COMMON APPLICATION FORM



PLEASE READ THE INSTRUCTIONS BEFORE FILLING UP THE FORM. All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and In BLOCK LETTERS (all points marked* are mandatory). For SIP investment use the separate SIP Form.

MUTUAL FUND

	DISTRIBUTOR INF	ORMATION	FC	R OFFICE USE ONLY						
Name & ARN of Distributor / RIA Code*	Internal Sub-Broker Code (as alloted by Distributor)	Sub-Broker ARN Code No.	Employee Unique Identification No. (EUIN)^	In-House number as per K-BOLT	Date, Time and Number as per Time Stamping Machine					
ARN -	ARN -		Е							
rson of the above distributor/sub brok	nat the EUIN box has been inten ker or notwithstanding the advi- my/our consent to share/provice	tionally left blank by me ce of in-appropriateness	/us as this transaction is executed w , if any, provided by the employee/r	ithout any interaction or ad elationship manager/sales ا	vice by the employee/relationship manager/sale					
SIGNATURE (s)	SOLE / FIRST APPLICANT		SECOND APPLICANT	-	THIRD APPLICANT					
ofront Fee or commission shall be paid o	directly by the investor to the AM	FI registered Distributor b		various factors including the						
TRANSACTION CHARGES			Fuistin a lauresteu in Mutus	J. Francis	(Refer Instruction No.XIX)					
I am a First Time Investor in			an Existing Investor in Mutua		nutual fund investor) or ₹100/- (for investo					
ther than first time mutual fund inv										
INVESTMENT TYPE (Please tick	k any one)	MOD	E OF HOLDING (Please tie							
LUMP SUM SPECIAL SI				· ,	ase of ambiguity when applicant are more than one)					
EXISTING UNIT HOLDER'S	SINFORMATION (Plea:	se fill in your details r	nentioned below and proceed t	to section 5)						
Folio No.				Require Hard (Copy of Annual Report Yes No					
. APPLICANT INFORMA	TION (Mandatory) то	BE FILLED IN BLOCK	LETTERS* APPLICANTS FR	OM US and CANADA WIL	L NOT BE ACCEPTED (Refer Instruction No 7.					
ME OF SOLE /1ST APPLICANT Mr.	Ms. M/s.									
I/PEKRN	(Submit verified	copy of PAN) CKYC No.			DOB/DOIS D D M M Y Y Y Y					
obile No.#		nail ID.#								
obile no. specified above belongs to	o (Please tick (✓) any one opti	on Self Spou	se Dependent Parents C	Dependent Children	Dependent Siblings Guardian POA					
nail id specified above belongs to (F	Please tick (✓) any one option	Self Spou	se Dependent Parents D	Dependent Children	Dependent Siblings Guardian PO					
No. (Legal Entity Identifier) of Nor e: In case the first applicant is Non Indi n. LEI No. is Mandatory for transaction	ividual please attach FATCA, CRS	& UBO Self Certification	Proof of Date of Birth of Minor	Rirth Cetificate Passnort	Valid Upto//202_					
UARDIAN DETAILS (In case Fi										
Ir. Ms. M/s.										
			Relationship with Minor/Designa	ation						
N/PEKRN	Date	e of Birth D D M	M Y Y Y Y	C No.						
DRESS										
			СІТУ		(As per KYC Records)					
TATE			COUNTRY		PIN					
SI. S T D		OFF. S T D		FAX S T	D					
COND APPLICANT Mr. Ms.										
N/PEKRN	СКУС	No.		Date	of Birth D D M M Y Y Y Y					
obile No.#	Fr	nail ID.#								
lobile no. specified above belongs to			se Dependent Parents C	Dependent Children	Dependent Siblings Guardian POA					
mail id specified above belongs to (F	Please tick (✓) any one option	Self Spou	se Dependent Parents C	Dependent Children	Dependent Siblings Guardian POA					
IRD APPLICANT Mr. Ms.										
N/PEKRN	СКУС	No.		Date o	of Birth D D M M Y Y Y					
obile No.#	Er	nail ID.#								
obile no. specified above belongs to				Dependent Children						
mail id specified above belongs to (F										
MS and/ Email ID will be used as t					ill be treated to have "opted out".					
CKNOWLEDGEMENT SLIP					1					
			الم-مالمحمد	on for allatmant	JM FINANCIAL MUTUAL FUND					
ceived from: Mr. / Ms. / M/s heme			an application		Collection Center's Stamp &					
neme le Cheque No			Option		Receipt Date and Time					
Bank and Branch			_ AIIIOUIII (\)	DIAWII						
			oad structure (please refer Schem	ne Information						

Document)

STATUS																										
Resident Indiv	vidual 🗌 NRI		AOP/BOI Ba	ınk 🗌	Con	npany		Body	/ Cor	rpora	ite	Pa	rtner	ship F	irm		FI [F	11		Gove	rnm	ent l	Body	H	IUF
PIO PSU	J 🗌 On beha	lf of	f Minor (RI) 🗌 Or	n behalf	of M	inor (N	IRI)	S	ocie	ty	So	ole Pro	priet	tor	T	rust /	Char	ities	/NC	GO's		Mut	ual F	unds		
Defence Estab	_		O* (Mandatory) (FC											rs (if s	•							_				
*"Non-profit organiza a trust or a society un	ation" means any or oder the Societies	entity Regis	y or organisation, const stration Act, 1860 (21 of	ituted for 1860) or	religio any sii	ous or c milar St	harita ate le	ıble pur gislatio	pose: n or a	s refer a Com _l	rred to pany	o in clau register	ise (15 ed un	i) of sed der the	ction e sect	2 of the ion 8 o	e Inco f the (me-t Comp	ax A cani	es Ac	61 (43 :, 2013	of 1 3 (18	961), of 201	that is I3).	register	ed as
We are falling unin clause (15) of	nder "Non-Pro f section 2 of t	fit O he Iı	Organization" [NPO] ncome-tax Act, 196) or any similar Stat	which h	nas bo	een co 1), and	nstit d is r	tuted egiste	for red	eligio as a t	ous o trust	r char	itable ociet	purp	oose: der t	s refe	rred cieti	to es		Yes						
Act, 2013 (18 of		300)	or arry sirrilar state	e legisia	CIOIT	or a cc	,iiipe	arry re	giste	i cu c	unac	i tile s	ectio	,,,,,	i tile	COIII	Parii	-		No						
If yes, please qu	ote Registratio	n N	o. of Darpan portal	of Niti A	Aayo	g																				
your entity name in t	the above portal a	ınd n	firm with the above info may report to the releva to deduct such fines/cha	ant autho	rities a	as appli	cable.	. We an	n/are	aware	e that	we may	y be lia	able fo	r it fo	r any f	ines c	or cor	nseq	uenc	es as r					
OVERSEAS AP	PLICANT DE	TAI	LS																							
ADDRESS (Mandato	ory for NRI/FII ap	plica	ant)																							
Country								Zip	Code	9					TIN	l No. (I	Mand	lator	y) _							
2. KYC DETAIL OCCUPATION (PI		ry -	Refer Instruction	n No. 2	KIII f	or de	tail	s)																		
First Applicant	Business Unlisted	Con		rofession Corpora		A	_	lturist ed Con	npan		ouse	wife Privat		Stude		Public	Defe Ltd.	nce			ovt. o	offici	al	F	orex De	ealer
GROSS ANNUAL																										
First Applicant			Below 1 Lac 1		5	- 10 La	cs _	10 - 2	25 La	acs	_	5 Lacs s on	- 1Cro		> 1	Crore		γ	[N	ot ol	der th	nan :	1 yea	r]		
Second Applican	t For Individual	В	Below 1 Lac 1 - 5	Lacs	5 - 1	0 Lacs	1	10 - 25	Lacs	: 🔲 >	> 25 L	_acs - 1	Crore	. 🗆	> 1 C	rore (Occu	oatic	n (F	Pleas	e spec	cify)				
Third Applicant	For Individual	B	Below 1 Lac 1 - 5	Lacs	5 - 1	0 Lacs	1	10 - 25	Lacs	: 🔲 >	> 25 L	_acs - 1	Crore	. 🗆	> 1 C	rore (Occu	oatic	n (F	Pleas	e spec	cify)				
POLITICALLY EXF	POSED PERSOI	N (PI	lease tick ✓) (refe	point r	10 11	in "in	stru	ctions	to t	he in	vest	ors fo	r filliı	ng up	the	appl	icati	on f	orn	ns)						
First Applicant	I am Poli	ticall	ly Exposed Person	I	am re	lated t	o Pol	litically	Ехр	osed I	Perso	on		Not	t App	licable	e									
Second Applican	t 🗌 I am Poli	ticall	ly Exposed Person	I	am re	lated t	o Pol	litically	Ехр	osed I	Perso	n		Not	t App	licable	е									
Third Applicant	☐ I am Poli	ticall	ly Exposed Person	I	am re	lated t	o Pol	litically	Ехр	osed I	Perso	n		Not	t App	licable	е									
For Non-Individu	als (Companie	es, T	rust, Partnership	etc.) (Ple	ase t	tick √)																			
Foreign Exchar	nge / Money Cha	nge	er Service Gamir	ı / Gamb	ling /	Lottery	/ / Ca	isino S	ervic	es	\	/loney	Lendi	ng / P	awni	ng	No	ot Ap	plic	able						
3. FATCA/CRS	DETAILS MA	AND	DATORY FOR INI	DIVIDU	ALS	(Non I	ndivi	dual In	vesto	ors sho	ould r	nandat	ory fil	ll sepa	rate l	FATCA/	CRS d	letail	ls fo	rm)	((Refe	r Inst	ructic	n No. X	(VIII)
Sole / F	irst Applicant /	Gu.	ardian				2r	nd App	olica	nt								3rd	Арі	plica	nt			POA		
Place & Country o	f Birth :		/	Place	& Co	untry	of Biı	rth : _				/			Place	e & Co	ounti	y of	Bir	th:				_/_		
Country	Tax Payer Ref ID No		Identification Type [TIN or other, please specify]		ount	ry		Tax P Ref II				tificati other, ple				Coun	try				Payer D No				tion Ty please sp	
1.	iter is ito	Τ,	,,	1.					, 110			/			1.						<i>-</i> 110			,	,,,,,,,,,	,1
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3.		+		3.										-	3.											
4. INVESTMEI			s Refer instruction	on No.	5)*?	? Inves	tmer	nt in m	ore t	han o	one So	cheme	cheq	ue sho	ould l	be issı	ued ir	ı fav	or o	f JM	FINAN	NCIA	L MU	TUAL	FUND -	-
Sr. No.	Scheme Name		sam paremase omy)					Plan					Op	tion				Sub	Op	tion				Amo	unt	
1. JM																										
2. JM 3. IM											\Box															
3. JM																		Т	ota	1						
			mation, the default plar f investing directly with															ım, S	che	me In						nent of
5. BANK ACCO	DUNT DETAI	LS																				(Re	efer li	nstruc	tion No). IV)
Account No.									Acc	count	Туре	Pleas	e √]	S	В	Curre	nt	NR	0	NRI	F	CNR		Direct	Remitta	ances
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(It is mandatory to furnish bank particulars failing which application shall be rejected. Please submit documentary proof of the bank mandate depicting the name of the 1st / sole applicant).

6. INVESTMENT AND PA	AYMENT DETAILS	Pls refer Instruction	s/ KIM) For e	ach applicatior	and for each plan/o	ption separate che	eque / DD to be subm	itted.
Cheque/DD No./DC Ref No.	Cheque/DD Amount (Rs.)	DD Charges (Rs.)	Gross Tota	al Amount (Rs.)	Bank Accour	nt Number	Bank &	Branch
Diago montion the application no	an the very even of the Cha	rue / DD. The details	af tha bank a		alacca mantain ta macci	and bank a second is		. □No
Please mention the application no If No, my relationship with the bar Documents Attached to avoid Thir	nk account holder is 🗌 Spo	ouse 🗌 Child 📗 Pai	rent 🗌 Relat	ive Others. A	application form witho	out this information	,	S NO
IN CASE OF PAYMENT B	Y 1ST APPLICANT (Please √)						
I / We hereby declare that the about from/by debit to my personal, ^^In case of Demand Draft, B Please attach foreign inward remi	/my joint Bank Account [Banker's certificate about th	against cash (in cas e source of funds is a	e of demand ttached.			ttance from abroad.		
7. PERMITTED THIRD P.	ARTY'S (WHO IS ISS	UING THE CHE	QUE) DET	AILS (Pls ref	er para on Third Pa	arty Payment)		
The relationship of 1st Applica Parent/Grand Parent/Relat						salary) Cus	stodian on behalf of	FII/Client.
Full Name of Third Party								
PAN No. of Third Party			(Please (√))	KYC Complian	Yes No (Ple	ase attach KYC ac	knowledgement & Re	efer instructions)
8. POWER OF ATTORNE	EY (POA) If investme	nt is being made	by a Const	itutional Atto	rney, please subm	nit notarised cop	ov of POA	
POA NAME Mr. Ms.						PAN/PEKI		
9. DEMAT ACCOUNT D	ETAILS (Please ensure tha	at the sequence of nam	es as mention	ed in the applicat	on form matches with the	hat of the Demat Acco	ount held with your Depo	ository Participant).
Do you want units in Demat I				ide the below				
☐ National S	ecurity Depository Lin	nited (NSDL)			Central D	epository Servic	es (India) Limited (CDSL)
Depository Participant's Nam	ie:							
DP ID No. IN Sin case of any ambiguity, AMC is at it	Beneficiary Account s discretion to either allot unit		tion or in phys	Target ID N		ional Information and	Scheme Information Doc	ument for details.
POA / Custodian Name:							KYC [Please ✓]	Proof attached
POA/ Custodian CKYC ID No. (KIN)				POA / Custo	odian PAN			
10. NOMINATION DETA	•	Refer instruction i	no. IV (und	er AMFI Best	Practices)]			
Sr. Name of Non		PAN	Allocation	Relationship	Nominee Da	ate G	iuardian Name	Guardian Signature
NO.	IIIICC	TAN	(%)	with Investo			n case of minor)	(not mandatory)
1.					DD/MM/Y	Y		
2.					DD/MM/Y	Υ		
3.					DD/MM/Y	Υ		
I/We DO NOT wish to not Declaration for opting of appoint my nominee(s) for my case of death of all the account assets held in the Mutual Fund	Dut of Nomination Mutual Fund units held i t holder(s), my/our legal h folio.	n my/our Mutual Fu neirs would need to	ınd folio and submit all th	understand the requisite doc	e issues involved in r uments issued by Co	non-appointment ourt or other such c	of nominee(s) and furt competent authority,	ther are aware that in based on the value of
DECLARATION & SIGNATURES: the section on "Prevention of Money Laur I/We have not received and will not received and will not receive sources and is not held or designed for the from time to time. It is expressly underst thereto and the investment is contrary to Fund, recover/debit my/our folio(s) with the agree that the Fund can directly credit all to him for the different competing Schem is the Investment Manager to the scheme Consent for sharing Information: I /We Mutual Fund/JM Financial Trustee Co. Pvt RIJA/RN Code is mentioned above.	the penal interest and take any a the dividend payouts and redem les of various Mutual Funds from es of JM Financial Mutual Fund. I	ppropriate action agains ption amount to my banl amongst which the Sche t would receive commissi	t me/us in case to details given a eme is being rec ion/distribution	the application, in the cheque(s)/paym bove. "The ARN holo ommended to me/ fees from JM Finan	event the units credited, re- lent instrument is/are retu der has disclosed to me/us us". JM Financial Services L cial AMC for distributing th	rned unpaid by my/our all the commissions (in .td. is affiliated to JM Fir ne mutual fund units of	thig any future investment the form of trail commission nancial Asset Management L the schemes launched by J	atsoever. I/We hereby further n or any other mode), payable Ltd (JM Financial AMC), which IM Financial AMC.
##Applicable to NRIs only: I / We* confir from funds in my / our* Non-Resident Ext	rm that I am / we* are Non-Residernal / Ordinary Account / FCNR	dent of Indian Nationality Account through direct	/ Origin and I /	We* hereby confirn n abroad.	that the funds for subscri	iption have been remit	ted from abroad through a	pproved banking channels or
Signature of Sole/First Applicar				d Applicant /Aut	h. Signatory	Signatur	e of Third Applicant/Au	ıth. Signatory
	·			••	· · · ·		••	,
Date: Note: In case the First Applicant copy. It is mandatory for investo & US and Canada Investors are n Please (✓) ☐ Repatriation basis	rs to be KYC compliant po ot permitted to invest in	rior to investing in Jl our Schemes. ^ In c	M Financial <i>N</i>	Лutual Fund.		ŕ	♥ Place: ection if the name do	es not match with PAN
CHECKLIST Please submit the following	documents with your applica	tion (where applicable).	All documents	should be original,	true copies certified by a	Director/Trustee /Con	npany Secretary /Authorise	ed signatory / Notary Public
Documents Resolution/ Authorisation to invest List of authorised signaturies with specia	men signatures	Individu	al C	ompanies Soci	eties Partnership Firm	ns Investment the	rough POA Trusts	NRI FIIS PIO

Documents	Individual	Companies	Societies	Partnership Firms	Investment through POA	Trusts	NRI	FIIs	PIO
Resolution/ Authorisation to invest		✓	✓	✓		✓		✓	
List of authorised signatories with specimen signatures		✓	✓	✓	✓	✓		✓	
Memorandum & Articles of Association		✓							
Trust Deed						✓			
Byelaws			✓						
Partnership Deed				✓					
Overseas Auditor Certificate								✓	
Notarised POA					✓				
Copy of PAN Card / PEKRN	✓	✓	✓	✓	✓	✓	✓	✓	
KYC Compliance	✓	✓	✓	✓	✓	✓	✓	✓	✓
PIO Card									✓
Foreign Inward Remittance Certificate							✓		✓
Aadhaar	✓								