



multi asset, multi manager

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COMMON APPLICATION FORM

(Use this form if One Time Bank Mandate Form is registered in the folio) To be filled in capital letters and in blue / black ink only. APP No.

Table with 6 columns: Name & Broker Code / ARN / RIA Code, Sub Broker / Agent ARN Code, Sub Agent Code, EUIN\*, Internal Code for AMC, ISC Date Time Stamp Reference No.

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.

Signature fields for 1st, 2nd, and 3rd Applicant / Guardian / Authorised Signatory / PoA/Karta

Please [checked] Lumpsum Investment [ ] Micro Application [ ] SIP Application [ ]

1. EXISTING UNIT HOLDER INFORMATION [Please fill in your Folio Number, KIN, Section 2 & proceed to Section 7 - Investment Details]

Folio No. [ ] Optional CKYC Identification No. (KIN) [ ]

1st SOLE APPLICANT Mr. / Ms. /M/s. PAN [ ]

LEI Code for entities [ ]

CKYC ID No. (KIN) [ ] Pls indicate if US Person or a resident for tax purpose / Resident of Canada [ ] Yes [ ] No (\$Default if not checked)

GUARDIAN (In case 1 Applicant is a Minor) Mr. / Ms. / M/s. Relationship with Minor (Please checked) [ ] Mother [ ] Father [ ] Legal Guardian

GUARDIAN CKYC ID No. (KIN) [ ] KYC (Please checked) [ ] Proof Attached [ ] GUARDIAN PAN [ ]

GUARDIAN AADHAAR No. [ ] Aadhaar Copy (Please checked) [ ] Enclosed [ ]

POA / Custodian Name: [ ] KYC (Please checked) [ ] Proof Attached [ ]

POA / Custodian CKYC ID No. (KIN) [ ] POA / Custodian PAN [ ]

Contact Person for Corporate Investor: Name [ ] Designation: [ ]

3 FIRST APPLICANT AND KYC DETAILS

1st SOLE APPLICANT [ ] Individual or [ ] Non-Individual [Non Individual Investors should mandatorily fill separate FATCA, CRS & UBO details form]

\*Date of Birth/Incorporation [ ] Proof of Date of Birth (Please checked) [ ] Birth Certificate [ ] School Leaving Certificate / Mark Sheet [ ] Passport of the Minor [ ] Others (Please specify) [ ]

Place of Birth / Incorporation: [ ] Country of Birth / Incorporation: [ ] India [ ] Others [ ] Nationality: [ ] Indian [ ] Gender [ ] Male [ ] Female [ ] Other [ ]

Type: [ ] Resident Individual [ ] Sole Prop [ ] NRI - NRE [ ] Trust [ ] Bank / FIs [ ] FIs [ ] PIO [ ] Society/AOP/BOI [ ] Minor through Guardian [ ] NRI - NRO

[ ] HUF [ ] LLP [ ] Listed Company [ ] Private Company [ ] Public Ltd. Company [ ] Artificial Juridical Person [ ] Partnership Firm [ ] FOF - MF Schemes [ ] Others [ ]

a\*. Occupation Details [Please tick (checked)] [ ] Private Sector [ ] Public Sector [ ] Government Service [ ] Student [ ] Professional [ ] Housewife [ ] Business [ ] Retired [ ] Agriculture [ ] Proprietorship [ ] Others [ ]

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

b\*. Gross Annual Income (₹) [Please tick (checked)] [ ] Below 1 Lakh [ ] 1-5 Lakh [ ] 5-10 Lakh [ ] 10-25 Lakh [ ] >25 Lakh [ ] > 1 Crore [ ]

d\*. Net-worth (Mandatory for Non-Individuals) ₹ [ ] as on [ ] (Not older than 1 year)

e\*. Non-Individual Investors involved/providing any of the mentioned services [ ] Foreign Exchange / Money Changer Services [ ] Gaming/Gambling/Lottery/Casino Services [ ] Money Lending / Pawning [ ] None of the above [ ]

4. BANK ACCOUNT DETAILS - Mandatory [Refer Instruction Nos. 3 & 4]

Name of the Bank: [ ]

Core Banking A/c No. [ ] A/c. Type Pls. (checked) [ ] NRE [ ] CURRENT [ ] SAVINGS [ ] NRO [ ]

Branch Name: Bank [ ] Address: [ ]

Branch City: [ ] State: [ ] Pin Code [ ]

MICR Code [ ] Please attach a cancelled cheque OR a clear photo copy of a cheque IFSC Code (Mandatory for Credit via NEFT/RTGS) [ ]

Please Read All Instructions as given in KIM, to help you complete the Application Form Correctly.

\* mandatory fields



9. **NOMINATION DETAILS\* [Minor / HUF / POA Holder / Non Individuals cannot Nominate - Refer Instruction No. 8]**

In respect of the Units bearing Folio No.

First Holder

Second Holder

Third Holder

PAN  1  2  3

I/We wish to make a nomination and do here by nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

**NOMINATION DETAILS**

**Nominee 1**

Name of the Nominee\*  Nomination (%)\*

Relationship with applicant\*  Mobile Number\*

Email ID\*  Residential Address\*

Pincode\*

Proof of Identity\*  Pan  Driving Licence  Aadhar  Passport number in case of NRI/ OCI/ PIO Identification No\*

Nominee / Guardian (In Case of Minor)  DOB

**Nominee 2**

Name of the Nominee\*  Nomination (%)\*

Relationship with applicant\*  Mobile Number\*

Email ID\*  Residential Address\*

Pincode\*

Proof of Identity\*  Pan  Driving Licence  Aadhar  Passport number in case of NRI/ OCI/ PIO Identification No\*

Nominee / Guardian (In Case of Minor)  DOB

**Nominee 3**

Name of the Nominee\*  Nomination (%)\*

Relationship with applicant\*  Mobile Number\*

Email ID\*  Residential Address\*

Pincode\*

Proof of Identity\*  Pan  Driving Licence  Aadhar  Passport number in case of NRI/ OCI/ PIO Identification No\*

Nominee / Guardian (In Case of Minor)  DOB

**DECLARATION FOR OPTING-OUT OF NOMINATION**

I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF Folio and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents / information for claiming of assets held in my / our MF Folio, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio.

This nomination shall supersede any prior nomination made by me / us, if any.

Name and Signature of Holder	Signature(s) of holder/ Thumb impression	Witness Name and Address**	Witness Signature**
Sole / First Holder (Mr./Ms.) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Second Holder (Mr./Ms.) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Third Holder (Mr./Ms.) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*\* Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

\* mandatory fields