

3. KYC details (Mandatory) (refer instruction 3) ☐ Individual☐ Non-Individual (Please attach mandatory FATCA-CRS Annexure for Entities including UBO)

Status of First/Sole Applicant [Please (✓)]

- ☐ Listed Company
- ☐ Unlisted Company
- ☐ Individual
- ☐ Minor through guardian
- ☐ HUF
- ☐ Partnership
- ☐ Society/Club
- ☐ Company
- ☐ Body Corporate
- ☐ Trust
- ☐ Mutual Fund
- ☐ FPI
- ☐ NRI-Repatriable
- ☐ NRI-Non-Repatriable
- ☐ FII/Sub account of FII
- ☐ Fund of Funds in India
- ☐ QFI
- ☐ Others..... (please specify)

Occupation Details [Please (✓)]

(To be filled only if the applicant is an individual)

First Applicant

- ☐ Private Sector Service ☐ Public Sector Service
- ☐ Government Service ☐ Business
- ☐ Professional ☐ Agriculturist
- ☐ Retired ☐ Housewife
- ☐ Student ☐ Forex Dealer
- ☐ Others..... (please specify)

Second Applicant

- ☐ Private Sector Service ☐ Public Sector Service
- ☐ Government Service ☐ Business
- ☐ Professional ☐ Agriculturist
- ☐ Retired ☐ Housewife
- ☐ Student ☐ Forex Dealer
- ☐ Others..... (please specify)

Third Applicant

- ☐ Private Sector Service ☐ Public Sector Service
- ☐ Government Service ☐ Business
- ☐ Professional ☐ Agriculturist
- ☐ Retired ☐ Housewife
- ☐ Student ☐ Forex Dealer
- ☐ Others..... (please specify)

Gross Annual Income (in ₹) [Please (✓)]

First Applicant

- ☐ Below 1 Lac ☐ 1-5 Lacs
- ☐ 5-10 Lacs ☐ 10-25 Lacs
- ☐ > 25 Lacs - 1 Crore ☐ > 1 Crore (or)

Net-worth (Mandatory for non-individuals) ₹

..... as on

IDIDIMIMYIYIYIYI (Not older than one year)

Second Applicant

- ☐ Below 1 Lac ☐ 1-5 Lacs
- ☐ 5-10 Lacs ☐ 10-25 Lacs
- ☐ > 25 Lacs - 1 Crore
- ☐ > 1 Crore (or) Net-worth.....

Third Applicant

- ☐ Below 1 Lac ☐ 1-5 Lacs
- ☐ 5-10 Lacs ☐ 10-25 Lacs
- ☐ > 25 Lacs - 1 Crore
- ☐ > 1 Crore (or) Net-worth.....

PEP Status

First Applicant

For Individuals [Please (✓)] Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)

- ☐ I am PEP
- ☐ I am related to PEP ☐ Not Applicable

For Non-Individuals providing any of the below mentioned services [Please (✓)]

- ☐ Foreign Exchange/Money Changer Services
- ☐ Gaming/Gambling/Lottery/Casino Services
- ☐ Money Lending/Pawning
- ☐ None of the above

Second Applicant

(To be filled only if the applicant is an individual)

- ☐ I am PEP
- ☐ I am related to PEP
- ☐ Not Applicable

Third Applicant

(To be filled only if the applicant is an individual)

- ☐ I am PEP
- ☐ I am related to PEP
- ☐ Not Applicable

4. FATCA-CRS DETAILS For Individuals & HUF (Mandatory)

Non Individual investors should mandatorily fill separate FATCA-CRS Annexure

The below information is required for all applicant(s) / guardian / PoA holder

Category	First Applicant/Guardian	Second Applicant	Third Applicant
1. Are you a Tax Resident of Country other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is your Country of Birth/ citizenship other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Is your Residence address / Mailing address / Telephone No. other than in India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Is the PoA holder / person to whom signatory authority is given, covered under any of the categories 1, 2 or 3 above?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered YES to any of above, please provide the below details

Country of Tax Residence			
Nationality			
Tax Identification Number ^{\$} or Reason for not providing TIN			
Identification Type (TIN or Other, please specify)			
Residence address for tax purposes (include City, State, Country & Pin code)			
Address Type	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Registered Office
City of birth			
Country of birth			

^{\$} In case any of applicant being resident/ tax payer in more than one country, provide tax identification number for each such country separately.

Sundaram Asset Management

10. Nominee (available only for individuals) (refer instruction 10)

☐ I wish to nominate the following person(s)

1st Nominee Name:..... Relationship:..... Address:..... Proportion (%)* in which units will be shared by first nominee.....% If nominee is a minor: Date of birth:..... Name of Guardian:..... Address of Guardian:.....	2nd Nominee Name:..... Relationship:..... Address:..... Proportion (%)* in which units will be shared by first nominee.....% If nominee is a minor: Date of birth:..... Name of Guardian:..... Address of Guardian:.....	3rd Nominee Name:..... Relationship:..... Address:..... Proportion (%)* in which units will be shared by first nominee.....% If nominee is a minor: Date of birth:..... Name of Guardian:..... Address of Guardian:.....
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* Proportion (%) in which units will be shared by each nominee should aggregate to 100%

☐ **I do not wish to choose a nominee. Signature of investor(s)**

.....
1st / Sole Applicant / Guardian

.....
2nd Applicant

.....
3rd Applicant

11. Declaration, Certification & Signature (refer instruction 11)

Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for OTM/NACh • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding ₹ 50,000 in a financial year or a rolling period of twelve months (applicable for PAN/Aadhaar exempt category of investors). 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.

Applicable to NRIs only: Please ☒ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account on a ☐ Repatriation Basis ☐ Non-Repatriation Basis. I/We further declare that I/We am/are not a citizen of USA/Canada.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities, other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

Certification: I/We have understood the information requirements of this Form (read along with the FATCA-CRS Instructions), stated in pages 1-30 and hereby certify that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the FATCA-CRS Terms and Conditions and hereby accept the same. I/We agree to indemnify Sundaram Asset Management Company Limited in respect of any false, misleading, inaccurate and incomplete information regarding my/our "U.S. person" status for U.S. federal income tax purposes, or in respect of any other information as may be required under applicable tax laws.

☐ **(Applicable only for investments through RIA) RIA Consent Declaration:** I/We, the above-named person/s have invested in the Scheme(s) of Sundaram Mutual Fund under Direct Plan under the above mentioned Account No(s)/Folio No(s).

I/We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/NAV etc. in respect of my/our investments under Direct Plan of all Schemes managed by you, to the below mentioned Mutual Fund Distributor/SEBI-Registered Investment Advisor (Correction – Advisor):

AMFI Registration Number ARN -

SEBI Registration No.

Name:
Address

City
E-Mail ID
Tel.No

PIN




Consent & Signature for Aadhaar

I/We hereby provide my / our consent to Sundaram Mutual Fund / Sundaram BNP Paribas Fund Services Limited (RTA) for the following:

- b) For updating/seeding my Aadhaar number based on the PANs in all my accounts maintained with your Fund for KYC & or related due diligence purpose in line with PMLA requirements, UIDAI guidelines and Account enrichment purpose.

I / We authorize Sundaram Mutual Fund / Sundaram BNP Paribas Fund Services Limited to authenticate data in accordance with UIDAI (Authentication) Regulations. I / We hereby provide my / our consent for sharing the Aadhaar data / information with other Mutual Funds / RTAs for updating the same in my / our folios held with them, now or to be created in future.

I / we further declare that this consent will remain valid for Updation in all my / our existing & new folios serviced by Sundaram BNP Paribas Fund Services Limited.

Name of First / Sole Applicant / Guardian	Name of Second Applicant	Name of Third Applicant
		

Date:/...../.....

Place:.....

Particulars				
Scheme Name / Plan / Option / Sub-option	Goal	Cheque / DD / Payment Instrument Number / Date	Drawn on (Name of Bank & Branch)	Amount in figures (₹) & Amount in words
	<input type="checkbox"/> Lumpsum Purchase <input type="checkbox"/> SIP			