

COMMON APPLICATION FORM

Appl. CA

Date : DD / MM / YYYY

Investment Advisor's Name & ARN	Sub-Broker's Name & ARN	Official Acceptance Point	LG - Code	Bank Sr. No.
ARN-	ARN-	Stamp & Sign		

1. EXISTING UNITHOLDER INFORMATION [Refer Guideline 2(a)]

If you have, at any time, invested in any Scheme of Kotak Mahindra Mutual Fund and wish to hold your present investment in the same Account, please furnish your Name, Account Number and PAN details below and proceed to Section 4.

Name of Sole / First Holder : _____ Account No.: _____ / _____

2. NEW APPLICANTS' PERSONAL INFORMATION [Refer Guideline 2]

SOLE/FIRST APPLICANT Mr Ms Mrs Dr Date of Birth _____

 DD / MM / YYYY

First Name Middle Name Last Name

GUARDIAN (in case Sole / First Applicant is a minor) Mr Ms Mrs Dr

 First Name Middle Name Last Name

CONTACT PERSON (in case of Non-individual applicants) Mr Ms Mrs Dr

 Name Designation

SECOND APPLICANT (Joint Holder 1) Mr Ms Mrs Dr

 First Name Middle Name Last Name

THIRD APPLICANT (Joint Holder 2) Mr Ms Mrs Dr

 First Name Middle Name Last Name

MODE OF OPERATION (where there are more than one applicants)
 First Holder only Anyone or Survivor Joint

PAN* Enclosed (please ✓)

Sole / First Applicant	Second Applicant	Third Applicant
<input type="checkbox"/> PAN Proof or <input type="checkbox"/> Form 60 / 61 / 49A	<input type="checkbox"/> PAN Proof or <input type="checkbox"/> Form 60 / 61 / 49A	<input type="checkbox"/> PAN Proof or <input type="checkbox"/> Form 60 / 61 / 49A

* Mandatory for all Investors (Indian & NRI) irrespective of the investment amount.

- Status (Please ✓)**
- Resident Individual
 - INRI on Repatriation Basis
 - NRI on Non-Repatriation Basis
 - HUF
 - Proprietorship
 - Partnership Firm
 - Private Limited Company
 - Public Limited Company
 - Mutual Fund
 - Mutual Fund FOF Scheme
 - Body Corporate
 - Registered Society
 - PF/Gratuity/Pension/ Superannuation Fund
 - TrustAOP / BOI
 - Foreign Institutional Investor
 - Others _____ (Please specify)
- Occupation (Mandatory) (Please ✓)**
- Business
 - Manufacturing Trading
 - Service
 - Government Non-Government
 - Professional
 - Medicine Finance
 - Engineering Legal
 - Retired
 - Housewife
 - Student
 - Agriculture
 - Others _____ (Please specify)

RESIDENTIAL ADDRESS (Mandatory)

City _____ Pin Code _____ State _____ (Cell) _____
 ☎ E-mail _____ ☎ Tel. _____ ☎ (Fax) _____

OFFICE ADDRESS

City _____ Pin Code _____ State _____ (Cell) _____
 ☎ E-mail _____ ☎ Tel. _____ ☎ (Fax) _____

OVERSEAS ADDRESS (Mandatory for Non-Resident applicants) Address for Correspondence (Please ✓) Indian Overseas

City _____ Zip Code _____ State _____
 Country _____ Nationality _____

To be filled by Applicant Received from Mr./Ms. _____
 an application for allotment of Units in the following Scheme:

Investment Details	Instrument Details	Amount
Scheme _____	No. _____ Dated DD/MM/YYYY	Rs. _____
Plan _____	Bank & Branch _____	
Option _____		

Please retain this slip duly acknowledged by the Official Acceptance Point till you receive your Account Statement.

ACKNOWLEDGEMENT SLIP
 Appl. CA

Official Acceptance Point Stamp & Sign

3. BANK ACCOUNT DETAILS (MANDATORY)**[Refer Guideline 3]**

Name of Bank _____
 Branch _____
 City _____ (Clearing Circle)
 Account No. _____
 MICR Code _____
This is the 9 digit No. next to your Cheque No.
 Account Type : Current Savings NRO NRE FCNR Others

DIRECT CREDIT

We offer a Direct Credit Facility with the following banks for paying out Dividend and Redemption Proceeds to you faster.

- ABN AMRO Bank
- AXIS Bank
- Centurion Bank of Punjab
- Citibank
- Corporation Bank
- Deutsche Bank
- HDFC Bank
- HSBC
- ICICI Bank
- IDBI Bank
- IndusInd Bank
- Kotak Mahindra Bank
- Standard Chartered Bank

If your bank account is with any of these banks, we will directly credit your dividend/redemption proceeds into the same.

If, however, you wish to receive a cheque payout, please tick the box alongside.

4. INVESTMENT DETAILS**[Refer Guideline 4]**

Sl. No.	Scheme Name	Plan/Option/Sub-option	Amount Invested (Rs.)	Net Amount Paid (Rs.)	Payment Detail	
					Cheque/DD No.	Bank and Branch
1.			Less DD Charges			
2.			Less DD Charges			
3.			Less DD Charges			

If you are an NRI Investor, please indicate source of funds for your investment (Please ✓)

- NRE NRO FCNR Others

(Please specify) _____

5. NOMINATION DETAILS (to be filled in by Individual(s) applying Singly or Jointly)**[Refer Guideline 5]**

I/We _____ and _____ do hereby nominate the undermentioned Nominee to receive the Units to my/our credit in Account No./Application No. _____ in the event of my/our death. I/we also understand that all payments and settlements made to such Nominee and signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustee.

DETAILS OF NOMINEE

NAME _____ Date of Birth _____
DD / MM / YYYY
 ADDRESS _____
 City/Town _____ Pin _____
 Tel. _____
 Signature of Nominee _____

DETAILS OF GUARDIAN (to be furnished in case Nominee is a Minor)

(Strike off if this section is not applicable to you)

NAME _____
 ADDRESS _____
 City/Town _____ Pin _____
 Tel. _____
 Signature of Guardian _____

6. E-MAIL COMMUNICATION**[Refer Guideline 6]**

I / We would like to receive the following communication by E-Mail: [Please ✓]

- Account Statement Monthly Update ECS of Dividends Transaction Confirmation Annual Report

Please furnish your Email ID :

Your E-mail ID here _____

7. DECLARATION AND SIGNATURES**[Refer Guideline 7]**

I / We have read and understood the contents of the Offer Document(s) of the respective Scheme(s) of Kotak Mahindra Mutual Fund. I / We hereby apply for allotment / purchase of Units in the Scheme(s) indicated in Section 4 above and agree to abide by the terms and conditions applicable thereto. I / We hereby declare that I / We are authorised to make this investment in the above-mentioned scheme(s) and that the amount invested in the Scheme(s) 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 of the provisions of Income Tax Act, Anti Money Laundering Act, Anti Corruption Act or any other applicable laws enacted by the Government of India from time to time. I / We hereby authorise Kotak Mahindra Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my / our Investment Advisor and / or my bank(s) / Kotak Mahindra Mutual Fund's bank(s). I / We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.

Applicable to NRIs seeking repatriation of redemption proceeds: I / We confirm that I am / we are Non-Resident(s) of Indian Nationality / Origin and that I / We have remitted funds from abroad through approved banking channels or from funds in my/our NRE / FCNR Account.

SIGNATURE(S)

Sole / First Applicant



Second Applicant



Third Applicant

(To be signed by **All Applicants**)

Kotak Mahindra Mutual Fund
 91/92, 9th Floor, Sakhar Bhavan, 230,
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We are at your service on 1800-222-626 from 9.30 a.m. to 6.30 p.m. (Monday to Friday)