| 00 | S | BI | N | | J. | Tl | U | AL | F | U | N | |) |
|----|---|-----|-----|---|----|----|---|----|---|---|---|---|---|
| | Α | P / | A R | Т | Ν | F | R | FΟ | R | I | Т | F | F |

APPLICATION NO.

| S-28 COMMON APPLICATION FORM FOR EQUITY ORIENTED SCHEMES (Please fill in BLOCK Letters) | | | | | | | | | | | | |
|--|---|---------------------------------------|------------------------------------|--|-------------------------|--|--|--|--|--|--|--|
| | | | | ase fill in BLOCK Letters) EUIN* | | | | | | | | |
| ARN & Name of Distributor | Branch Code (only for SBG) | Sub-Broker ARN Code | Sub-Broker Code | (Employee Unique Identification Number) | Reference No. | | | | | | | |
| ARN-102495 | | | | E-145320 | | | | | | | | |
| (Meri Punji IMF Pvt Ltd) Declaration for "execution-only" transactio | n (only where FIIIN box is lef | t blank) (Refer Instruction 1 (r | n)) | | | | | | | | | |
| * I/We hereby confirm that the EUIN box has been distributor or notwithstanding the advice of in-app | i intentionally left blank by me/us as | s this is an "execution-only" transad | ction without any interaction or a | | | | | | | | | |
| | rophateness, it arry, provided by th | | | | | | | | | | | |
| | | | | | | | | | | | | |
| SIGNATURE(S) | | | | | | | | | | | | |
| 1st Applicant / Guard | dian / Authorised Signatory | 1 | | 3rd Applicant / Authorised | | | | | | | | |
| Upfront commission shall be paid directly b TRANSACTION CHARGES FOR | | | | | ered by the distributor | | | | | | | |
| In case the subscription amount is Rs. 1 | 0,000/- or more and if your I | Distributor has opted to recei | ve Transaction Charges, F | s. 150 (for first time mutual fund inves | | | | | | | | |
| investor other than first time mutual function 1. PARTICULARS OF FIRST AF | , | rom the subscription amount | and paid to the distributor | · · · | NOTE 1) | | | | | | | |
| I confirm that I am a First time in | | 3 | I confirm that I ar | n an existing investor in Mutual Fund | , | | | | | | | |
| EXISTING FOLIO NO. | | | | Please mention your Folio number, N | | | | | | | | |
| Name | | | etails and then proceed to | Investment and Payment details- 8) | | | | | | | | |
| (Mr./Ms./M/s.) | | | | | | | | | | | | |
| Gender Male Female | Other (Third Gender) | Date of Birth D D | M M Y Y | Y Y | | | | | | | | |
| Father's Name | | | | | | | | | | | | |
| Spouse's Name | | | | | | | | | | | | |
| Name of Guardian / Name of Contac | t Person | | | | | | | | | | | |
| | itutional Investor) | ocument evidencing the relationsh | in of Minor with Guardian (Saa | Note 1 h)] Trather Mother | Legal Guardian | | | | | | | |
| (In case of Minor, please fill the follow | • • | economic videncing the relations | are of minor with qualitian (See | | | | | | | | | |
| Email ID | | | | | | | | | | | | |
| Mobile No. | | | | | | | | | | | | |
| County Code | | | | | | | | | | | | |
| Please register your E-mail address & Mobile number | er to get alerts & communication via E | -mail & SMS. | | | | | | | | | | |
| Telephone (O) | | | Mandatory E | nclosures PAN Proof KYC | Acknowledgement | | | | | | | |
| County Code Telephone (R) | | | | | | | | | | | | |
| County Code | | | | | | | | | | | | |
| Type of address given at KRA | Residential | Busines | | Registered Office | | | | | | | | |
| Address of tax residence would be taken | as available in KRA database. | , , | | changes. EKRN for Micro investments) - | | | | | | | | |
| PAN | | | • | cument given at KRA | | | | | | | | |
| AADHAAR No | | lde | entification Document I | No | | | | | | | | |
| | | | cument Issuing Count | _ | | | | | | | | |
| | usiness Governmen busewife Student | t Service Private Sector | Service Public Se | ctor Service Agriculturist | pecifyl | | | | | | | |
| Gross Annual Income in Rs. (Please | | | 0 Lacs 10-25 Lacs | | | | | | | | | |
| Gross Annual Income III ns. (rieas | | | | | | | | | | | | |
| Networth in Rs | | as | of (date) D D M | M Y Y Y Y | | | | | | | | |
| Politically Exposed Person [PEP] : | Yes No I | Related to PEP | | | | | | | | | | |
| For Non-individuals : Is the entity inv | olved / providing any of the | following services Yes | No | | | | | | | | | |
| - For Foreign Exchange / Money Char | | - | nbling / Lottery Services (| e.g. Casinos, Betting Syndicates) | Yes No | | | | | | | |
| - Money Lending / Pawning NOTE: Non-individual applicants should | Yes [mandatorilv fill Annexure -] | No alongwith this form. | | | | | | | | | | |
| 2. PARTICULARS OF SECOND | • | | | (SEE | NOTE 1 & 2) | | | | | | | |
| Name | | | | | | | | | | | | |
| Mr./Ms./M/s. | | | | | | | | | | | | |
| Gender Male Female | Other (Third Gender) | Date of Birth D D | M M Y Y | Υ Υ | | | | | | | | |
| Father's Name | | | | | | | | | | | | |
| Spouse's Name | | | | | | | | | | | | |
| Type of address given at KRA | Residential | Busines | | Registered Office | | | | | | | | |
| Address of tax residence would be taken | | , , , | ·· / | changes. pulsorily alongwith application form | | | | | | | | |
| | | — — TEAR HERE — — | | | | | | | | | | |
| SBINUTUAL FUND A PARTNER FOR LIFE Sponsor : State B Investment Mana (A Joint Venture b | Bank of India Iger : SBI Funds Management Pv | t. Ltd. ACKNOWLED | GEMENT SLIP | APPLICATION NO. | | | | | | | | |
| (To be filled in by the First applicant/A | | To be filled in by | | | | | | | | | | |
| Received from : | | | | | Signature, Date & | | | | | | | |
| Scheme Name Plan | () 1 () | | e/ DD Amount (Rs.) Ban | k and Branch Cheque / DD No. & | | | | | | | | |
| Di | | vestment 🔲 Payout Isfer | | | | | | | | | | |
| Attachments | I | 1 | All purchases ar | e subject to realisation of cheque / deman | d draft | | | | | | | |

| PAN | Mandatory Enclosures PAN Proof PAN Exempt KYC Ref no (PEKRN for Micro ir Type of Identification Document given a Identification Document No. | nvestments) at KRA |
|--|---|--|
| Occupation Professional Business Government Service Private Service | Document Issuing Country | Agriculturist |
| (Please (~)) Retired Housewife Student Forex Dea | | Others [Please specify] |
| Gross Annual Income in Rs. (Please tick (✔)): □ Below 1 Lac □ 1-5 Lacs □ | 5-10 Lacs 🔲 10-25 Lacs 🗌 25 Lacs | - 1 Cr. > 1 Cr. OR |
| Networth in Rs | as of (date) | YY |
| Politically Exposed Person [PEP]: Yes No Related to PEP 3. PARTICULARS OF THIRD APPLICANT | | (SEE NOTE 1 & 2) |
| 3. PARTICULARS OF THIRD AFFEIGANT | | (SEE NOTE T & Z) |
| Name Mr./Ms./M/s. | | |
| Gender Male Female Other (Third Gender) Date of Birth | D M M Y Y Y Y | |
| Father's Name | | |
| Spouse's Name | | |
| Type of address given at KRA Residential Bu | | ffice |
| Address of tax residence would be taken as available in KRA database. In case of any change, pl | | 1 |
| PAN | Mandatory Enclosures PAN Proof PAN Exempt KYC Ref no (PEKRN for Micro i | KYC Acknowledgement |
| | Type of Identification Document given a Identification Document No. | at KRA |
| | Document Issuing Country | |
| Occupation Professional Business Government Service Private Service (Please (~)) Retired Housewife Student Forex Deal | | Agriculturist Others [Please specify] |
| | | - 1 Cr. > 1 Cr. OR |
| | as of (date) | v I v I |
| Networth in Rs. Politically Exposed Person [PEP] : Yes No Related to PEP | | |
| 4. FATCA & CRS RELATED INFORMATION (Only for Individuals/Propri | ator) | |
| DETAILS OF FIRST APPLICANT | | |
| Country of Birth | Place of Birth | |
| | | |
| Nationality | | |
| Are you a tax resident of any country other than India? | | |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the | | Identification Type |
| Are you a tax resident of any country other than India? | associated Tax Identification Numbers below: Tax Payer Identification Number * | Identification Type (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | | |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | | |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | Tax Payer Identification Number * | (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT | Tax Payer Identification Number * tax resident issues such identifiers. If no TIN is nt is a tax resident & provide relevant details) | (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth | Tax Payer Identification Number * | (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality | Tax Payer Identification Number * tax resident issues such identifiers. If no TIN is nt is a tax resident & provide relevant details) | (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No | Tax Payer Identification Number * Image: star star is a tax resident issues such identifiers. If no TIN is no tax resident & provide relevant details) Place of Birth | (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | Tax Payer Identification Number * Image: star star is a tax resident issues such identifiers. If no TIN is no tax resident & provide relevant details) Place of Birth | (TIN or Other, please specify) s yet available or has not yet been issued, |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the | Tax Payer Identification Number * Image: Tax Payer Identification Number * Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such | (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | Tax Payer Identification Number * Image: Tax Payer Identification Number * Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such | (TIN or Other, please specify) s yet available or has not yet been issued, |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | Tax Payer Identification Number * Image: Tax Payer Identification Number * Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such identifiers. If no TIN is Image: Tax resident issues such | (TIN or Other, please specify) s yet available or has not yet been issued, |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country | Tax Payer Identification Number * Tax Payer Identification Number * tax resident issues such identifiers. If no TIN is nt is a tax resident & provide relevant details) Place of Birth associated Tax Reference Numbers below: Tax Payer Identification Number istax resident issues such identifiers. If no TIN is | (TIN or Other, please specify) s yet available or has not yet been issued, Identification Type (TIN or Other, please specify) |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) the include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) The second provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applicate all countries in which applicate all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate | Tax Payer Identification Number * Image: Tax Payer Identification Number * tax resident issues such identifiers. If no TIN is Image: Tax resident & provide relevant details) Place of Birth associated Tax Reference Numbers below: Tax Payer Identification Number image: tax resident issues such identifiers. If no TIN is tax resident issues such identifiers. If no TIN is tax resident issues such identifiers. If no TIN is | (TIN or Other, please specify) s yet available or has not yet been issued, Identification Type (TIN or Other, please specify) s yet available or has not yet been issued, |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) the include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) The second provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applicate all countries in which applicate all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate attach additional sheets if necessary and mention all countries in which applicate | Tax Payer Identification Number * Image: Tax Payer Identification Number * tax resident issues such identifiers. If no TIN is Image: Tax resident & provide relevant details) Place of Birth | (TIN or Other, please specify) s yet available or has not yet been issued, Identification Type (TIN or Other, please specify) s yet available or has not yet been issued, |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applic TEAR HERE Any communication in connection with this application should be addressed to Investment Manager : | Tax Payer Identification Number * Image: Second S | (TIN or Other, please specify) s yet available or has not yet been issued, Identification Type (TIN or Other, please specify) s yet available or has not yet been issued, |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) (also include USA, where the individual is a citizen/ green card holder of USA) (also include USA, where the individual is a citizen/ green card holder of USA) (also include USA, where the individual is a citizen/ green card holder of USA) (Please attach additional sheets if necessary and mention all countries in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applic TEAR HERE Any communication in connection with this application should be addressed to Investment Manager : SBI Funds Management Pvt. Ltd. | Tax Payer Identification Number * Image: Tax Payer Identification Number * tax resident issues such identifiers. If no TIN is Image: Tax resident & provide relevant details) Place of Birth | (TIN or Other, please specify) s yet available or has not yet been issued, Identification Type (TIN or Other, please specify) s yet available or has not yet been issued, s yet available or has not yet been issued, rvices Pvt. Ltd., |
| Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) * It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applica DETAILS OF SECOND APPLICANT Country of Birth Nationality Are you a tax resident of any country other than India? Yes No If Yes, please indicate all countries in which you are resident for tax purposes and the Country (also include USA, where the individual is a citizen/ green card holder of USA) It is mandatory to supply a TIN or functional equivalent if the country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all country in which you are please provide an explanation and attach this to the form. (Please attach additional sheets if necessary and mention all countries in which applic TEAR HERE Any communication in connection with this application should be addressed to Investment Manager : | Tax Payer Identification Number * Image: Second S | (TIN or Other, please specify) (TIN or Other, please specify) (Identification Type (TIN or Other, please specify) (TIN or Ot |

Email: customer.delight@sbimf.com

| 20001101/00 |
|-----------------------------|
| Email: enq_L@camsonline.com |
| Website: www.camsonline.com |

| DETAILS OF THIRD APPLICANT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------|--------------|-----------|--------|----------|---------|----------|------------------|----------|----------|---------------|---------|----------|-----------------------|------------|-----------|-----------|----------|---------|----------|---------|--------------------------------|---|----------|---------------|----------|----------|---------|---------|--|--|
| Country of Birth | | | | | | | | | | | | | | | Place | of Bir | th | | | | | | | | | | | - | | |
| Nationality | | | | | | | | | | | | | | | | | | | | | | | | | | | | - | | |
| Are you a tax resi If Yes, pleas | | | | | | | | | | No x purc | oses | and t | he asso | ociate | d Tax | Refere | ence N | umbe | rs belo | ow: | | | | | | | | | | |
| | <u>e man</u> | outo u | | | | ountry | | | | <u>, puip</u> | | | | | | | entifica | | | | Identification Type | | | | | | |] | | |
| (also i | nclude | e USA | , whe | re the i | ndivid | ual is a | a citize | en/ gre | een ca | rd hol | der of | USA | .) | | | | | | | | (TIN or Other, please specify) | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | _ | | |
| It is mandato | rv to s | sunnlv | a TIN | l or fu | nctiona | al equi | ivalen | t if the | count | rv in v | which | VOLLE | are tax | reside | ent iss | | ch ide | ntifier | s If no | TIN i | s vet a | availal | hle o | r has r | not vet | heen | issue |] d | | |
| please provid | le an | explar | nation | and at | ttach t | his to | the for | rm. | | - | | - | | | | | | | | | - | avana | | i nao i | lot yot | 50011 | 10000 | а, | | |
| (Please attac | | | | | | - | | | | | n whic | h app | olicant i | s a ta | x resid | lent & | provid | e rele | vant d | etails) | | | /9 | | IOTE | 1 m | 8 n) | | | |
| J. GENERAL I | | | | - Plea | | Status | | | | le | | | | | | | | | | | | | (0 | 1 | e of Ho | | · · · | | | |
| Resident Indiv | vidual | | | | | Sol | le-Pro | prieto | r | | | | Govern | nmen | t Body | | ٦ | | IGO | | | | | Single | | | | | | |
| Resident Minor (through Guardian) | | | | | | | | | - | - | | | Societ | у | | | | L | LP. | | | | | <u> </u> | pint | | | | | |
| NRI (Repatria | - | ole) | | | | - | vate L dy Col | | l Comp | bany | | | Trust NPS T | rust | | | | _ F | PIO | | | | | | ny one | or | | | | |
| NRI– Minor (F | | , | | | | - | rtners | • | | | | | Fund o | | d | | | _ N | NPO | | | | | | urvivor | | | | | |
| NRI – Minor (1 | | - | - | | | FII | / FPI | | | | | | Gratuit | ty Fun | d | | | | | | Please | spec | cify] | | | | | | | |
| Pension and F | | | und | | | | | | | | | | AOP BOI | | | | L | | Others | | Please | 0000 | ifv1 | | | | | | | |
| 6. CONTACT DETAILS | | | | | | | | | | | | | | | | | Li. | 10030 | spec | | | IOTE | 1) | | | | | | | |
| Local | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | |
| Address of 1st Applicant | | | | <u> </u> | | | | | | | | | | <u> </u> | <u> </u> | | | | <u> </u> | | | <u> </u> | <u> </u> | | | <u> </u> | | _ | | |
| TSt Applicant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City | | | | | | | | | | | | | | | | | | | | | Pin | | | | | | | | | |
| State | | | | 1 | | | | | | | | 1 | 1 | | 1 | | | | | | | | | | 1 | | 1 | | | |
| | Addre | ess for (| Corres | ponde | nce for | NRI AI | oplicar | nts onl | v (Plea | ise (🖌) |) India | n by D | Default | - | | For | eign | 7 | | | | | | | | 1 | | _ | | |
| Foreign Address | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | 1 | 1 | | |
| (Mandatory for NRI / FII) | | | | | | | | I | I | I | | 1 | 1 | I | 1 | | | | | | | I | 1 | | 1 | 1 | | ו_ ו | | |
| City | | | | <u> </u> | | | | | <u> </u> | | | <u> </u> | | <u> </u> | <u> </u> | <u> </u> | | | | | | | | | | | | 1 | | |
| Country | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. BANK PAR | TICU | JLAR | S (As | s per S | EBI Re | egulati | ons it | is ma | ndator | y for l | Invest | ors to | o provic | le the | ir banl | (accol | unt det | ails) | | | | | (\$ | SEE N | OTE | 3) | | | | |
| Name of Bank | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Branch Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| and Address | | | | | | | | | | | | 1 | | | | | | | | | | | | | 1 | | | | | |
| City | | | | | | | | | | | | 1 | 1 | 1 | 1 | 1 | | | | | Pin | | 1 | 1 | 1 | 1 | | - | | |
| Account No. | L | 1 | I | 1 | | | I | | | I | 1 | 1 | | 1 | 1 | 1 | 1 | | | | 1 | | | | | | | | | |
| | L | | | | | | | | | | | | | | | | |] | | | Ac | cour | nt Typ | pe (Please ✓) | | | | | | |
| 9 digit MICR Code | | | | | | | | | | | | | nber next ED chequ | | neque r | iumber. | Please | provia | ea | Sav | ings | NF | | FCNR | | | | | | |
| IFS Code | | | | | | | | | | | | | | | | | | | L | Curr | rent | NF | RE | | Others_ | | | | | |
| 8. INVESTMEN | | ND P/ | AYM | | DETA | ILS : | I/We | would | like to | o inve | st in t | he fo | llowing | Sche | eme of | SBI N | /lutual | Fund | | | | | | (SE | | FE 5) |) | | | |
| One time Ir | vesti | ment | | | Γ | Sy | stema | atic In | vestm | nent F | lan (S | SIP) (| (if Yes, | pleas | e tick | any or | ne) | | | | | | | | | | | | | |
| | | | | | | | | | f SIP | throug | nh Pos | st Dat | ted Che | annes | |) it is r | nanda | tory to | n subr | nit Tra | nsacti | on Sli | in me | ntioni | na PD(| : deta | ails) | | | |
| | | | | | | | | | oit / EC | | , | JI Du | | 59000 | (. 20 | , | | , | | | | 00. | .pc | | .9.20 | | | | | |
| | | | | | | | (Inc | case o | f SIP t | hroug | h ECS | S/Auto | o Debit | mode | e it is m | nandat | ory to s | submi | t SIP I | Enrolm | nent C | um Aı | uto D | ebit/E0 | CS Mar | Idate | Form) | 1 | | |
| Scheme Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plan (Please ✓) | | | | Reg | ular | | | | Direct | | | | | In | case o | f Divide | end Tra | nsfer f | acility, | please | mentio | n targe | et sch | ieme al | ong with | ı plan/ | option. | | | |
| Option (Please ✓) | | | | Gro | wth | | | | Divider | nd | | | | Sc | heme | / Plan | n / Opti | on | | | | | | | | | | | | |
| Dividend Facility | (Pleas | se 🗸) | C | Reir | nvestm | nent | | | Payou | t | [| Tr | ransfer | | | | | | | | | | | | | | | | | |
| | Cheq | ue/D | D Am | ount (| Rs.) | | | | | | | Dra | wn on | Bank | and B | ranch | | | | | | Chec | que/ | D.D. I | No. & C | ate | | - | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Inves | stmer | nt Amo | ount | (Rs. in | Figur | es) | | | | | | | | | Inv | estme | ent Am | ount | (Rs. i | n Wo | rds) | | | | | | | | | |
| | | | | | | _ | | | | | | _ | | | _ | | | | | | | | _ | | | _ | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For third party ch | neque | es plea | ase se | ee Not | e 3 vii | | | | | | | | | | | | | | | | | | | | | | | | | |

| 9. STP ENROLI | MENT | DETA | ILS | 0 | pted | for § | STP: | | Yes | | | lo | (li | Yes, | it is | mand | atory | to su | bmit S | STP EI | nroll | ment | Form/ | Trans | actio | n slip) | | |
|--|---|--|---|---|--|--|--|---|---|--|---|--|--|--|--|---|--|--|---|---|---|---|---|---|--|---|--|--|
| If you wish to hold units in Demat mode, please provide below details and enclose the latest Client Master / Demat Account Statement (Mandatory). Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with the Depository Participant. National Securities Depository Limited (NSDL) Central Depository Services (India) Limited (CDSL) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nationa | al Secu | rities | Dep | osito | ory L | imite | ed (N | SDL |) | | _ | | | Cen | tral | Depo | osito | ry S | ervi | ces (| Ind | ia) L | imite | ed (C | DSL | .) | | |
| Depository Participant Name | | | | | | | | | | | | eposit articip | | mo | | | | | | | | | | | | | | |
| DP ID No. | | | N | | | 1 | | | | | | rget IE | | une | | | | | | | | | | | | | | |
| Beneficiary Accour | nt No. | | | | | 1 | 1 | İ | 1 | 1 | | rgerit | | | | | 1 | | | | | | | | 1 | 1 | 1 | 1 |
| Please note when | | ts are | allott | ted ir | ו Dem | nat N | lode, | State | ement | t of <i>i</i> | Accou | nt wi | ll be | issue | d by | the | Depo | sitor | у со | ncern | ed. | Furt | her all | otme | ent o | f unit | s (thr | ough |
| additional purchas | <u> </u> | | | | <u> </u> | | | | | | | | | | | | | | _ | | | 5 | | | itory | Partic | ipant | only. |
| individual investors | applying | | | | | | | | | | | | | | | | | | | | | | | (S | SEE | ΝΟΤΕ | ∃ 10) | |
| Name of the Nomir | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of the Guard | lian | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Percentage | | | | | | | | | | | | | | | | | | | _ | | | | | | | | | |
| Relationship Address of Nomine | 20/ | Date of Birth* D D M M Y Y Y Y ⊗ | | | | | | | | | | | | | | | rdian | | | | | | | | | | | |
| Guardian | 30/ | | | | | | | | | | | | | | | | | | | | | | | | | e of Mi | | |
| Name of the Nomin | nee | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of the Guard | lian | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Percentage | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relationship | | | | | | | | | | | Date | of Bi | rth* | D | D | M | \mathbb{M} | Y | Y | Y | r | Y | \otimes | | | | | |
| Address of Nomine Guardian | ee/ | | | | | | | | | | | | | | | | | | | | | | | | | e of Mi | | |
| Name of the Nomi | nee | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of the Guard | dian | | | | | | | | | | | | | | | | | | | | + | | | | | | | |
| Percentage | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relationship | | | | | | | | | | | Date | of Bi | rth* | D | D | M | M | Y | Y | Y | r | Y | \otimes | | | | | |
| Address of Nomine Guardian | ee/ | | | | | | | | | | | | | | | | | | | | | | | | | omine e of Mi | | |
| 11B. NOMINATIO | DN : I do | o not v | wish t | to no | minat | te an | iv per | son a | at the | tim | e of m | nakino | a the | inve | stme | nt. | | | | | | | (Man | uatory | Incas | | | ninee) |
| Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. DECLARATION of all the scheme indirectly, in mak legitimate source: laws or any notifi Fund do not attrace Person' under the (v) the ARN holde schemes of vario Association of the the transactions of have been remitte hold a Permanent aggregate of lum information provi liable in case any in any form, mod us to the Fund, its not limited to SE regulatory/investi you forthwith info time to time; (xii) and beneficial ow change in any infor to share informati such as withholdi domestic or overs my account(s) and * Applicable to ot | related ing this s and is is cations, t the pro- US Sec r has dis us mutu- e Compai- or and o compai- or and o compai- ded in the of the sp e or mare Sponso Bl, the F gation ag rmed in Towards yrmer info ormation on ming agent seas regid d (e) I/We | docur investi not he directi ovision urities closed al func ny, Bye n beha broad t Num and SI nis app oecifie ner, a financi gencie writing s comp rmatio provid y acco ts for t ulators e unde | ments ment ld or i ld or i is of F laws d to m ds fro e laws alf of throuber a P ins bolicati d info U ar c, trus is lor i g abo bolianco n an ded; (ount v the pus/ tax | s and ;; (ii) desig ssuec Foreiq () / re- foreiq s, Tru the C ugh a s, Tru the C ugh a s, Tru ugh a s, Tru a s, Tru ugh a s, Tru ugh a s, Tru a s, Tru a s, Tru a s, Tru a s, Tru a s, Tru a s, Tru a s, | I I/We the ar gned f d by a gn Cor sident all the mongs st Dec Compa porvo bld on ents i form to tion is the in other r y chai th tax tain c ccertai celeval se of e orities at I an | here mour for th any g ntribut t of C e con st wh ed or any/F ved b. t wh form t any/F ved b. t opgeth t four t thirc t thirc t thirc ensur s, the a s, the a s, the a s, the a s, the a s, the s, the a s, the s, the s, the s, the a s, the s, the s, the s, the s, the s, the a s, the | eby cc nt inv e pur covern tution Canad and and canad e Partn firm/T ankin single rolling ner wi nd to nation ployee lndia, d part /modi matic catior ccums x auth ing a Fund e are | onfirm ested pose menn Regu a are ershi rust; g cha PAN g 12 th its be fa prov es/RT. the y, on fificati on sha as an etance oprop I may requi | n and l/to b of co tal or lation not e (in the me o ip Dece (vii) * montel se or ided I As or tax/ree a nee con to varing d doo cs; (inc s; (c) or iate of allow a | dece inv ontra statu s According s According s According f the effect are s According f the effect are any s any s any any s any s any any any any any any any any any any | clare til vested ventio utory i t ("FCI le for m of tr be fund nd ress We am rwww am rwww am rwwwww we am rwwww am rwwwwww am rwwwww am rwwwww am rwwwww am rwwwww am rwwwww am rwwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwwww am rwww am rwww am rwwww am rwwww am rwww am rwww am rwww am rwww am rwww am rwww am rwww am rwww am rwwww am rwww am rwww am rwww am rwwww am rwwww am rwwww am rwwww a rwwww a rwwww a rwwww a rwwww a rwww a rwww a rwwww a rwww a rwww a rwww a rwww a rwww a rwwww a rwwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwww a rwwww a rwww a rwww a rwww a rwww a rwww a rwww rwww a rwww a rwww a rwww a rwww a rwww a rwwww rwww rwww a rwww a rwww rwww rwww a rwww a rwwww rwwww rwww rwww rwwww rwww rwww rwww rwww rwwww rwww rww | hat (i, hat (i, by r autho RA"); invest rail cc rail cc ra |) I/We ne/us any a vrity fi (iv) I/ ttmen ommi eing r nos pa Non F r Non F r Non r r Non r r Non r r Non r r Non r r n Non r r n n r n r n Non r r n Non r r n r n r n r n r n r n r n r Non r r r n r n r n r r n r n r n r r n r r n r r n r r n r r n r r n r r r n r r n r r n r r r r n r r r r n r r r r n r | a have in the text of the room to the text of the text of the text of the text of text of text of text of text of text of text of text of text of text of text of text of text of text of text of text of text of text of t | e noise science of the science of th | t recchema regula to tim e awa e Fur ny ot nded f Ind Exter Exter () issi- poes n to the cost oblig oblig () oth epres es, up enta oblig () we eve () (a) 1 We e eve () (a) 1 We eve () (a) 1 We eve () (a) 1 We eve () (a) 1 (b) (a) 1 (b) (a) (a) (b) (a) (a) (b) (a) (b) (b) (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b | eived e(s) c attions ne; (iii are th ad an her m to m pompa ian N- mpa odate l or s e bess enting odate l or s ide l gation ner ac the Fu nsure a valid also k by pro y out | or the second se | been BI Mu any s e mo U.S. J /e an (), pay (), | inductual I tatute nies i berso //are // / / / / / / / / / / / / / / / / / | ed l Funce or l nve: n (w not i to h per t, I/V n an nt/FC tion 00/- cowle autho cial it is e/us atio quire u withor for ov t on t t | by a d ("ttl legis sted vithin a U.S. iim/h the l by a d th CCNR a Age orize | ny reb he Fur lation by mo the d S. person er for Memo m/are at fund Accou m/are at fund Accou may be sees f a and l y you t iss and orities ally re- the sai ally re- the sai ally re- the sai ally re- the sai ally re- the sai may b seek 30 da me) the for- me) the see th | pate (md") or ar e in t efinit son/r ar the c r and d auth ds fo ond a the c r and d auth ds fo o dis whe solief o dis whe solief o dis whe solief o dis whe solief addit ys sh a fo o n r ar the c o dis solief o dis dis solief o dis dis solief o dis dis dis dis dis dis dis dis dis dis | or gi is definition of the second ion of the second ion of the second ion of the second information of the second information of the second ion of the secon | fts, di rived her ap chem of the ent of ent cc and A d to e subs *** I/W asand I/We si inclu nd ot! We si ther ther ther ther ther ther ther ther | rectly throo opplicates of term Cana mpeter tricles on that /e do n that /; (ix) shall k you fr onal, e be e oblication | y or ugh able the 'US ada; ting s of into ons the into ons the but uch prom tax ged ons t by |
| Applicants must sign as per mode of holding | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ⊲(x) | | | | | | | | (| X) | | | | | | | | | (X) | | | | | | | | | |
| | 1st App | licant / | Guar | rdian / | / Auth | orise | d Sigr | natory | v | 2r | nd App | licant | /Aut | horise | ed Sig | gnato | ory | | | 3rd | App | olicar | nt/Aut | horis | ed S | ignato | ory | |

Place

Date