



		SMART IN	VESTING			Shaping Tomorrow's Financial Planners®
RIA SEBI Regn. No:						
Broker/Agent Code ARN: 42964			SUB-BROKER: 00610			EUIN: E117141
Unit Holder Information						
Name of the First Applican	it:					
PAN Number : KYC:				Date of Birth :		
Father Name :				Mother Name :		
Name of Guardian :				PAN:		
Contact Address :						
City:	Pincode :			State : Country :		
Tel.(Off) :	Tel.(Res) :			Email :		
Fax (Off) :	Fax (Res) :			Mobile :		
Income Tax Slab/Networth :				Address Type :		
Place of Birth : Country of Tax Residence :						
Tax Id No. : Source of wealth :						
Politically exposed person /						
Mode of Holding:	Related to	T Officially CXP	osca persor	Occupation		140
Name of Second Applicant	+ •			Occupation	Details	
				Date of Birth :		
					un :	
Income Tax Slab/Networth : Place of Birth : Country of Tax Residence :						
Place of Birth :		Country of Ta	x Residence	:		
Tax Id No. :	<u> </u>	- I' II			l.,	Ta.
Politically exposed person /	Related to	Politically exp	osed persor	n etc. ?	Yes	No
Name of Third Applicant :		1				
PAN Number : KYC:			<u>:</u>	Date of Birth :		
Income Tax Slab/Networth :				Occupation Details		
Place of Birth :		Country of Ta	x Residence	:		
Tax Id No. :						
Politically exposed person / Related to Politically exposed person etc.? Yes No						
Other Details of Sole/ 1st Applicant						
Overseas Address:						
City: Pincode:				Country:		
Bank Mandate Details						
Name of Bank :				Branch :		
A/C No. : A/c Type :			•	IFSC Code:		
Bank Address :						
City:	Pincode :			State :		Country:
Nomination Details						
Nominee Name : Relationship :						
Guardian Name (If Nominee is Minor) :						
Nominee Address :						
City:	Pincode :			State :		
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<u>Declaration and Signature</u>						
☐ I/We confirm that details provided by me/us are true and correct. The ARN holder has disclosed to me/us all the						
commission (In the form of trail commisssion or any other mode), payable to him for the different competing						
Schemes of various Mutual Fund From amongst which the scheme is being recommended to me/us.						
☐ I /We has/have invested or desirous to invest in the Scheme(s) Mutual Fund under Direct Plan and agree to comply with the terms and conditions of the Scheme related documents.						
I/We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/NAV etc. in						
respect of my/our investment under Direct Plan of all Schemes managed by you, to the above mentioned RIA.						
Date : Place :						
Date :		I	Flace:			
İ		I			I	

3rd applicant Signature :

2nd applicant Signature :

1st applicant Signature :