

Application No.:

Distributor ARN and Name	Sub Broker Name & ARN	Branch/RM Internal Code	EUIIN (Refer note below)	For Office use only
ARN- 99860			E119669	

I/We confirm that the EUIIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.  
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 am a First Time Investor in Mutual Fund Industry. ☐ I am an Existing Investor in Mutual Fund Industry.

Sole / First Applicant's Signature Mandatory

### 1. FIRST APPLICANT'S DETAILS

Name of First Applicant (Should match with PAN Card)		PAN (1st Applicant / Guardian)	<input type="checkbox"/> KYC
Existing Folio Number		Name of Guardian if minor	PoA PAN <input type="checkbox"/> KYC
On behalf of Minor	Date of Birth	Date of Birth	Guardian named is :
(* Attach Mandatory Documents as per instructions), Minor's		Proof attached * <input type="checkbox"/>	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed

### 2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS (As per KYC records)

Email ID (in capital)	Address Type (Mandatory)	
Mobile +91	Tel (STD Code)	<input type="checkbox"/> a. Residential & Business
Address		<input type="checkbox"/> b. Residential
		<input type="checkbox"/> c. Business
		<input type="checkbox"/> d. Registered Office
Landmark		
City	Pin Code (Mandatory)	State

### 3. KYC DETAILS (Mandatory)

**3a. Status of Sole/1st Applicant (Please tick✓)** ☐ Indian Resident Individual ☐ Minor (Resident) ☐ Minor NRI ☐ NRI (Repatriable) ☐ NRI (Non-Repatriable) ☐ PIO ☐ Sole Proprietorship ☐ HUF - Indian ☐ HUF - NRI ☐ Partnership Firm ☐ Limited Partnership (LLP) ☐ Public Ltd. Co. ☐ Private Ltd. Co. ☐ Body Corporate ☐ Bank ☐ FIs ☐ Insurance Companies ☐ Government Body ☐ AOP/BOI ☐ Trust ☐ Society ☐ Provident Fund ☐ Superannuation / Pension Fund ☐ Gratuity Fund ☐ Mutual Fund ☐ FII ☐ FPI-Category I/II/III ☐ FCRA ☐ GDN ☐ Defence Establishment ☐ NPS Trust ☐ Others (Please specify)

☒ Are you a Non-Profit Organization [NPO] or Company u/s 25 (Companies Act 1956) or u/s 8 of Companies, Act, 2013: ☐ Yes ☐ No

**3b. Occupation Details (Please tick✓)** ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (Please specify)

**3c. Gross Annual Income (Please tick✓)** ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore

Net-worth in (Mandatory for Non-Individuals) ₹ as on / / (Not older than 1 year)

**3d. For Individuals / HUFs** ☐ I am Politically Exposed Person ☐ I am Related to Politically Exposed Person ☐ Not Applicable

**For Non-Individual Investors (Companies, Trust, Partnership etc)** ☐ YES ☐ NO

I. Foreign Exchange / Money Changer Services ☐ YES ☐ NO

II. Gaming / Gambling / Lottery/Casino Services ☐ YES ☐ NO

III. Money Lending / Pawning ☐ YES ☐ NO

### 4. JOINT APPLICANTS (IF ANY) DETAILS

☒ Mode of Holding (Please tick✓) ☐ Joint (Default) ☐ Anyone or Survivor

**2nd Applicant Name (Should match with PAN Card)** PAN (2nd Applicant) ☐ KYC

**a. Occupation Details (Please tick✓)** ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (Please specify)

**b. Gross Annual Income** ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore OR Net worth ₹

**c. Others (Please tick✓)** ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP) ☐ Not Applicable

**3rd Applicant Name (Should match with PAN Card)** PAN (3rd Applicant) ☐ KYC

**a. Occupation Details (Please tick✓)** ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (Please specify)

**b. Gross Annual Income** ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore OR Net worth ₹

**c. Others (Please tick✓)** ☐ Politically Exposed Person (PEP) ☐ Related to a Politically Exposed Person (PEP) ☐ Not Applicable

### ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

### DSP BLACKROCK MUTUAL FUND

Received, subject to realisation and verification an application for purchase of Units as mentioned in the application form.

From

Scheme	Cheque no.	Amount
DSPBR		

Application No.

**5. FATCA and CRS DETAILS** For Individuals/HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA/CRS details form

Sole/First Applicant/Guardian			2nd Applicant			<input type="checkbox"/> 3rd Applicant		<input type="checkbox"/> POA	
Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY	

# Please indicate all Countries, other than India, in which you are a resident for tax purpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.

Country #	Tax Identification Number	Identification Type	Country #	Tax Identification Number	Identification Type	Country #	Tax Identification Number	Identification Type
1			1			1		
2			2			2		
3			3			3		

**6. BANK ACCOUNT DETAILS** (Avail Multiple Bank Registration Facility)

Bank Name												
Bank A/C No.						A/C Type	<input type="checkbox"/> Savings	<input type="checkbox"/> Current	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> FCNR	<input type="checkbox"/> Others
Branch Address												
						City				Pin		
IFSC code: (11 digit)						MICR code (9 digit)	(This is a 9 digit number next to your cheque number)					

**7. INVESTMENT AND PAYMENT DETAILS** (Cheque/DD should be in favour of "Scheme Name")

Scheme/Plan /Option/Sub Option	DSP BlackRock -	Scheme	Plan	Option/Sub Option
(Default plan/option/sub option will be applied incase of no information, ambiguity or discrepancy)				
<input type="checkbox"/> One time Lumpsum Investment <input type="checkbox"/> SIP: Systematic Investment Plan.  Attach OTM form, if not already registered. Mention First SIP Cheque Details below				
Payment Mode: <input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> RTGS <input type="checkbox"/> NEFT <input type="checkbox"/> Funds transfer				
Cheque/DD/RTGS/NEFT No. <input type="text"/>				
Amount (Rs.) (i) <input type="text"/>				
DD charges, (Rs.)(ii) <input type="text"/>				
Total Amount (Rs.) (i) + (ii) <input type="text"/> In figures				
<input type="text"/> In Words				
Documents Attached to avoid Third Party Payment Rejection, where applicable: <input type="checkbox"/> Bank Certificate, for DD <input type="checkbox"/> Third Party Declarations				

**8. NOMINATION DETAILS** Individuals (single or joint applicants) are advised to avail Nomination facility.

<input type="checkbox"/> I/We wish to nominate. <input type="checkbox"/> I/We DO NOT wish to nominate and sign here _____ 1st Applicant Signature (Mandatory)				
	Nominee Name	Guardian Name (In case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				
Address			Total = 100%	

**9. UNIT HOLDING OPTION:**

<input type="checkbox"/> In Account Statement Mode (default):	<input type="checkbox"/> In Demat mode: NSDL: <input type="checkbox"/> I <input type="checkbox"/> N	Depository Participant (DP) ID (NSDL only)	Enclose for demat option:
		Beneficiary Account Number (NSDL only)	<input type="checkbox"/> Client Master List
	CDSL: <input type="text"/>		<input type="checkbox"/> Transaction/Holding Statement
			<input type="checkbox"/> DIS Copy

**10. DECLARATION & SIGNATURES**

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund from time to time, I / We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme/Plan/Option and agree to abide by the terms and conditions, rules and regulations. I / We have understood the information requirements of the application form, including FATCA and CRS requirements, terms and conditions (read along with instructions and scheme related documents) and hereby accept the same and further confirm that the information provided by me/us on this form is true, correct, and complete. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority.

Sole / First Applicant / Guardian	Second Applicant	Third Applicant	POA holder, if any

Email: service@dspblackrock.com	Website: www.dspblackrock.com	Contact Centre: 1800 200 4499
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Quick Checklist	<input type="checkbox"/> Name, Address are correctly mentioned	<input type="checkbox"/> Full scheme name, plan, option is mentioned	<input type="checkbox"/> Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used.
	<input type="checkbox"/> Email ID / Mobile number are mentioned	<input type="checkbox"/> Pay-In bank details and supportings are attached	<input type="checkbox"/> Non Individual investors should attach
	<input type="checkbox"/> KYC information provided for each applicant	<input type="checkbox"/> Nomination facility opted	<input type="checkbox"/> FATCA Details and Declaration Form
	<input type="checkbox"/> FATCA/CRS details provided for each applicant	<input type="checkbox"/> Form is signed by all applicants	<input type="checkbox"/> UBO Declaration Form