	Tione
COMMON APPLICATION FORM	

Reliance Capital Asset Management Limited A Reliance Capital Company

APP No.:

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Reliance

## (To be filled in CAPITAL letters)

1. DISTRIBUTOR / BROK	<b>(ER INFORMATION (Refer Instr</b>	uction No. I.9)		
Name & Broker Code / ARN	Sub Agent ARN Code	Sub Agent Code	*Employee Unique Identification Number	First / Sole Applicant /
58603 - VRIDH	11		E026768	SIGN HERE Second Applicant
*Please sign alongside in case the EUIN is	s left blank/not provided.			
	s been intentionally left blank by me/us as this trans or notwithstanding the advice of in-appropriateness,			SIGN HERE Third Applicant
(Please tick (√)any one)	I am a First time investor across	s Mutual Funds OF	l am an existing investor in	Mutual Funds
2. UNITHOLDING OPTIO	N - 🔲 DEMAT MODE 📃	PHYSICAL MODE		
		-	hold the units in DEMAT mode. Re	ef. Instruction No. XI.
National Depository	names as mentioned in the application form	Central	d with any one of the Depository Participant.	
Securities participant Name	)	Depository Securities	participant Name	
Depository DP ID No.	I N	Limited	Taurat ID Na	
BeneficiaryAccount			Target ID No.	
Enclosures (Please tick any one bo		ML) Transaction cum H		Delivery Instruction Slip (DIS)
3. EXISTING INVESTOR	S FOLIO NUMBER			r with KYC validated, please mention the number de of holding will be as per existing folio number.)
4. GENERAL INFORMAT	ION APPLICATION FOR  Z	ero Balance Folio 🗌 Inves	t Now <b>^MODE OF HOLDING</b> :	Single Joint (Default) Any one or Survivor
5. FIRST APPLICANT DE	TAILS			
PAN / PEKRN <sup>^</sup> (First Applicant)		PAN / PEK	(Guardian)	
Name of Guardian if first app Contact Person for non individ				
Guardian's Relationship With	Minor		Proof of Date of Birth a	nd Guardian's Relationship with Minor
	Date	of Birth t Applicant	V V V	Passport O Others (please specify)
O Busir				Government Service/Public Sector
		-	-	O Others
· · · · · ·	dent Individual O PSU O		ugh Guardian OHUF	O Trust / Charities / NGOs
			Body Corporate O Sole Propri	
O PIO		^as and when applicable)		
GROSS ANNUAL INCOME DE	<b>ETAILS</b> *** Please tick (✓) O Below 1 L	ac O 1-5 Lacs O 5-10 Lacs	○ 10-25 Lacs ○ 25 Lacs-1 Crore ○	) >1 Crore
NET-WORTH**^ in ₹	(Net worth should not be o	ider than 1 year)	as on (Date) D D M M Y	Y Y Y (Mandatory for Non Individuals
Are you a Politically Exposed	Person (PEP)*** O Yes O N	o Are you related to a Pol	itically Exposed Person (PEP)***	O Yes O No
Are you involved / providing (Applicable only for Non Individ	g any of the mentioned services : duals)			J / Gambling / Lottery / Casino Services f the above
	,	A, CRS & Ultimate Beneficial C	wnership (UBO) Self Certification Fo	
	is Minor then details of Guardian wil	l be required.		
6. SECOND APPLICANT				
			PAN / P	
OCCUPATION <sup>^</sup> : O Profession				TATUS^: O NRI
				Resident Individual
	ETAILS*** Please tick ( ) </ul			) >1 Crore
NET-WORTH**^ in ₹		lder than 1 year)		
Are you a Politically Exposed	Person (PEP)*** O Yes O N	o Are you related to a Pol	itically Exposed Person (PEP)	O Yes O No
Reliance	ACKNOWLEDGMENT SLIP Received from Mr/Ms/M/s :		P	APP No.: ation for allotment of
Mutual Fund	Units under Scheme Reliance	(	Dptionas per details below.	

Time Stamp & Date of receiving office

Corporate Office Address: Reliance Centre, 7th Floor, South Wing, Off Western Express Highway, Santacruz (East), Mumbai - 400 055.

Rs.

\_ Dated \_

Instrument No/Cash Deposit Slip No.

drawn on Bank

7. THIRD AP	PLIC	ANT I	DETAI	LS																										
NAME																					F	PAN	PEI	KRN^						
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GROSS ANNUA		ОМЕ І	DETAIL	.S**′	Plea	se tick (	<i>v</i> ) O	Below	1 La	° 0	1-5 L	acs	O 5-1	10 La	cs (	<b>)</b> 10-2	25 Lac	s C	) 25	Lacs	-1 Cro	ore	0;	>1 Cro	re					
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^Mandatory for								nvest	ors t	o be l	KYC	com	pliant	thro	bugh	a Key	Reg	ister	ed A	gen	cy (k	(RA)	app	ointe	d by	SEB	BI pric	or to in	nvest	ing in
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So	e/Firs	st App	licant/	Gua	ardia	n					5	Seco	nd A	ppli	ican	t								Thi	rd A	pplic	cant			
Country	of Birt	h							Co	untry	of B	Birth									Со	untry	of E	Birth						
Country of N	lation	ality						С	ount	ry of	Natio	onali	ty							Co	ount	ry of	Nati	onali	ty					
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City										Pin	Code	e								S	tate									
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Mobile + (Count	y Code	)								Tel. N	0.	\$TD	Code		Office								Res	idenc	e					
Please register your	Mobile N	lo & Em	ail Id with	us to	o get in	stant trar	nsaction	alerts v	via SN	IS & En	nail. Ir	vesto	rs provi	ding E	Email I	d would	manda	atorily	recei	ve only	/ E - S	Statem	ent of	Accou	nts in	lieu of	f physic	al Stat	ement	of Accounts.
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application form																														
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(^^ Default option	n if not	selecte	ed) ~Uni	ts wi	ill be a	allotted	for the	net ar	noun	t minu	is the	trans				f applie	cable	. <sup>\$</sup> Inv	esto	rs are	requ	ueste	d to c	ollect	the o	cash /	depos	it slip	from	the DISC
L																														

Simply	send **SMS to 966 4	00 1111 to avail below facilities
Types of Facilities	Single Folio	Multiple Folio
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Balance	SMS Balance	SMS balance <space> last 6 digits of folio</space>
Last 3 Transaction	SMS Transaction	SMS txn <space> last 6 digits of folio</space>
Statement thru mail	SMS ESOA	SMS ESOA <space> last 6 digits of folio</space>



Investor Desk. A RMF Virtual Branch Experience. For more details : Visit : www.reliancemutual.com

You can also follow us on 📑 🕒 in

in out of oxiding involution	nomination details	mentioned	l in the b	elow table will replace the			) (Refer In tered in the		NO. VI)		
	Nominee Name			Guardian Name	Date of Birth		Sign of	Sign of		Signat	
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B. POWER OF ATTORN	EY (POA) HOLDE	ER DETAIL	_S (Refe	r Instruction No. II. 1)					1 1		
st Applicant POA Name	Mr./Ms./M/s						PAN				
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ird Applicant POA Name	Mr./Ms./M/s						PAN	^			
4. SIP ENROLLMENT		for SIP:	Yes	No (Incase	you have opte	ed for SIP it	is mandatory	to submit S	IP Enrolm	ent Form)	
5. STP ENROLLMENT	DETAILS Opte	ed for STP:	Ye	`	you have opte	ed for STP i	t is mandatory	v to submit S	STP Enroli	ment Form	)
6. I WISH TO APPLY FOR	TRANSACT ONLINE	E Yes	No		TO APPLY FO bry Enclosure					Yes Ves Ves	No
7. DECLARATION AND	SIGNATURE									,	
e would like to invest in Reliance_				of the Statement of Additional Info							
equent amendments thereto. I/W iance Any Time Money Card. I/W	e have not received nor be	een induced by	any rebate	or gifts, directly or indirectly, in mal	ing this investme	ent. I / We dec	lare that the am	ount invested	in the Sche	me is throug	h legitimate
rces only and is not designed for t hority. I accept and agree to be bou	the purpose of contraventi	on or evasion of	of any Act / I	Regulations / Rules / Notifications	/ Directions or a	ny other Appli	cable Laws ena	cted by the G	overnment	of India or a	ny Statutory
retion, discontinue any of the serv /us all the commissions (in the form	ices completely or partially	without any pri	ior notice to	me. I agree RCAM can debit from	ny folio for the se	ervice charges	as applicable fr	om time to tim	e. The ARN	holder has	disclosed to
eby declare that the above informa	tion is given by the undersi	gned and partic	culars given l	by me/us are correct and complete	Further, I agree	that the transa	ction charge (if a	applicable) sha	Il be deduct	ed from the s	subscription
ount and the said charges shall be U.S. Commodity Futures Trading C					iin the meaning c	of Regulation (	S) under the Un	ited States Se	curities Act o	of 1933, or a	s defined by
I confirm that I am resident of In		lationality (Orig		a la avala : a antinua da ad da a funda d	an an ha animtian I		unities of feature and	ما مربح ما فالم الم م		Line ale and	
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king channels or from funds in m	y/ourNRE/FCNR Accou	int.								-	
I have read and understood Inst 1 read with Rules 114F to 114H of	of the Income Tax Rules,	1962 and the i	information	provided by me /us in the Form,	ts supporting A	nnexures as v	well as in the do	ince with sec ocumentary e	vidence pro	or the incor ovided by m	e/us are, to
e best of our knowledge and belief	, true, correct and comple	ete.									
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RELIANCE

SIP ENROLLMENT DETAILS (Use this form if One Time Bank Mandate Form is registered in the folio) Reliance Capital Asset Management Limited A Reliance Capital Company

	Mutual Fund	d	(Use this form if	One Time Bank M	andate Form	is registered in	the folio)	APP No.
				gent AR <u>N Code</u>	*Employee	Uniqu <u>e Identific</u>	ation N <u>umber</u>	Sub Broker / Sub Agent Code
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Ballielle     Automation     Description     Out Applicable Automation Sequence of the part and the part	the above distri	, in the second		ateness, if any, provide	ed by the employ	ee/relationship m	anager/sales person c	f the distributor/sub broker.
APPLICANT DETAILS       FOUND       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PNN No / PEKRNI.       Image: Second and second holder       PD Charge Re.       Corp.         UNITIOL_UNICO OPTION	SIGN HERE			2nd App	licant Authoris	sed Signatory	3rd A	Applicant Authorised Signatory
Name of Soliditat holder PAN No / PEKRIN PAN No / PEKRIN PAN No / PEKRIN   Name of Soliditat holder PAN No / PEKRIN D C Color VCC Advocvidedgem   INITIAL INVESTIAEINT DETAILS D C Charge Ra	-		restor to the AMFI regist	ered distributor based			various factors includ	ing the service rendered by the distrik
Name of 2nd holder PAN No / PEKNN.   Name of 2nd holder PNN No / PEKNN.   Provide of 2nd hol				PAN N				
Name of 3rd holder         PAN No / PEKNN.         Image of 2rd holder         VIC Advance/degree           INITIAL INVESTMENT DETAILS         Did Charge Ra.         Did Chare Ra.         Did Chare Ra.								
INITIAL INVESTMENT DETAILS       DRequer (D) / Cesh Deposition Date				PAN No	o / PEKRN.			
Chequer (D No. Cash Deposition Ising No	INITIAL IN	VESTMENT DETAILS						
UNITABLE DING OPTION -       Denset Mode       "Physical Mode (rel. instruction for. 50) towner Account deals are computingly if owner the line of a physical Mode (rel. instruction for. 50) towner Account deals are computingly if owner the line of a physical Mode (rel. instruction for. 50) towner Account deals are computingly if owner the line of a physical Mode (rel. instruction for. 50) towner Account deals are computingly if owner the line of a physical Mode (rel. instruction for. 50) towner the line of a physical Mode (rel. instruction for the line of the				Cheque / DD / Cash	Deposition Da	te	DD	Charge Rs
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This is to confirm that the declaration (as mentioned overleaf) has been carefully read, understood & made by me / us. I am authorizing the User Entity / Corporate to debit my account, based on the instructions 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 or the bank where I have authorized the debit.

ReliAnce

**Reliance Capital Asset Management Limited** A Reliance Capital Company

APP No.

**Mutual Fund** 

Mode & Frequency of STP

## SYSTEMATIC TRANSFER PLAN (STP) ENROLMENT FORM

TO BE FILLED IN CAPITAL LETTERS. PLEASE (/) WHEREVER APPLICABLE

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6. DECLARATIC												
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