

APPLICATION NO.

A PARIN																S-1710/1
ARN & Nam			B	ATION FO ranch Coo (only for SBG)	de g		UITY OR (er ARN (				<u> </u>		EUIN	<pre>     Letters)     tification Number </pre>	Refer	ence No.
	130604			(- , )									215293			
Declaration for "exe * I/We hereby confirm t distributor or notwithsta	that the EUIN	box has been	intention	ally left blank b	y me/us a	as this is án`"e	execution-only	" transad	ction withou			dvice by the e	mployee/rela			
SIGNATURE(S)	1 <sup>st</sup> Applica	ant/Guard	lian / Au	thorised Si	gnatory	/ 2	2 <sup>nd</sup> Applicar	nt / Aut	horised §	Signato	ry		3 <sup>rd</sup> Applica	ant/Authorise	d Signato	ory
Upfront commission TRANSACTIO	· · ·				-									g the service rer	ndered by	the distributor
In case the subscr investor other than	ription amou	unt is Rs. 1	0,000/-	or more and	if your	Distributor	has opted t	o recei	ve Transa	action C	harges, R	s. 150 (for	first time r			
EXISTING FO	LIO NO.	۲.							NAME					-		
1. FIRST APP	LICANT I	DETAILS														
Name (Mr. / Ms. / M/s.) (Name should be as pe	er PAN / Aadh	aar Card)														
Name of Guardiar (in case of Minor)	n															
Relationship of G PAN/PEKRN N (Enclose KYC Acknowle	IO.@~	Father	<b>M</b>	other 🗌 L	.egal Gu	uardian <b>(Ple</b>	ase mandatori		e the docum Date of Bi	1	encing the rel	lationship of M	linor with Gua	rdian]	1	
KIN (CKYC Identification No.									ADHAAF							
Email ID 🍞											Teleph	hone (O)				
Mobile No. 🦃											Teleph	hone (R)				
•	Country Cod	e														
Correspondence Address of 1st Applicant																
City																
Pin				State												
Foreign Address (Mandatory for NRI / FII )	Address for	Correspond	lence for	NRI Applicar	nts only (	(Please (🖌) )	) Indian by De	fault	]	Foreigr	n 🗌					
City																
Zip						Cour	ntry									
2. MODE OF H	IOLDING	· _	/) oint		🗌 Anı	yone or Su	rvivor									
3. JOINT APP						,										
Name (Name should	d be <u>as</u>			Secon	d App	licant						Т	hird Ap	olicant		
per PAN / Aadhaar Car PAN /PEKRN (Enclose KYC Acknowl	<u>ک</u>															
KIN (CKYC Identification No.	.)															
AADHAAR No #																
تَ¶ 4. BANK	ACCOUN	T (Pay C	out) D	etails of	First /	Applican	t (Mandatory	to attacl	h bank acco	unt proof	in case the p	payout bank ac	count is diffe	rent from the sourc	e/investmen	t bank account)
Name of Bank																
Branch Name and Address																
City													Pin			
Account No.				· · · ·	· · ·		· · · ·		· · · · ·	÷				count Type (	Please √)	
IFS Code							(Plea	ase provi	ide a copy of	CANCELI	LED cheque I	leaf)	Savings	NRO	FCNR	
9 digit MICR Code													Current	NRE	Others_	
SBIMUTUAL A PARTNER FO		nsor : State I stment Mana	Bank of Ir	ndia Il Funds Manag BI & AMUNDI	gement F		TEAR HERE ACKNO To be fille	NLEC	OGEME	NT S	LIP	APPLICA		— — — – 10.		
(To be filled in b Received from :	y the First							S III Dy								Signature,
Scheme	Name	Plan	n (✔) egular	Option (✓)	-	vidend Fac	,	Chequ	e/ DD Am	ount (R	is.) Ban	nk and Brar	nch Che	eque / DD No.	& Date	Date & Stamp
Attochments			irect	Dividend						All	rehases ar	a subject to	realization	of chaque / da-	and draft	
Attachments										All pu	i chases ar	e subject to	realisation	of cheque / dem	anu arâft	

5. FATCA & CRS INFORMATION: For Individuals / Proprietor (Mandatory). Non-Individual investors should mandatorily fill separate FATCA/CRS & UBO Form (Annexure-1).									
Is the applicant(s) Country of Birth / Nationality / Tax Residency other than "India" ?           First Applicant (including Minor)         Second Applicant         Third Applicant									
First Applicant	(Including M	inor)	Second Becond		Third Applicant				
					<u>هر</u>				
If "YES", please provid		-	,	Cocond Applie	ant	Third Applicant			
Details		First Applicant	(including Minor)	Second Applic	ant	Third Applicant			
Country of Birth									
Place/City of Birth									
Nationality									
Country of Tax Residend	cy 1								
Tax Payer Ref. ID No^									
Identification Type									
[TIN or Other, Please specify									
Country of Tax Residen	cy 2								
Tax Payer Ref. ID No.2									
Identification Type									
[TIN or Other, Please specify									
Country of Tax Residen	cy 3								
Tax Payer Ref. ID No. 3									
Identification Type	,								
[TIN or Other, Please specify									
this to the form. (Please attac	h additional shee	ets if necessary and	d mention all countries in	If no TIN is yet available or has n which applicant is a tax resider	nt & provide relev	ed, please provide an explanation and attach vant details)			
@ 6. INVESTMENT AN	ID PAYMENT	DETAILS							
One time Investment	£	Systematic Investr	ment Plan (SIP) (Ple	ase submit SIP Enrolment & OT	M Form)				
Scheme Name									
Plan (Please ✓)	Regular		Direct	In case of Dividend Trans	sfer facility, please	mention target scheme along with plan/option.			
					in intering, piecee				
Option (Please ✓)	Growth		Dividend Frequer		Scheme / Plan / Option				
Dividend Facility (Please ✓)	Reinvest	ment 🗌 F	Payout 🗌 Tra	nsfer					
Devenent Mede									
Payment Mode	Cheque	1	DD (Third Party Declara		Fund Transfer	RTGS			
Cheque/D.D. No.	& Date	Cheque / D	D Amount (Rs.)	ſ	Drawn on Bank a	and Branch			
7. TAX STATUS (Please	· ✓ )								
Resident Individual	,	Pensior	n and Retirement Fund	Government Bo	dy	NGO			
Resident Individual Resident Minor (through	,	Financia	al Institutions	Society	dy	NGO LLP			
Resident Individual         Resident Minor (through         NRI (Repatriable)	,	Financia	al Institutions .imited Company	Society Trust	dy				
Resident Individual Resident Minor (through	Guardian)	Financia Public L Private	al Institutions .imited Company Limited Company	Society	dy	LLP     PIO     NPO			
Resident Individual         Resident Minor (through         NRI (Repatriable)         NRI (Non-Repatriable)	Guardian)	Financia Public L Private Body Ce	al Institutions .imited Company	Society Trust NPS Trust	dy	LLP PIO NPO [Please specify]			
Resident Individual         Resident Minor (through         NRI (Repatriable)         NRI (Non-Repatriable)         NRI- Minor (Repatriable)         NRI – Minor (Non-Repatriable)         Sole-Proprietor	Guardian)	Financia Public L Private Body Co Partners FII / FP	al Institutions .imited Company Limited Company orporate ship Firm	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP	dy	LLP PIO NPO [Please specify] Others			
Resident Individual         Resident Minor (through         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatriable)         Sole-Proprietor         HUF	Guardian) iable)	Financia Financia Public L Private Body Ca Partners FII / FP Bank	al Institutions .imited Company Limited Company orporate ship Firm	Society Trust NPS Trust Fund of Fund Gratuity Fund	dy	LLP PIO NPO [Please specify]			
Resident Individual         Resident Minor (through         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatri         Sole-Proprietor         HUF         8. DEMAT ACCOUNT I	Guardian) iable) DETAILS (OP	Financia Public L Private Body Co Partners FII / FP Bank	al Institutions imited Company Limited Company orporate ship Firm 1	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI		LLP PIO NPO [Please specify] Others [Please specify]			
Resident Individual         Resident Minor (through         NRI (Repatriable)         NRI (Non-Repatriable)         NRI– Minor (Repatriable)         NRI – Minor (Non-Repatri         Sole-Proprietor         HUF         8. DEMAT ACCOUNT I         If you wish to hold unit	Guardian) iable) DETAILS (OP is in Demat m	Financia Financia Public L Private Body Ca Partners FII / FP Bank TIONAL) ode, please pro	al Institutions .imited Company Limited Company orporate ship Firm 1	Society Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI ADP BOI	ient Master /	LLP PIO PIO NPO [Please specify] Others [Please specify] Demat Account Statement			
Resident Individual         Resident Minor (through of the second of th	Guardian) iable) DETAILS (OP is in Demat m equence of name	Financia Financia Public L Private Body Ca Partners FII / FP Bank TIONAL) Dode, please promes as mentione	al Institutions .imited Company Limited Company orporate ship Firm 1 <b>vide below details</b> ed in the application	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI And enclose Latest Cli form matches with that of	i <b>ent Master</b> / the account h	LLP     PIO     PIO     NPO     [Please specify]     Others     [Please specify]     Others     [Please specify]     Demat Account Statement eld with the Depository Participant.			
Resident Individual     Resident Minor (through     NRI (Repatriable)     NRI (Non-Repatriable)     NRI– Minor (Repatriable)     NRI– Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit     Please ensure that the set     National Securi	Guardian) iable) DETAILS (OP is in Demat m equence of name	Financia Financia Public L Private Body Ca Partners FII / FP Bank TIONAL) Dode, please promes as mentione	al Institutions .imited Company Limited Company orporate ship Firm 1 <b>bvide below details</b> ed in the application	Society Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI ANP BOI And enclose Central Depository	i <b>ent Master</b> / the account h	LLP PIO PIO NPO [Please specify] Others [Please specify] Demat Account Statement			
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Resident Individual     Resident Minor (through     NRI (Repatriable)     NRI (Non-Repatriable)     NRI– Minor (Repatriable)     NRI– Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit Please ensure that the set     National Securi      Depository	Guardian) iable) DETAILS (OP is in Demat m equence of name	Financia Financia Public L Private Body Ca Partners FII / FP Bank TIONAL) Dode, please promes as mentione	al Institutions .imited Company Limited Company orporate ship Firm 1 by ide below details ed in the application SDL) Depor Partie	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI AOP BOI And enclose Central Depository sitory cipant Name	i <b>ent Master</b> / the account h	LLP     PIO     PIO     NPO     [Please specify]     Others     [Please specify]     Others     [Please specify]     Demat Account Statement eld with the Depository Participant.			
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Resident Individual     Resident Minor (through of NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatriable)     NRI – Mi	Guardian) iable) DETAILS (OP is in Demat m equence of nai ities Deposito I N s are allotted in	Financia Financia Public L Private Body Co Partners FII / FP Bank TIONAL) TIONAL	al Institutions .imited Company Limited Company orporate ship Firm 1 <b>Divide below details</b> ed in the application <b>FDL)</b> Depo Parti- Targe atement of Account w	Society  Trust  NPS Trust  Fund of Fund  Gratuity Fund  AOP BOI  and enclose BOI  and enclose Central Depository cipant Name t ID No.  ill be issued by the Deposito  E to the Registrar or the Invest	ient Master / the account h y Services (In pry concerned.	LLP PIO PIO [Please specify] Others [Please specify] Others [Please specify] Image: Demat Account Statement neld with the Depository Participant. India) Limited (CDSL)			
Resident Individual     Resident Minor (through      NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatriable)     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.     Please note wherever units     Any communication in o     Investment Manager :     SBI Funds Management	Guardian)	Financia     Public L     Private     Body Co     Partners     FII / FP     Bank  TIONAL)  rode, please pro mes as mentione ory Limited (NS  Demat Mode, St  this application	al Institutions .imited Company Limited Company orporate ship Firm 1 <b>Divide below details</b> ed in the application <b>FDL)</b> Depo Parti- Targe atement of Account w	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI AOP BOI AOP BOI Central Depository cipant Name t ID No. III be issued by the Deposito E To the Registrar or the Invest	ient Master / the account h y Services (In my concerned. my concerned. sment Manage Registrar: Computer Age	LLP PIO PIO PIO PIO Others [Please specify] Demat Account Statement reld with the Depository Participant. Please specify] Please specify] Please specify Ple			
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Resident Individual     Resident Minor (through      NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatri     Sole-Proprietor     HUF      B. DEMAT ACCOUNT I      If you wish to hold unit Please ensure that the se     National Securi      Depository     Participant Name     DP ID No.     Beneficiary Account No.      Please note wherever units     Any communication in o     Investment Manager :     SBI Funds Management     (A Joint Venture betwee     9th Floor, Crescenzo, C     G Block, Bandra Kurla O	Guardian) Guardian) DETAILS (OP is in Demat m equence of nai ities Deposito I N s are allotted in connection with nt Pvt. Ltd. ten SBI & AML	Financia     Public L     Private     Body Co     Partners     FII / FP     Bank  TIONAL)  rode, please pro mes as mentione ory Limited (NS  Demat Mode, St  this application	al Institutions imited Company Limited Company orporate ship Firm 1 by ide below details ed in the application BDL) Depo Partian Targe atement of Account w 	Society	ient Master / the account h y Services (In y Concerned. my concerned. sment Manage Registrar: Computer Age SEBI Registrati	LLP PIO IPlease specify Others [Please specify] Others [Please specify] IPlease specify IPlease spec			
Resident Individual     Resident Individual     Resident Minor (through of     NRI (Repatriable)     NRI (Non-Repatriable)     NRI – Minor (Repatriable)     NRI – Minor (Non-Repatriable)     National Securi     Depository     Participant Name     DP ID No.     Beneficiary Account No.     Investment Managemet :     SBI Funds Managemet :     SBI Funds Managemet :     SBI Funds Managemet (A Joint Venture betwee     9th Floor, Crescenzo, C	Guardian) iable) DETAILS (OP is in Demat m equence of nai ities Deposito I N s are allotted in connection with nt Pvt. Ltd. een SBI & AMU -38 & 39, Complex, - 400 051	Financia     Public L     Private     Body Co     Partners     FII / FP     Bank  TIONAL)  rode, please pro mes as mentione ory Limited (NS  Demat Mode, St  this application	al Institutions imited Company Limited Company orporate ship Firm 1 by ide below details ed in the application BDL) Depo Partian Targe atement of Account w 	Society Trust NPS Trust Fund of Fund Gratuity Fund AOP BOI  and enclose BOI  and enclose Central Depository cipant Name t ID No.  fill be issued by the Deposito E for the Registrar or the Invest for the Registrar or the Invest	ient Master / the account h y Services (In y concerned. my concerned. sment Manage Registrar: Computer Age SEBI Registratii Rayala Towers Fel: 022 - 2778 Email: enq_L@	LLP PIO IPlease specify Others [Please specify] Others [Please specify] IPlease specify IPlease spec			

9. OTHER PERS	ONAL INFORMATI	ON – (Please  ✔ ) First Applic	ant	Second Appl	icant	Third Applicant		
Gender			Other	Male Female	Other	Male Ferr	nale Other	
Father's Name								
Spouse's Name	1							
Date of Birth		D D M M Y	γγγγ	D D M M Y	Y Y Y	D D M M	ΥΥΥΥΥ	
Occupation (Please ✔)		<ul> <li>Professional</li> <li>Government Service</li> <li>Private Sector Service</li> <li>Public Sector Service</li> <li>Student</li> <li>Doctor</li> <li>Others</li> </ul>	<ul> <li>Business</li> <li>Agriculturist</li> <li>Retired</li> <li>Housewife</li> <li>Forex Dealer</li> </ul>	<ul> <li>Professional</li> <li>Government Service</li> <li>Private Sector Service</li> <li>Public Sector Service</li> <li>Student</li> <li>Doctor</li> <li>Others</li> </ul>	Business Agriculturist Retired Housewife Forex Dealer	<ul> <li>Professional</li> <li>Government Servic</li> <li>Private Sector Servi</li> <li>Public Sector Servi</li> <li>Student</li> <li>Doctor</li> <li>Others</li> </ul>	rice	
Gross Annual I (Please ✔):	ncome in Rs.	Below 1 Lac 5-10 Lacs 25 Lacs - 1 Cr.	☐ 1-5 Lacs ☐ 10-25 Lacs ☐ > 1 Cr.	Below 1 Lac         [           5-10 Lacs         [           25 Lacs - 1 Cr.         [	1-5 Lacs 10-25 Lacs > 1 Cr.	Below 1 Lac 5-10 Lacs 25 Lacs - 1 Cr.	☐ 1-5 Lacs ☐ 10-25 Lacs ☐ > 1 Cr.	
OR Networth in	Rs.							
Networth as of	date	<u>р</u> р м м ү	YYY	D D M M Y	Y Y Y	D D M M	YYYYY	
Politically Expo	sed Person [PEP]	Yes No	Related to PEP	Yes No	Related to PEP	Yes No	Related to PEP	
Type of address	given at KRA	Residential Business	Reg. Office	Residential Business	Reg. Office	Residential Busi	ness 🔲 Reg. Office	
		e following person/s to rece However, in case you do not		n the event of my death. (Wit please sign in point 11)	h effect from 01/	04/2011, for individual inv	estors applying with	
Name of the Nomir		Nominee		Nominee 2		Nomin	ee 3	
Name of the Guard								
(In case Nominee is Mi	nor) ory if more than one Nomine							
Relationship with N	-							
Date of Birth* (Man	datory if Nominee is Minor)	D D M M Y	ΥΥΥΥ	D D M M Y	YYY	D D M M	ΥΥΥΥΥ	
Signature of Nomin (*Mandatory in case of f		8		8		8		
11. NOMINATIO	<b>I</b> : I do not wish to n	ominate any person at th	ne time of makir	ng the investment.				
Signature								
12.INSTITUTIO	AL INVESTORS A	DDITIONAL INFORMA	TION		1 1 1			
Name of Conta								
For Foreign Exchan	ge / Money Changer Se		No M	aming / Gambling / Lottery S loney Lending / Pawning r <b>m (Annexure-I) alongwith th</b> i		isinos, Betting Syndicate	es) Yes No	
13. DECLARATIO (i) IWe have not received sources and is not held o from time to time; (iii) the Person' under the US Se of trail commission or any of Association of the Con IWe am/are Non Reside! *** IWe do not hold a Per 12 months period or finar and IWe shall be liable in provided by me/us, includ agencies including but no on a need to know basis, be required by you from tii and documentation from the Fund may be obliged appropriate withholding fro or close or suspend my at the FATCA/CRS Instruct Terms and Conditions bi * Applicable to other than # IWe hereby provide my/or IWe hereby provide my/or	W: We confirm that the inf or been induced by any rebate or designed for the purpose of co monies invested by me in the sy curities laws) / resident of Cana other mode), payable to him/he pany, Bye laws, Trust Deed or it of Indian Nationality/Origin an manent Account Number and H cial year does not exceed Rs. 4 case any of the specified infor ing all changes, updates to suc it limited to SEBI, the Financial without any obligation of advisi investors. I/We ensure to advis o share information on my acco om the account or any proceeds excount(s) and (e) I/We understa ons) and hereby accept the sai a Individuals / HUF; ** Applicab v/our consent for (i) collecting, s	ormation provided in this form is tru- or gifts, directly or indirectly, in making ontravention of any act, rules, regular chemes of the Fund do not attract th da are not eligible for investments wir for the different competing schemes Partnership Deed and resolutions pa d that funds for the subscriptions hav nold only a single PAN Exempt KYC 50,000/- (Rupees Fifty Thousand); (it mation is found to be false or untrue h information as and when provided It Intelligence Unit-India, the tax/reven ng me/us of the same; (xi) I/We shall nce with tax information sharing laws, is e you within 30 days should there be unt with relevant tax authorities; (c) I/I in relation thereto; (d) as may be requ- nd that I am / we are required to conta te information provided by me/us on the App ple to NRIs; *** Applicable to "Micro i storing and usage (ii) validating/authe	e & accurate. I/We hav this investment; (ii) the ions or any statute or le provisions of Foreign the provisions of Foreign the Fund and I/We ar so f various mutual funds assed by the Company e been remitted from ab Reference No. (PEKRN k) all information provid or misleading or misre py me/ us to the Fund, its ue authorities in India o keep you forthwith info such as FATCA and CF any change in any info Ne am aware that the F irred by domestic or over act my tax advisor for an his Form including the t bilication is not matching nvestments"	read and understood the contents of amount invested/to be invested by me/ gislation or any other applicable laws of Contribution Regulations Act (" <b>FCRA</b> " n/are not a U.S. person/resident of Car from amongst which a scheme of the I ("Firm / Trust, I/We am/are authorised to road through approved banking chann )) issued by KYC Registration Agency. ed in this application form together with oresenting; (x) that we authorize you to Sponsor, AMC, trustees, their employ routside India wherever it is legally req mation provided; (b) In certain circum mation provided; (b) In certain circum and may also be required to provide info seas regulators/ tax authorities, the Fur y questions about my/our tax residency axpayer identification number is true, c p PAN/Aadhar card, application may li g my/our Aadhaar number(s) in accord on with the asset management compari	f all the scheme rela us in the scheme(s) o or any notifications, d y; (iv) IWe ann/are aw nada; (v) the ARN hol cund is being recomm o enter into the transi- els or from my/our Nc and also confirm that its annexures is/are o disclose, share, ren ees/RTAs or any India juired and other such dification to the infor additional personal, stances (including if 1 ormation to any institu d may also be constri- r, (f) I have understoo ornect, and complete able to get rejected o lance with the Aadha.	SBI Mutual Fund ("the Fund") is rections issued by any governm rare that a U.S. person (within it der has disclosed to me/us all th ended to me/us; (vi) * as per the actions for and on behalf of the C n Resident External/Ordinary ac the aggregate of lump sum and true and correct to the best of my it in any form, mode or manner un or foreign governmental or sta regulatory/investigation agencic nation provided or any other add ax and beneficial owner informat he Fund does not receive a valic ions such as withholding agents ained to withhold and pay out any d the information requirements o I also confirm that I have read a r further transactions may be lia ar Act, 2016 (and regulations ma	s derived through legitimate iental or statutory authority le definition of the term 'US Memorandum and Articles company/Firm/Trust; (viii) ** count/FCNR Account; (viii) SIP installments in a rolling //our knowledge and belief //our knowledge and belief all / any of the information tutory or judicial authorities/ as or such other third party, ditional information as may on and certain certifications d self-certification from me) for the purpose of ensuring sums from my/our account f this Form (read along with able to get rejected de thereunder) and PMLA.	
SIGNATURE(S)								
(ALL Applicants must sign)	8		8	ant / Authorised Signatory	8	<sup>d</sup> Applicant / Authorised		