Stamp & Signature



Common Application Form - Lumpsum Cum SIP Application Form (Form 1) Application No.

otributor Coda ADI							
stributor Code ARI	N-	Sub-Distributor Code	ARN-		de for Sub-broker/ mployee		EUIN No.
e hereby confirm that the E ce by the employee/relation ne employee/relationship m	UIN box has been intentionally nship manager/sales person o nanager/sales person of the dis	y left blank by me/us as this is a f the above distributor or notwith stributor and the distributor has n	an "execution-only" transaction without a Istanding the advice of in-appropriateness not charged any advisory fees on this trans	ny interaction or , if any, provided action.	First Holder	Second Hold	er Third Holder
		one of the below) (Re					,
I am a	a first time investor in m	utual funds (₹ 150 will be	deducted) OR		I am an existing invest	or in mutual funds (₹	100 will be deducted)
		utor who has 'opted in' for tr					
		-	d distributor based on the investors	'assessment o	f various factors including	service rendered by	the distributor.
I. INVESTOR DET	TAILS (Please refer	to the Instruction No	o. A, C, D, S)				
xisting Folio Numb	ber		/ *Date	of Birth	D M M Y	Existing Inves *Mandatory f	tor may not fill in Section 4, 5 & 6 or Minor
FIRST HOLDER DE	ETAILS (please ✓)	Individual Non	Individual (please refer instruc	ction D for UBC)	PAN/PERN	PAN/PERN KYC Proof Compliance
Name						(mandatory)	enclosed Complianc
You must fill in	Mobile No.		Email ID				
Status	Individual (Indi	an National) PIO	Minor (through Guardia	n) HUF	FII / Sub-acco	unt Sole-pro	prietor Partnership Firn
		Company (other than B	` <u> </u>	Financial		her Body Corpora	
		ligious / Non-profit org	anisation Educational li	nstitution	Mutual Fund	PF Trust (Gratuity Fund NPS Trus
	Pension / Retire	ement / Superannuation	n Fund Private Trust	Co-op. Socie	ety Society / AOP	BOI Other	
Note for non-indiv	idual investor: Pleas	e attach the mandatory	Ultimate Beneficial Ownershi	p (UBO) Dec	laration Form availabl	e on our website, a	long with the application forr
Residential / Tax S	Status Resid	ent Non-r	esident Repatriable (NRE)	No	n-resident Non-repatr	able (NRO)	
DETAILS UNDER F	ATCA / FOREIGN TAX	LAWS					
Citizenship/ Nation	ality		Country of	birth/ Incorp	oration/ Formation _		
Country of residen			Are you a	esident in ar	y country other than	ndia for tax purpos	ses. Yes No
If you placed india	التناجية والمستنوع الواجلو						
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Name		(mandatory)	enclosed Complian
DETAILS LINDER EA	NTCA / FOREIGN TAX LAWS		
Citizenship/ Nationa	·	rmation	
Country of residence	e Are you a resident in any country	other than India for tax purposes.	Yes No
If yes, please indica	ate all countries in which you are resident for tax purposes and the associated Foreign Tax Identif	ication Number below.	
	Country of Tax Residency*	Tax Identification Num	ber
*To include USA when	re the investor is a US Citizen or Greencard holder. Please provide Social Securities Number if Tax ID number is	not issued.	
ADDITIONAL KYC			
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Net-worth (Mandat	ory for Non-Individuals) Rs as on	D D M M Y Y Y Y (N	lot older than 1 yea
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Agriculturist	Retired Housewife Student Others Please sp	pecify	
	s / profession, indicate the details (including nature of goods/ services dealt in)	In the a Physical C	
I am PEP	I Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee /Who	le time Directors) P refer instruction X)	
THIRD HOLDER DE		PAN/PERN	PAN/PERN KYC
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Name			
DETAILS UNDER FA	NTCA / FOREIGN TAX LAWS		
Citizenship/ Nationa	ality Country of birth/ Incorporation/ Fo	rmation	
Country of residence			Yes No
If yes, please indica	ate all countries in which you are resident for tax purposes and the associated Foreign Tax Identif	ication Number below.	
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Toll free 1-800-2-666688 Available between 8.00 am to 7.00 pm on business days only.

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Please note our investor service email id investormf@idfc.com

www.idfcmf.com

	ITIONAL KYC INFORMATION s Annual Income (Rs.) [Please tick(√)] □ □	elow 1 Lacs	Floor 101o	cs 10 Lacs - 25 Lacs	s 25 Lacs - 1 Cror
OR	· / · · · / · D	delow 1 Lacs	5 Lacs - 10 La ore above 10 Crore		23 Lacs - 1 0101
Occu	worth (Mandatory for Non-Individuals) Rs. upation (please tick any one and give brief details): Agriculturist Retired Housewife		as on E		(Not older than 1 year
Politi	ase of business / profession, indicate the details (ir ically Exposed Person (PEP) Status (Also applica am PEP	able for authorised signatories/Promot	ers/Karta/Trustee /Whol	e time Directors) inition of PEP refer instruction	X)
Mode	e Of Holding / Operation				
	Single Anyone or Survivor	Joint As per res	olution (Default op	tion is anyone or survior)	
2. INV	TESTMENT & PAYMENT DETAILS (Please refer to a	the Instruction No. E. J. N)			
	of Investment (refer to instruction A).		er to point J (v) of the instruction	s) Photo ID No. (for Micro	o SIP)
Paym	ent Type (please ✓) : Self Third Par	rty Payment (please fill the 'Third Party	Payment Declaration Form	7)	
Schen	ne IDFC			Pla	n
Option	n Growth Div - Reinvest Div -	Payout Div - Sweep* Div	V Frequency		
*Divid	end Sweep Option to (Scheme & Plan Name) IDFC			Growth Div -	Payout Div - Reinv
Dividen	nd Sweep Option is available from all Debt Schemes to Eq	juity and Equity to Debt Schemes of IDFC N	lutual Fund. Please fill in all	details of Sweep.	_
		RTGS/NEFT Funds Transfer	Instrument No.	Date	D D M M Y Y
M	SCB Debit Mandate (availa Amount (₹) (i)	ble on form 20)	Account No.		
\mathbf{z}	DD charges, (₹)(ii)				
L	Total Amount (₹) (i) + (ii)	in figs	Branch & City		
	in words		Account Type Cu	rrent Savings NF	RO NRE FCNF
	Initial SIP Installment Amount* (Rs.)	Branch) No	Dat	e M M Y Y Y Y
-	*Subsequent SIP instalment amounts must be ed Monthly SIP Date	qual to this amount.	SIP	Installment Amount (Rs.)	Payment mode
SIP	Standard DD Standard From (any date of the month)		/ Y Y D 5,0	000 10,000 25,000	+
	Default Default From Default From	M M Y Y Y Y To 1 2 2	2 0 9 9 an	,000	Standing Instruction (Please also fill form 2
	In case of the Monthly Option if no date is selected in the fo	orm, the default date is 10th of every month.			,
3. UNI	IT HOLDING OPTION (Switch not allowed for Demat he	oldings. Redemption through Stock Exchan	ge Platforms/ DPs only)		
Pi	hysical Mode Demat Mode (Investors opting	for units in demat form may please fill the	details below. Nomination p	rovided in Demat Account shall be	considered.)
300	□ NSDL OR □ CDSL	Depository Participant Name			
DEMAT MODE	Depository Participant (DP) ID (NSDL only)	Beneficiary Account Number (NSDL	only) Depository F	Participant (DP) ID (CDSL only	′)
DEN					
	RRESPONDENCE ADDRESS (P.O.Box Address may rill be automatically updated in our records. Investors resid				pplicant as registered with
City		Ctata	Dire	ado / 7in	V
City _	and Address for NDI- / DIO- / Till- (Co.)	State	Pin co	ode / Zip	You must fill in
•	eas Address for NRIs / PIOs / FIIs (Mandatory)	State	Pin co	ode / Zip	You must fill in
-	eas Address for NRIs / PIOs / FIIs (Mandatory)	State	Pin co	ode / Zip	You must fill in

Name of the Bank			MF has DC facility (Please refer to the Instruction No. I)
		Branch	
Account Number		City	
Account Type Current	Savings NRO NRE	FCNR Others	(please specify)
MICR Code	RTGS/NEFT Code		
Note: in case of additional parches, a cheque I / We understand that the instructions to the bank for dividend / refund proceeds. In case the bank does not account for reasons of incomplete or incorrect infort case it is not possible to make payment by DC/NEFT/E If however the unit holders wish to receive	r Direct Credit / NEFT / ECS will be given by the Not credit my /our bank account with / without assination, I / We would not hold IDFC Mutual Fund recCS.	lutual Fund, and such instructions will be adequate gning any reason thereof, or if the transaction is de sponsible. Further the Mutual Fund reserves the rig	layed or not effected at all or credited into the wron ht to issue a demand draft / payable at par cheque i
6. NOMINATION DETAILS (Mandatory informati	on. Please select the desired option.) (Read instr	uctions in connection with Nomination given in thi	s KIM)
Nominee Name Address Nominee Date of Birth (mandatroy for minor) Guardian Name (if nominee is a minor)		Proof of minor DOB submitted (Optional)	
Address			Signature of Nominee / Guardian (optional)
Witness NameAddress			Signature of Witness
I/We do not wish to nominate any personate in case of more than one nominee, ple	•	s KIM or available with any of our ISCs or or	Signature of investor our website
7. EASY TRANSACT (for Resident and NRI Indivi	dual (including minors), Sole Proprietors & HUF)		
All communications will be sent by default to	the registered E-mail ID / Mobile No. In cas	e you wish to receive physical communicat	ion please ✓
I WISH TO APPLY FOR TRANSACT ONLINE	Yes No		
I WISH TO APPLY FOR TRANSACT ONLINE Note: With this new way of transacting with us - without any red download account statements online at www.idfcmf.com		d password and can transact right-away by activating the lin	k. Access your account 24x7 / purchase / redeem / switch/
Note: With this new way of transacting with us - without any red	juirement of a PIN, you can create your online username an	d password and can transact right-away by activating the lin	k. Access your account 24x7 / purchase / redeem / switch/
Note: With this new way of transacting with us - without any red download account statements online at www.idfcmf.com	der to the Instruction No. K) d features of the scheme(s) and associate e Information Document (SID) and Key Infor to abide by the terms, conditions, rules and and does not involve and is not designed for aws, Anti Corruption Laws or any other applied we have not received nor have been induce into any and am/are authorised to make this invest all markets under any order/ruling/judgment not completed by me / us to the satisfaction applicable NAV prevailing on the date of see information provided above is/are true, certrue or misleading or misrepresenting, I/we atton in future and also undertake to provide nanger, all / any of the information provided agement Company, Trustees, their employes agencies, the tax/revenue authorities and the commissions (in the form of trail commits being recommended to me / us. 1. I/we do not have any other existing investments of the provided and we are Non Residents Indians / Persitates Securities Act of 1933, or as defined ted funds from abroad through approved batter in the provided funds from abroad through approved batter funds from abroad through approved for the information and through approved batter funds from abroad through approved batter funds from abroad through approved for the information provided funds from abroad through approved for the information provided funds from abroad through approved for the information provided funds from abroad through approved for the information provided funds from abroad through approved for the information provided funds from abroad through approved for the information provided funds from a funds funds from a	ed risk factors. Having read and understoor mation Memorandum (KIM) of the scheme(s). I/ We the purpose of the contravention of any Act, cable laws as applicable to me/us from timet d by any rebate or gifts, directly or indirectly istment as per the Constitutive documents/ a etc., of any judicial or regulatory authority. of the Mutual Fund, I/ we hereby authorise th such redemption subject to applicable exit loorrect and complete to the best of my/our kishall be liable for it. I/We also undertake to kany other additional information as may be ready me/us, including all changes, updates to ses, agents / service providers, other SEBI regother investigation agencies without any oblission or any other mode), payable to him for the intensity of Indian Origin / Foreign Portfolio Inversiby the U.S. Commodity Futures Trading Co	If the contents of the Statement of Additionals) and the Addenda issued till date, I/we hereby hereby declare that the amount invested in the Rules, Regulations, Notifications or Directions of time. I/We confirm that the funds invested in making this investment. I/We am/are eligible uthorisation(s). I/We further confirm that I and a Mutual Fund, to redeem the funds invested in ad and undertake such other action with such an another action with such provided and belief. In case any of the above pour informed immediately in writing about a pour end. I/We hereby authorise you such information as and when provided by me pistered intermediaries or any Indian or foreign gation of advising me/us of the same. The different competing Schemes of various the together with this proposed investment with stors but not United States persons within the promission, as amended from time to time to



Bank use Mandate Ref. No.

ECS Autosave & Standing Instructions Form for Systematic Investment Plan (SIP) (Form 2) **Application No.** Internal Code for Sub-broker/ Distributor Code ARN-**Sub-Distributor Code** ARN-**EUIN No.** I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction. **ECS Autosave Debit Mandate for SIP** Authorization to pay SIP installments through Electronic Clearing Service (ECS) / Electronic Debit I/We hereby, authorise IDFC Mutual Fund or their authorised service provider for IDFC Asset Management Company Limited to debit my/our bank account by ECS (Debit Clearing) / Electronic Debit for the collection of SIP installments. **UNIT HOLDER INFORMATION Existing Folio Number** Name of the First Holder SYSTEMATIC INVESTMENT PLAN DETAILS Name of the Scheme Plan SIP Installment Amount (Rs.) Monthly SIP Date (10, if no date is mentioned) **SIP Enrollment Period** 5,000 10,000 25,000 Standard Standard From SP (any date of the month) 50,000 1,00,000 Default any other Default 2 2 0 (10th of every month) amount BANK DETAILS (Centralised Bank Account (CBS) Number is mandatory for ECS and Direct Debit. Enclose a blank cancelled cheque or copy thereof) Name of the Account Holder Name of the Bank **Branch Account Number** City Savings Current NR0 NRE **FCNR** Others (please specify) **Account Type MICR Code** (Please enter the 9 digit number that appears after the cheque number) Please specifically mention the MICR code of you bank branch in case you have a payable at par cheque book. In case of incorrect/incomplete bank details it will be captured from attached cheque copy on a best effort basis. Having read and understood the contents of the Statement of Additional Information (Sal) of IDPC Mutual Fund, Scheme Information Document (SID) and Key Information Memorandum (KIM) of the scheme(s) and the Addenda issued till date, I/we hereby apply for registration of Systematic Investment Plan (SIP) as indicated above and agree to abide by the terms, conditions, rules and regulations governing the Scheme(s) and the SIP. I/We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the Taxation Laws, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws as applicable to me/us from time to time. I/We confirm that the funds invested in the Scheme(s), legally belong to me/us and I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We am/are eligible Investor(s) as per the Constitutive documents and am/are applicable to make the constitution of the contravent of the co authorised to make this investment as per the Constitutive documents/authorisation(s). I/We further confirm that I am not/we are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any judicial or regulatory authority. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the Mutual Fund, I / we hereby authorise the Mutual Fund, to redeem the funds invested in the Scheme(s), in favour of the applicant, at the applicable NAV prevailing on the date of such redemption subject to applicable exit load and undertake such other action with such funds that may be required by the Law. I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I/We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the Mutual Fund or the bank responsible. I/We further undertake that any changes in my/our Bank details will be informed to the Mutual Fund immediately. I/We hereby acknowledge and confirm that the information provided above is/are true, correct and complete to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/we shall be liable for it. I/We also undertake to keep you informed immediately in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required at your end. I/We hereby authorise you to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us to the Mutual Fund, its Sponsor, Asset Management Company, Trustees, their employees, agents/service providers, other SEBI registered intermediaries or any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies without any obligation of advising me/us of the same. The ARN holder has disclosed to me / us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me / us For micro-investments only: I/We confirm that I/we do not have any other existing investment in the schemes of IDFC Mutual Fund which together with this proposed investment will result in aggregate investments exceeding Rs.50,000/- in a year. For NRIs / PIOs / FPIs only: I / We confirm that I am / we are Non Residents Indians / Person(s) of Indian Origin / Foreign Portfolio Investors but not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, or as defined by the U.S. Commodity Futures Trading Commission, as amended from time to time or residents of Canada, and that I / we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External / Non-Resident Cordinary / FCNR Account maintained in accordance with applicable RBI guidelines. SIGNATURE/S AS PER IDFC MUTUAL FUND (MANDATORY) SIGNATURE/S AS PER BANK RECORDS (MANDATORY) Sole / 1st applicant/ Sole / 1st applicant/ Guardian Authorised Signatory Guardian Authorised Signatory 2nd applicant/ 2nd applicant/ **Authorised Signatory Authorised Signatory** 3rd applicant/ 3rd applicant/ **Authorised Signatory Authorised Signatory** FOR OFFICE USE ONLY (Not to be filled in by Investor) Recorded on Scheme Code Recorded by Credit Account Number

Customer Ref. No.

	uto Debit form for Systematic Investment Plan (SIP)	
UNIT HOLDER INFORMATION		
Existing Folio Number	Name of the First Holder	
Debit Mandate for HDFC Bank / Stand To, The Manager,	dard Chartered Bank / Kotak Mahindra Bank / ICICI Bank Account Holders Only. Application 1	or Standing Instruction Maintenance for
	rd Chartered Bank / Vetek Makindra Bank / Victor Bank	
	rd Chartered Bank / Kotak Mahindra Bank / CICI Bank	Date DDMMYYYY
Sub: Request for Maintenance of a S		Date DDIVINI
I/We	standing instruction for Sir	
•	onthly basis (as a Standing Instruction) from my / our following Current / Savings Account and rem	nit the same to IDEC Mutual Fund as per the
details given below.	many basis (as a stantang instruction) normaly our following our only savings Account and for	int the same to ibi o mutuan unu as per tin
Nature of Instruction	Standing Instruction	
Purpose of Standing Instruction	Payment of SIP Installment of IDFC Mutual Fund	
Name of the Scheme	Plan	Option
Debit Account no.	'	
Account Holder's Name		
SIP Amount (Rs.)		
SIP Enrollment Period	Start Date M M Y Y End Date M M Y Y Default option is perpetual	i.e. Dec. 2099.
Frequency & Date	Monthly (Please provide the date) D Default date is 10th of every month.	
• •	details it will be captured from attached cheque copy on a best effort basis.	
time to time. I / We confirm that the funds investment. I/We am/are eligible Investor(s) that I am not /we are not prohibited from acc In the event "Know Your Customer" process of the applicant, at the applicable NAV prevai I/We undertake to keep sufficient funds in its delayed or not effected at all for reasons or will be informed to the Mutual Fund immedia I/We hereby acknowledge and confirm that to be false or untrue or misleading or misre future and also undertake to provide any oinformation provided by me/ us, including al agents / service providers, other SEBI regi agencies without any obligation of advising I The ARN holder has disclosed to me / us all which the Scheme is being recommended to For micro-investments only: I/We confirm investments exceeding Rs.50,000/- in a year For NRIs / PlOs / FPIs only: I/ We confirm tunder the United States Securities Act of 19 from abroad through approved banking char Yours faithfully,	he information provided above is/are true, correct and complete to the best of my/our knowledge and belief. In coresenting, I/we shall be liable for it. I/We also undertake to keep you informed immediately in writing about any ther additional information as may be required at your end. I/We hereby authorise you to disclose, share, re I changes, updates to such information as and when provided by me/ us to the Mutual Fund, its Sponsor, Asset stered intermediaries or any Indian or foreign governmental or statutory or judicial authorities / agencies, thee/us of the same. the commissions (in the form of trail commission or any other mode), payable to him for the different competing me/us. that I/we do not have any other existing investment in the schemes of IDFC Mutual Fund which together with	rebate or gifts, directly or indirectly in making documents/ authorisation(s). I/We further con leem the funds invested in the Scheme(s), in failed that may be required by the Law. In above are correct and complete. If the transact undertake that any changes in my/our Bank de lase any of the above specified information is for changes/modification to the above information mit in any form, mode or manner, all / any of Wanagement Company, Trustees, their employ that is the control of the above of the above information at a control of the above information and the second of the above information and the second of the second of the above information and the second of the above information and the second of the s
•		
	Amount:	
	SIP End Date: Next SIP Date:	
Maintained by:		
	d Chartered Bank account holders only.)	
To Branch Manager - Standard Cha		
=		
	unt nofor	
Rs. (in figures)	Rs. (in words)	
to pay for the purchase of Scheme_		
event of a holiday). I/We hereby auth	uction will be conducted on the effective date specified above (or the following business day in the lorize SCB to make the payment from my/our account and a cheque in support of such debit will ndertake to keep sufficient funds in my / our account to enable you to carry out this instruction.	
Date		



MUTUAL FUND Systematic Transfer Plan/Systematic Withdrawal Plan (FORM 3) Application No. Internal Code for Sub-broker/ ARN -**EUIN No.** Distributor Code | ARN -**Sub-Distributor Code Employee** I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction. 4.1. Existing Unit Holder Information Name of the First Holder Folio No. PAN/PERN (mandatory) Enclosed PAN/PERN Proof KYC Complicane 4.2. Systematic Transfer Plan (STP) (Please mention the PAN/PERN without which, this application form will be considered incomplete and is liable to be rejected.) Please arrange for STP with the following options - Fixed Amount Rs. (in figures) STP Frequency: Daily (except Premier Equity Fund) Weekly - Daywise (Transfer on every Monday of the month) Weekly - Datewise (Transfer date will be 7th/14th/21st/28th of the month) Fortnightly (Transfer date will be 1st/16th of the month) Monthly - Please Provide the Date STP Period: From Scheme Plan Option Growth / Dividend-Payout / Dividend - Reinvest **Dividend Frequency** (In case of Dividend option) To Scheme Plan Option Growth / Dividend-Payout / Dividend - Reinvest **Dividend Frequency** (In case of Dividend option) □ Dividend Sweep Option From (Scheme & Plan Name) To (Scheme & Plan Name) 4.3. Systematic Withdrawal Plan (SWP) (Please mention the PAN/PERN without which, this application form will be considered incomplete and is liable to be rejected.) Please arrage for SWP with the following option: Fixed Amount / Capital Appreciation (Please tick one option only. In case amount is filled & Capital Appreciation ticked, then Fixed Amount will be the default option.) Rs. (in words) Rs. (in figures) SWP Frequency: ■ Monthly Quarterly SWP Date: 1 st □10th SWP Period: From Scheme Plan Dividend-Payout Dividend - Reinvest **Option** Growth **Dividend Frequency** (In case of Dividend option) 4.4. Having read and understood the contents of the Statement of Additional Information (SAI) of IDFC Mutual Fund, Scheme Information Document (SID) and Key Information Memorandum (KIM) of the scheme(s) and the Addenda issued till date, I/we hereby apply for registration of Systematic Transfer Plan (STP)/Systematic Withdrawal Plan (SWP) as indicated above and agree to abide by the terms, conditions, rules and regulations governing the Scheme(s) and the STP/SWP. I/ We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act. Rules, Regulations, Notifications or Directions of the Taxation Laws, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws as applicable to me/us from time to time. I / We confirm that the funds invested in the Scheme(s), legally belong to me / us and I / we have not received nor have been induced by any rebate or gifts,

directly or indirectly in making this investment. I/We am/are eligible Investor(s) as per the scheme related documents and am/are authorised to make this investment as per the Constitutive documents/ authorisation(s). I/We further confirm that I am not/we are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any judicial or regulatory authority.

In the event " Know Your Customer" process is not completed by me / us to the satisfaction of the Mutual Fund, I / we hereby authorise the Mutual Fund, to redeem the funds invested in the Scheme(s), in favour of the applicant, at the applicable NAV prevailing on the date of such redemption subject to applicable exit load and undertake such other action with such funds that may be required by the Law.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us

For micro-investments only: I/We confirm that I/we do not have any other existing investment in the schemes of IDFC Mutual Fund which together with this proposed investment will result in aggregate investments exceeding Rs.50,000/- in a year.

For NRIs / PIOs / FPIs only: 1/We confirm that I am / we are Non Residents Indians / Person(s) of Indian Origin / Foreign Portfolio Investors but not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, or as defined by the U.S. Commodity Futures Trading Commission, as amended from time to time or residents of Canada, and that I / we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident Ordinary/FCNR Account maintained in accordance with applicable RBI quidelines.

Second Applicant	Third Applicant	POA Holder
	Second Applicant	Second Applicant Third Applicant

