

Common Application Form for Equity, Monthly Income and Balanced Schemes

(For Lumpsum / Systematic Investments)



Sr. No.: **A 1919337**

Please refer the instructions while filling the Application Form. Tick (✓) whichever is applicable. (Strike out which is not required)

I. DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Tata Mutual Fund)

Distributor / Broker ARN SACHIN S. PAREKH ARN-18941	Sub-Broker Code
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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.

Existing Folio Number:	<input type="checkbox"/> SIP Form Attached
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MICRO SIP - Refer instruction E

For Micro SIP please mention 'MICROSIP' in 'PAN area' for 1st applicant / Guardian / 2nd applicant / 3rd applicant wherever applicable. Mentioning the date of Birth in section 4 below mandatory for Micro SIP applications. Micro SIP document submitted (any one mentioned in the instruction {E.2} :

	Document Enclosed	Document Id	Validity of document
First			
Second			
Third			

I/We hereby declare that I/We do not have any existing Micro SIP's which together with the current application will result in aggregate investments exceeding Rs.50,000/- in a year.

MANDATORY [Please tick (✓)] (Refer Instruction - F)

APPLICANT DETAILS	PAN * please attach proof	Know Your Client (KYC)	STATUS
FIRST APPLICANT	<input type="checkbox"/> Proof	<input type="checkbox"/> KYC Complied	<input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI/NRO <input type="checkbox"/> NRI/NRE <input type="checkbox"/> Trust <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others Please specify
SECOND APPLICANT	<input type="checkbox"/> Proof	<input type="checkbox"/> KYC Complied	
THIRD APPLICANT	<input type="checkbox"/> Proof	<input type="checkbox"/> KYC Complied	
GUARDIAN/POA HOLDER	<input type="checkbox"/> Proof	<input type="checkbox"/> KYC Complied	
			<input type="checkbox"/> Partnership <input type="checkbox"/> Public Ltd. Co. <input type="checkbox"/> Pvt. Ltd. Co. <input type="checkbox"/> FII <input type="checkbox"/> On behalf of Minor <input type="checkbox"/> Societies <input type="checkbox"/> HUF <input type="checkbox"/> PIO <input type="checkbox"/> Body Corporate <input type="checkbox"/> FOF

2. SOLE / FIRST APPLICANT'S PERSONAL DETAILS (Please fill in Block Letters use one box for one alphabet leaving one box blank between two words, as it appears in your Bank Account)

Name	Mr Ms M/s	
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Date of Birth Status: (✓) RI NRI

Guardian Name (in case of Minor) Contact Person - Designation (non individual) / PoA Holder (investments made of constitutional attorney).

Name	Mr Ms M/s	
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Date of Birth Status: (✓) RI NRI

Address [P. O. Box Address is not sufficient] (Indian address in case of NRI's / FII's)

City	Pin code Mandatory
State	Country

Contact Details

Phone	O	Extn.	Fax
	R		Mobile
e-mail			

I/We wish to receive the following via e-mail in lieu of physical document(s) (Please ✓) Account Statement Annual Report Other Communication

Overseas Address (Mandatory in case of NRI / FII applicant in addition to mailing address)

State	Country	City	Zip code
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I/We confirm that I am/we are non-residents of Indian nationality/origin & that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/FCNR Account.

Occupation (please ✓) Agriculture Business Service Professional Housewife Retired Student Other

3. JOINT APPLICANT'S DETAILS

Second Applicant

Name	Mr Ms M/s	
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Date of Birth Status: (✓) RI NRI

Third Applicant

Name	Mr Ms M/s	
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Date of Birth Status: (✓) RI NRI

Mode of Holding (please ✓) Single OR Joint OR Anyone or Survivor **Default Option: Joint**

ACKNOWLEDGEMENT SLIP (To be filled by the investor)

Sr. No.: **A 1919337**

Received from Mr. / Ms. / M/s. _____
 an application for Units of _____
 Plan _____ Option _____ Sub-option _____
 alongwith Cheque / DD No. _____ Dated _____ Drawn on (Bank) _____
 Amount (Rs.) _____

Signature, Stamp & Date

Subject to realisation of cheque / Demand Draft and verification of mandatory information / document.

4. FIRST HOLDERS BANK ACCOUNT DETAILS (Mandatory) Refer Instruction G
 All communication/payments will be made to first applicant or to Karta in case of HUF. Bank account details of First Unitholder required without which the application would be rejected

Name of the Bank _____ Account Type Savings Current NRO NRNR NRE

Branch _____

Account No. (in Fig.) _____

Account No. (in words) _____

Bank Address _____ State _____

City _____ PIN _____ MICR Code _____

(To be filled in only if dividend is to be paid through ECS).

* IFSC Code for NEFT _____ * This is a 11 Digit Number, kindly obtain it from your Bank Branch. (Please attach copy of cancelled cheque)

Example for filling the Account No. Ac. No. 9 7 4 6 1 5 2 In words Nine Seven Four Six One Five Two

5. DIRECT CREDIT FACILITY FOR REDEMPTION / DIVIDEND / REFUND PAYOUTS
 Tata Mutual Fund directly credits the Redemption/Dividend/Refund payout into the investor's Bank Account in case the account is with ICICI Bank Ltd./HDFC Bank Ltd./Axis Bank/IDBI Bank/Standard Chartered Bank/Kotak Mahindra Bank/HSBC Bank/Deutsche Bank/ABN Amro Bank/Oriental Bank of Commerce/ Centurion Bank of Punjab/State Bank of India (Core banking centers only - subject to validation).
 I/We understand that the instruction to the bank for Direct Credit/NEFT/ECS will be given by the Mutual Fund & such instruction will be adequate discharge of Mutual Fund towards redemption/dividend/refund proceeds. In case of bank not crediting my/our bank account with/without assigning any reason thereof or if the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Tata Mutual Fund responsible. I/We understand that in case account number furnished by me/us, if found incorrect, I/We would not hold Tata Mutual Fund responsible for the credit going to the wrong account. Further, the Mutual Fund reserves the right to issue a demand draft/payable at par cheque in case it is not possible to make payment by DC/NEFT/ECS.
 If however you wish to receive payouts by cheque, please tick here

6. SCHEME DETAILS Refer Page 3 & 4 for correct scheme name

Scheme Name _____ Plan _____

Options _____ Dividend Frequency _____

[A] INVESTMENT DETAILS (Strike off whichever is not applicable)

Gross Amount (A) _____ DD Charges (if any) (B) _____ Net Amount (Cheque / DD Amount) _____

Rs. _____ Rs. _____

Mode of Payment _____ Dated _____

A/c No. _____ A/c Type _____ Cheque / DD No. _____

Drawn on Bank _____ Branch City _____

[B] SYSTEMATIC INVESTMENT

Installment Amount (Rs.) _____ No. of Installments _____ Total Amount _____ SIP Period _____

Rs. _____ x _____ = Rs. _____ From _____ To _____

First SIP Installment Cheque Details :
 Cheque No. _____ Rs. _____ Dated _____

SIP Date (Please ✓) 1st OR 07th OR 10th OR 20th OR 25th SIP Frequency (Please ✓) Monthly OR Quarterly

Drawn on Bank _____ City _____

Branch _____

SIP THROUGH AUTO-DEBIT (ECS)
 Please fill up enclosed SIP Auto Debit (ECS) Facility Form and submit it together with this Application Form.

SIP THROUGH POST-DATED CHEQUES
 Please fill attached SIP form for Post Dated Cheques (PDCs)

7. NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly) Refer Instruction - J

Name and Address of the Nominees(s)	Nominee's Relationship with the 1st unitholder	Proportion (%) by which the units shared by will be shared by each nominee (% to aggregate to 100%)	Date of Birth	Name & Address of Guardian	Signature of Guardian
Nominee 1					
Nominee 2					
Nominee 3					

(to be furnished in case the nominee is minor)

8. DECLARATION AND SIGNATURES. Refer Instruction - C

The Trustee, Tata Mutual Fund
 a) Having read & understood the contents of the Offer Document of the Scheme, I/ We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I/ We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt of India from time to time. I/ We have understood the details of the scheme & I/ We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b) For NRIs: I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I/ we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary. c) 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. d) I/ We confirm that details provided by me / us are true and correct. e) I/ We have read & understood the SEBI Circular No. MRD/DoP/Cir-05/2007 dt. April 27, 2007 & SEBI Circular No. 35/MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/we are holding valid PAN card. f) For Micro SIP: I/We hereby declare that I/We do not have any existing Micro SIP's which together with the current application will result in aggregate investments exceeding Rs.50,000/- in a year.
 Date: _____

CHECKLIST

Tata Mutual Fund: Toll Free No. 1800-209-0101 (Open on all days). Email: kiran@tataamc.com, Website: www.tatamutualfund.com.
 Checklist: Documents as listed below are submitted along with this application.

Document List	Document List	Document List
1. PAN <input type="checkbox"/>	5. Memorandum & Articles of Association <input type="checkbox"/>	9. Overseas Auditor's Certificate <input type="checkbox"/>
2. KYC <input type="checkbox"/>	6. Trust Deed <input type="checkbox"/>	10. Notarised Power of Attorney <input type="checkbox"/>
3. Resolution / Authorisation to invest <input type="checkbox"/>	7. Bye-Laws <input type="checkbox"/>	11. Foreign Invest Remittance Certificate (FIRC) <input type="checkbox"/>
4. Authorised Signatories List with Specimen Signature <input type="checkbox"/>	8. Partnership Deed <input type="checkbox"/>	12. MICROSIP document <input type="checkbox"/>
		13. Others _____ <input type="checkbox"/>

All documents in 3 to 8 above should be originals / true copies certified by the Director's / Trustee / Company Secretary / Authorised Signatory / Notary Public.



Expertise that's trusted

TO BE USED FOR ALL SCHEMES OTHER THAN TATA SERVICE INDUSTRIES FUND AND TATA CONTRA FUND

SIP AUTO DEBIT FACILITY

New Investors are also requested to fill-in the scheme application form

REGISTRATION CUM MANDATE FORM FOR ECS (Debit Clearing / Auto Debit)

First SIP cheque and subsequent via Auto Debit in select cities only.

New Registration with TMF Change in Bank Account for existing Registration with TMF MICRO SIP

Broker Code **ARN-18941** Sub Broker Code Please attach copy of cheque / cancelled cheque

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.

INVESTOR AND INVESTMENT DETAILS

Sole / First Investor Name	<input type="text"/>
Folio/Application No.	<input type="text"/> Existing Investors please mention Folio Number. New applicants please mention the application form number.
Scheme	<input type="text"/>
Plan	<input type="text"/>
Option and Sub Option	<input type="text"/>

SIP AND BANK DETAILS

Each SIP Amount (Rs.) Frequency Monthly (Default) Quarterly

Amount in words

Status: RI NRI

First SIP Cheque Details:

Cheque No.: Cheque Amount in Rs. Cheque Date:

SIP Auto Debit Dates: 1st 7th 10th 20th 25th of the month / quarter.

SIP Period: Start From MM YY End On MM YY

SIP date should be either 1st / 7th / 10th / 20th / 25th (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 Tata Mutual Fund (TMF) and their authorised service providers, to debit my following bank account by ECS (Debit Clearing) / auto debit to account for collection of SIP payments.

PARTICULARS OF BANK ACCOUNT

Account holder Name as in Bank Account	<input type="text"/>
Bank Name	<input type="text"/>
Branch Name	<input type="text"/> City <input type="text"/>
Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> Cash <input type="checkbox"/> Credit <input type="checkbox"/> NRO <input type="checkbox"/> NRNR <input type="checkbox"/> NRE
Account Number (in figures)	<input type="text"/>
In Words	<input type="text"/>
9 Digit MICR Code (Mandatory)	<input type="text"/>
In Words	<input type="text"/>

I/We hereby declare that the particulars given above are correct & express my willingness to make payments referred above through participation in ECS / Auto Debit. 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 Tata Asset management Ltd., about any changes in my bank account. I/We have read & agreed to the terms & conditions mentioned overleaf. To - The Trustee, Tata Mutual Fund, Mumbai. Having read & understood the contents of Offering Circular of Tata Mutual Fund Scheme/s, I/We hereby apply for the respective Units of Tata Mutual Fund Scheme/s at NAV based resale price & agree to abide by terms, conditions, rules & regulations of scheme/s.

1st A/c Holder's Signature (As in Bank Records)	<input type="text"/>	2nd A/c Holder's Signature (As in Bank Records)	<input type="text"/>	3rd A/c Holder's Signature (As in Bank Records)	<input type="text"/>
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FOR OFFICE USE ONLY (NOT TO BE FILLED IN BY INVESTOR)

Recorded on	<input type="text"/>	Scheme Code	<input type="text"/>
Recorded by	<input type="text"/>	Credit A/c Number	<input type="text"/>
Bank use Mandate Ref. No.	<input type="text"/>	Customer Ref. No.	<input type="text"/>

AUTHORISATION OF THE BANK ACCOUNT HOLDER (TO BE SIGNED BY THE ACCOUNT HOLDER)

This is to inform I/We have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Auto Debit Facility and that my payment towards my investment in Tata Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorise the representative carrying this ECS/Auto Debit to account mandate Form to get it verified & executed.

First Account Holder's Signature (As in Bank Records)	<input checked="" type="text"/>
Second Account Holder's Signature (As in Bank Records)	<input type="text"/>
Third Account Holder's Signature (As in Bank Records)	<input type="text"/>

Bank Account Number	<input type="text"/>
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(To be signed by all holders if mode of operation is Joint)