Reliance Capital Asset Management Limited
A Reliance Capital Company

RELIANCE Mutual Fund

COMMON APPLICATION FORM

(To be filled in CAPITAL letters)

APP No.:

1. DISTRIBUTOR / BROKER INFORMATION (Refer Instruction No. I.9)

Name & Broker Code / ARN	Sub Agent ARN Code	Sub Agent Code	*Employee Unique Identification Number
ARN-0018	ARN -		

*Please sign alongside in case the EUIN is left blank/not provided.

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.

SIGN HERE First / Sole Applicant / Guardian

SIGN HERE Second Applicant

SIGN HERE Third Applicant

(Please tick (✓)any one) ☐ **I am a First time investor across Mutual Funds** **OR** ☐ **I am an existing investor in Mutual Funds**

2. UNITHOLDING OPTION - ☐ DEMAT MODE ☐ PHYSICAL MODE

DEMAT ACCOUNT DETAILS - These details are compulsory if the investor wishes to hold the units in DEMAT mode. Ref. Instruction No. XI.

Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with any one of the Depository Participant.

National Securities Depository Limited	Depository participant Name _____	**Central Depository Securities Limited**	Depository participant Name _____
	DP ID No. I N		Target ID No.
	BeneficiaryAccountNo.		

Enclosures (Please tick any one box): ☐ Client Master List (CML) ☐ Transaction cum Holding Statement ☐ Cancelled Delivery Instruction Slip (DIS)

3. EXISTING INVESTOR'S FOLIO NUMBER

(If you have an existing folio number with KYC validated, please mention the number here and proceed to section 11. Mode of holding will be as per existing folio number.)

4. GENERAL INFORMATION

APPLICATION FOR ☐ Zero Balance Folio ☐ Invest Now **^MODE OF HOLDING :** ☐ Single ☐ Joint (Default) ☐ Any one or Survivor

5. FIRST APPLICANT DETAILS

NAME

PAN / PEKRN^ (First Applicant) **PAN / PEKRN^** (Guardian)

Name of Guardian if first applicant is minor / **Contact Person** for non individuals

Guardian's Relationship With Minor
○ Father ○ Mother ○ Court Appointed Guardian

Date of Birth of 1st Applicant D D M M Y Y Y Y

Proof of Date of Birth and Guardian's Relationship with Minor
○ Birth Certificate ○ Passport ○ Others (please specify)

OCCUPATION^^ :** ○ Professional ○ Agriculturist ○ Housewife ○ Retired ○ Government Service/Public Sector ○ Business ○ Forex Dealer ○ Student ○ Private Sector Service ○ Others _____

STATUS^ : ○ Resident Individual ○ PSU ○ AOP/BOI ○ Minor through Guardian ○ HUF ○ Trust / Charities / NGOs ○ Society ○ FI / FII ○ NRI ○ Company/Body Corporate ○ Sole Proprietor ○ Defence Establishment ○ PIO ○ Bank ○ FPI^^^ (^^^as and when applicable) ○ Government Body ○ Partnership Firm ○ Others _____

GROSS ANNUAL INCOME DETAILS^^** Please tick (✓) ○ Below 1 Lac ○ 1-5 Lacs ○ 5-10 Lacs ○ 10-25 Lacs ○ 25 Lacs-1 Crore ○ >1 Crore

NET-WORTH^^ in ₹** _____ (Net worth should not be older 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)**^ ○ Yes ○ No Are you related to a Politically Exposed Person (PEP)**^ ○ Yes ○ No

Are you involved / providing any of the mentioned services : (Applicable only for Non Individuals) ☐ Foreign Exchange / Money Changer Services ☐ Gaming / Gambling / Lottery / Casino Services ☐ Money Lending / Pawning ☐ None of the above

Note: In case First Applicant is Non Individual please attach FATCA, CRS & Ultimate Beneficial Ownership (UBO) Self Certification Form (Ref Ins No. XIV)
**In case First Applicant is Minor then details of Guardian will be required.

6. SECOND APPLICANT DETAILS

NAME **PAN / PEKRN^**

OCCUPATION^ : ○ Professional ○ Agriculturist ○ Housewife ○ Retired ○ Government Service/Public Sector ○ Business ○ Forex Dealer ○ Student ○ Private Sector Service ○ Others _____

STATUS^: ○ NRI ○ Resident Individual

GROSS ANNUAL INCOME DETAILS^^** Please tick (✓) ○ Below 1 Lac ○ 1-5 Lacs ○ 5-10 Lacs ○ 10-25 Lacs ○ 25 Lacs-1 Crore ○ >1 Crore

NET-WORTH^^ in ₹** _____ (Net worth should not be older than 1 year) as on (Date) D D M M Y Y Y Y

Are you a Politically Exposed Person (PEP)**^ ○ Yes ○ No Are you related to a Politically Exposed Person (PEP) ○ Yes ○ No

Equity & Sector Specific CAF / 16th March 2016 / Ver 1.13

RELIANCE Mutual Fund

ACKNOWLEDGMENT SLIP **APP No.:**

Received from Mr/Ms/M/s : _____ an application for allotment of

Units under Scheme Reliance _____ Option _____ as per details below.

Instrument No/Cash Deposit Slip No._____ Dated _____ Rs. _____ drawn on Bank _____

Time Stamp & Date of receiving office

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