funds invested in the Scheme, in favour of the first applicant at the applicable NAV prevailing on the date of such redemption and to undertake such other action with such funds as may be required by law. I/We hereby authorise Baroda Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/Baroda Mutual Fund' bank(s) and/or Distributor/Broker/Investment Adviser.

The ARN holder has disclosed to me/us all the commission (in the form of trail commission or any other mode), payable to him/it for the different competing schemes of various mutual funds from amongst which the Scheme is being recommended to me/us. 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. If I/We have not ticked for not appointing a nominee, then the Application Form shall be processed as without nomination.

Applicable for "Execution Only" transaction: I/We, the undersigned, hereby acknowledge and confirm that the above transaction is "Execution Only" as explained vide SEBI circular no. CIR //MD/DF/13/2011 dated 22 August 2011. This investment is being made notwithstanding the advice of the appropriateness/inappropriateness of the same and the distributor has not charged any advisory fees on this transaction.

Applicable for NRIs: I/We confirm that I am/we are Non-Residents of Indian nationality/origin but not residents of the United States and Canada and I/we hereby confirm that I/we have remitted funds from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines.

Applicable for FATCA & CRS:

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 below and hereby accept the same.

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

9 am to 6 pm - Monday to Saturday on all Business Days 9 am to 2 pm on 2nd & 4th Saturdays of the Month

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Multiple SIP Application Forms



Please read product labeling details available on cover page and the instructions before filling up the Application Form. Tick (\checkmark) whichever is applicable, strike out whichever is not required.

DISTRIBUTOR INF	ORMATION	(Only empanelled	Distributo	rs / Broke	ers will be	permitte	ed to distrib	ute Unit	s of Ba	aroda	Mutual I	Fund)									
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I/We hereby confirm that the person of the above distributor/s																					
1st Applicant Signature / Guardian Sign			IONS T				SUTOR			lease	refer				nature / P	OA Sigr	nature /	Thumb) Impre	ssion	
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SECOND APPLICANT'S Na	ime																				
Mr Ms																					
THIRD APPLICANT'S Nar	ne																				
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Name of the Guardian (in case	se First / Sole Ap	plicant is minor)	/ Contac	t Persor	n - Desig	nation	/ PoA Hol	der (In	case	of No	n-Indiv	idual lı	nvesto	rs)							
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Overseas Address (Mandato	ry in case of NRI/ FPIs applicant, in addition to mailing a	dress)	
State	Country		Zip Code
Information (*Mandatory)	First Applicant**	Second Applicant	Third Applicant
Date of Birth	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y
PAN/PEKRN*			
Aadhaar			
Mobile No.*			
KIN No (CKYC)			
**Incase Minor / POA			
	Guardian (In case of Mi	or)	POA Holder
Name			
Relationship			
Date of Birth of Minor	D D M M Y Y Y Y		
PAN/PEKRN			
Aadhaar			
Mobile No.*			
KIN Nos. (CKYC)			
Information to Investor's	said data is mandatory as per applicable laws/rul investors has been deferred till further notice. Post obtaining the Aadhaar number, we shall auth	ber including demographic information is to comply with a s/regulations. The mandatory requirement to submit the A enticate the same in accordance with the Aadhaar Act, 2016 ich shall be used only to comply with applicable laws / rules	adhaar details/ documents by existing as well as new
Consent	validating/authenticating and (ii) updating my/or I/We hereby provide my/our consent for sha	dance with Aadhaar Act, 2016 and regulations made the Aadhaar number(s) in accordance with the Aadhaar Act, ing/disclosing my Aadhaar number(s) including demoletheir Registrar and Transfer Agents (RTA) for the purpose	2016 (and regulations made thereunder) and PMLA. ographic information with the asset management
Signature Politically Exposed Person			
(PEP)	Self Related Not Applicable	Self Related Not Applicable	Self Related Not Applicable
Occupation of the Applicant	Student Business Professional Ret Housewife Builder Sports Defe Public Co.(Listed) Public Co.(Unlis Agriculture Forex Dealer Gov. Sen Public Sector Service Pvt. Sector Sen Entertainment Other	ce Housewife Builder Sports Defence ed) Public Co.(Listed) Public Co.(Unlisted) ce Agriculture Forex Dealer Gov. Service ce Public Sector Service Pvt. Sector Service Entertainment Other	Student Business Professional Retired Housewife Builder Sports Defence Public Co.(Listed) Public Co.(Unlisted) Agriculture Forex Dealer Gov. Service Public Sector Service Pvt. Sector Service Entertainment Other
Gross Annual Income	☐ <1L ☐ 1-5L ☐ 5-10 L ☐ 10-25 L ☐ 25 L-1 Cr ☐ > 1 Cr and so	□ <1L □ 1-5L □ 5-10 L on □ 10-25 L □ 25 L-1 Cr □ > 1 Cr and so on	□ <1L □ 1-5L □ 5-10 L □ 10-25 L □ 25 L-1 Cr □ > 1 Cr and so on
		OR	
Net-worth* in ₹ (Lacs) *Should not be older than one year (Mandatory for Non- Individual)			
Networth as of date	D D M M Y Y Y Y		
Non-Individuals (Refer Instruction IV)**Please attach PAN proo		Gaming/ Gambling/ Lottery (casinos, betting syndicates)	Yes No • Money Lending/ Pawning Yes No
(Refer Instruction IV) "Please attach PAN proo			·····>≰·····

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SMS to 9212 132763 to avail the below facilities
SMS BAL <space> last 6 digits of Folio No.</space>
SMS NAV <space> last 6 digits of Folio No.</space>
SMS ESOA <space> last 6 digits of Folio No.</space>
SMS Transaction < space > last 6 digits of Folio No.



In	vestor can avail below facilities
1.	NAV
2.	Account Balance
3.	Account Statement
1	Loot E Transactions

1800-2670-189 (Toll Free)

9 am to 6 pm - Monday to
Saturday on all Business Days
9 am to 2 pm on 2** & 4**
Saturdays of the Month
www.barodamf.com

FATCA & CRS INFO			[Pleas	e tick	(✓)]	For I	ndiv	iduals	& H	UF (I	Man	dato	ry) N	lon I	ndi	vidua	linve	estor	s sho	ould	man	dato	rily	fill s	ере	rate	FA	CA o	letail	l form
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Name of Applicant			-1-1	(3		,																		-1-1-				
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Name and Address of the Nominee(s)	f	betw	elation veen N & Inves	omíne		ate o		Na	(to b	e fui	rnish	ed i	Guar n cas ninor	e	ļ 		PAN	I		Gua	ature Irdiai mine	n /	i	will	be s	shar	ed by	eac		units ninee %)
Nominee 1					DDI	MMY	YYY																							
Nominee 2					DDI	VIMY	YYY																							

n/Option	Amount Invested (₹)	Cheque No./ UTR No. (in case of NEFT/RTGS)	Bank and Branch and Account Number (for Cheque)

	SIP AND PAYMENT DETAILS (Please re	efer instruction)					
Sr. No.	Scheme/Plan/Option	Frequency	Frequency Date SIP Date Start			OR Perpetual (Default)*	SIP Amount
4		☐ Monthly (default)	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
1.	Plan/Option	☐ Calendar Quarter	1st 10th 15th 25th	DD/MM/YYYY	DD/MM/YYYY		
2		☐ Monthly (default)	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
2.	Plan/Option	☐ Calendar Quarter	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
3.		☐ Monthly (default)	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
3.	Plan/Option	☐ Calendar Quarter	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
4		☐ Monthly (default)	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
4.	Plan/Option	☐ Calendar Quarter	1 st 10 th 15 th 25 th	DD/MM/YYYY	DD/MM/YYYY		
1 st S	IP Cheque Details Cheque No.	Date	D M M Y Y	YY	*Perpetual U	ntil Cancelled (99	years) (Default)

SIP date should be either 1st/10" / 15th (Note: Cheque should be drawn on bank details provided below) (Note: Please allow minimum one month for auto debit to register and start).

I hereby authorise Baroda Mutual Fund (BMF) and their authorised service providers to debit my following bank account by ECS (Debit Clearing) / auto debit to account for collection of SIP payments.

I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the Scheme. I/We hereby declare that I/We do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year. I/We have neither received nor been induced by any rebate or gifts directly or indirectly in making this Systematic Investment. The ARN holder has disclosed to me/us all the commissions (in trail commission or any other), payable to him for the different competing schemes of mutual funds from amongst which the Scheme is being recommended to me/us. I/We hereby declare that the particulars given here are correct and express my/our willingness to make payments referred above through direct debit/participation in ECS. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Baroda Mutual Fund, Baroda Asset Management India Limited, its investment manager, or any of their appointed service providers or representatives responsible. I/We will also inform Baroda Asset Management India Limited about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

DECLARATION AND SIGNATURES

I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the Scheme. I/We hereby declare that I/We am/are authorized 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, rule, regulation, notification or direction or any other applicable laws issued by the Government of India or any regulatory or statutory authority. I/We have understood the details of the Scheme and in the event "Know Your Customer" process is not completed by me/us to the satisfaction of the AMC, I/We hereby authorize the AMC to redeem the funds invested in the Scheme, in favour of the first applicable NAV prevailing on the date of such redemption and to undertake such other action with such funds as may be required by law. I/We hereby authorise Baroda Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/Baroda Mutual Fund' bank(s) and/or Distributor/Broker/Investment Adviser.

The ARN holder has disclosed to me/us all the commission (in the form of trail commission or any other mode), payable to him/it for the different competing schemes of various mutual funds from amongst which the Scheme is being recommended to me/us. 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. If I/We have not ticked for not appointing a nominee, then the Application Form shall be processed as without nomination.

Applicable for "Execution Only" transaction: I/We, the undersigned, hereby acknowledge and confirm that the above transaction is "Execution Only" as explained vide SEBI circular no. CIR /IMD/DF/13/2011 dated 22 August 2011. This investment is being made notwithstanding the advice of the appropriateness of the same and the distributor has not charged any advisory fees on this transaction.

Applicable for NRIs: I/We confirm that I am/we are Non-Residents of Indian nationality/origin but not residents of the United States and Canada and I/we hereby confirm that I/we have remitted funds from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines.

Applicable for FATCA & CRS:

1/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 below and hereby accept the same.

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

9 am to 6 pm - Monday to Saturday on all Business Days 9 am to 2 pm on 2nd & 4th Saturdays of the Month

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Barod	d UMRN			For (office Use O	nly				Date) D	M	MY	Y	ΥY
MUTUAL FUND Spoi		or Bank Code For Office Use Only				Ut	Utility Code	For Office Use Only							
Tick (✓) Create ✓ I/We hereby authorize			BARODA MUTUAL FUND						To debit (tick ✓)			SB CA SB NRE SB NRC			
Modify □ Cancel □	Bank A/c. Numb	er													$\overline{}$
With Bank	Investor Bank Name a	and Branch	IFSC	;					or MICI	٦					
An Amount of Rupees									₹						
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Folio No.					Pho	ne No.									
PAN No.					Ema	il ID									
Agree for the debit of manda	ate processing charges by the	bank whom I am aut	horizing to debit m	y accounts as	per latest sche	edule of cha	arges for th	ie bank.							
From D D M To D D M	M Y Y Y Y	Signature Primary Account holder			5	Signature of 1 st Joint holder			Signature of 2 nd Joint holder						
Or Until ca	ncelled	Name as in Bank Records				Name as in Bank Records			Name as in Bank Records						