

COMMON APPLICATION FORM

(To be filled in CAPITAL letters)

APP No.:

1. DISTRIBUTOR / BROKER INFORMATION (Refer Instruction No. 1.9)

Name & Broker Code / ARN	Sub Agent ARN Code	Sub Agent Code	*Employee Unique Identification Number	RIA Code**
ARN- (ARN stamp here)	ARN-			

*Please sign alongside in case the EUN is left blank/not provided. I/We hereby confirm that the EUN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

++ I/We, have invested in the Schemes) of your Mutual Fund under Direct Plan. 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 above mentioned Mutual Fund Distributor / SEBI-Registered Investment Adviser:

SIGN HERE	First / Sole Applicant / Guardian / Authorised Signatory	Second Applicant / Authorised Signatory	Third Applicant / Authorised Signatory

2. INVESTOR'S FOLIO NUMBER

(If you have an existing folio number with KYC validated, please mention the number here, enter your name in section 5 & proceed to section 9 to provide FATCA / Additional KYC details. If these details are already provided please proceed to Section 12. Mode of holding will be as per existing folio number.)

[Please tick (✓) any one]
 I am a First time investor across Mutual Funds
OR
 I am an existing investor in Mutual Funds

3. UNITHOLDING OPTION - DEMAT MODE PHYSICAL MODE

DEMAT ACCOUNT DETAILS - These details are compulsory if the investor wishes to hold the units in DEMAT mode. Ref. Instruction No. XI.

Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with any one of the Depository Participant.

NSDL	DP Name	DP ID	Beneficiary Account No.
CDSL	DP Name	Beneficiary Account No.	

Enclosures [Please tick (✓) any one box]: Client Master List (CML) Transaction cum Holding Statement Cancelled Delivery Instruction Slip (DIS)

4. GENERAL INFORMATION APPLICATION FOR Zero Balance Folio Investment **^MODE OF HOLDING :** [Please tick(✓)] Single Joint (Default) Any one or Survivor

5. FIRST APPLICANT DETAILS

NAME^ Mr. Ms. M/s. _____

(Please mention Name as per Aadhaar card. Refer instruction no.I. 17)

PAN / PEKRN^ _____ **CKYC Id^** _____

Aadhaar No^ _____ By sharing the Aadhaar number I provide my consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios.

Name of Guardian if first applicant is minor / **Contact Person** for non individuals Mr. Ms. _____

Guardian's Relationship With Minor
 Father Mother Court Appointed Guardian
Date of Birth of 1st Applicant (Mandatory in case of Minor. Mention as per Aadhaar card) DD MM YYYY
Proof of Date of Birth and Guardian's Relationship with Minor
 Birth Certificate Passport Others _____

STATUS^ : Resident Individual PSU AOP/BOI Minor through Guardian HUF Trust /Charities / NGOs
 Society FI/FII NRI Company/Body Corporate Sole Proprietor Defence Establishment
 PIO Bank FPI^ (^^as and when applicable) Government Body Partnership Firm Others _____

Are you involved / providing any of the mentioned services : Foreign Exchange / Money Changer Services Gaming / Gambling / Lottery / Casino Services
 Money Lending / Pawning None of the above

Note: In case First Applicant is Non Individual please attach FATCA, CRS & UBO Self Certification Form (Ref Ins No. XIV) **In case First Applicant is Minor then details of Guardian will be required.

^Mandatory for all type of Investors. It is mandatory for investors to be KYC compliant prior to investing in Reliance Mutual Fund. Refer instruction no.II. 6, 7 & X

6. SECOND APPLICANT DETAILS

NAME^ Mr. Ms. _____

(Please mention Name as per Aadhaar card. Refer instruction no.I. 17)

PAN / PEKRN^ _____ **CKYC Id^** _____ **STATUS^ :** Resident Individual NRI

Aadhaar No^ _____ By sharing the Aadhaar number I provide my consent for sharing/disclosing of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios.

RELIANCE MUTUAL FUND ACKNOWLEDGMENT SLIP (Please retain this slip) Application No.:

To be filled in by the investor. Subject to realization of cheque and finishing of Mandatory Information.
 Name of the Investor Mr/Ms/M/s : _____

Scheme Name	Plan	Option	Payment Details	Time Stamp & Date of receiving office
			Amount ₹ _____ Instrument No/Cash Deposit Slip No. _____ Date : _____ Drawn on Bank _____	

11. BANK ACCOUNT DETAILS MANDATORY for Redemption/Dividend/Refunds, if any (Refer Instruction No. III)

Bank Name

Account No. A/c. Type (✓) SB Current NRO NRE FCNR

Branch Address Branch City For Credit via NEFT

PIN IFSC Code MICR Code 9 Digit

Please ensure the name in this application form and in your bank account are the same. Please update your IFSC and MICR Code in order to get payouts via electronic mode in to your bank account.

12. INVESTMENT & PAYMENT DETAILS (Separate Application Form is required for investment in each Plan/Option. Multiple cheques not permitted with single application form (Refer instruction no. IV) OTBM facility is available to investors who have Invest Easy facility registered with RMF.

Scheme

(Refer Instruction No. I-10) (For Product Labeling please refer last page of application form) (If you wish to invest in Direct Plan please mention Direct Plan against the scheme name)

(Please tick (✓) the appropriate boxes only if applicable to the scheme in which you plan to invest) **Option** Growth^{^^} Dividend Payout Dividend Reinvestment Dividend Frequency

Mode of Payment Cheque DD Funds Transfer OTBM Facility (One Time Bank Mandate) RTGS / NEFT Cash⁵ (Refer Instruction No. XV)

Investment Amount (₹)	DD Charges (if applicable) (₹)	Net Amount~ (₹)	Instrument No/Cash Deposit Slip No/UTR No.	Date	Drawn on Bank	Bank Branch	City
I	II	I minus II		D D M M Y Y Y Y			

(^{^^} Default option if not selected) ~Units will be allotted for the net amount minus the transaction charges if applicable. ⁵Investors are requested to collect the cash deposit slip from the DISC

Reason for Investment: House Children's education Children's Marriage Car Retirement Others

13. NOMINATION - I wish to Nominate Yes No (Mandatory if mode of holding is single) (Refer Instruction No. VI) In case of existing investor, nomination details mentioned in the below table will replace the existing details registered in the folio. Signature is mandatory if you do not wish to nominate

Nominee Name	Guardian Name (in case Nominee is Minor)	Date of Birth of Minor	Allocation (%)	Sign of Nominee	Sign of Guardian	Signature of Applicants
						1st App.
						2nd App.
						3rd App.

14. POWER OF ATTORNEY (POA) HOLDER DETAILS (Refer Instruction No. II. 1)

First Applicant POA Name	Mr./Ms./M/s	PAN [^]	<input type="text"/>
Second Applicant POA Name	Mr./Ms./M/s	PAN [^]	<input type="text"/>
Third Applicant POA Name	Mr./Ms./M/s	PAN [^]	<input type="text"/>

15. SIP ENROLLMENT DETAILS Opted for SIP: Yes No (Incase you have opted for SIP it is mandatory to submit OTBM + SIP Enrolment Form)

16. STP ENROLLMENT DETAILS Opted for STP: Yes No (Incase you have opted for STP it is mandatory to submit STP Enrolment Form)

17. I WISH TO APPLY FOR INVEST EASY FOR INDIVIDUALS Yes No (Mandatory Enclosure : ONE TIME BANK MANDATE REGISTRATION FORM)

18. DECLARATION AND SIGNATURE

I/We would like to invest in Reliance subject to terms of the Statement of Additional Information (SAI), Scheme Information Document (SID), Key Information Memorandum (KIM) and subsequent amendments thereto. I/We have read, understood (before filling application form) and is/are bound by the details of the SAI, SID & KIM including details relating to various services including but not limited to Reliance Any Time Money Card. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act / Regulations / Rules / Notifications / Directions or any other Applicable Laws enacted by the Government of India or any Statutory Authority. I accept and agree to be bound by the said Terms and Conditions including those excluding/ limiting the Reliance Nippon Life Asset Management Limited (formerly Reliance Capital Asset Management Limited) (RNAM) liability. I understand that the RNAM may, at its absolute discretion, discontinue any of the services completely or partially without any prior notice to me. I agree RNAM can debit from my folio for the service charges as applicable from time to time. 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. I hereby declare that the above information is given by the undersigned and particulars given by me/us are correct and complete. Further, I agree that the transaction charge (if applicable) shall be deducted from the subscription amount and the said charges shall be paid to the distributors. I/We hereby provide my /our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (iii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. I/We hereby provide my/our consent for sharing/disclosed of my Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios.

I confirm that I am resident of India. 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. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/our NRE/FCNR Account.

I have read and understood Instruction no. XIII and hereby agree to abide by the same. I hereby declare that the information provided in the Form is in accordance with section 285BA of the Income Tax Act, 1961 read with Rules 114F to 114H of the Income Tax Rules, 1962 and the information provided by me /us in the Form, its supporting Annexures as well as in the documentary evidence provided by me/us are, to the best of our knowledge and belief, true, correct and complete.

SIGN HERE	<input checked="" type="checkbox"/> First / Sole Applicant / Guardian / Authorised Signatory	<input type="checkbox"/> Second Applicant / Authorised Signatory	<input type="checkbox"/> Third Applicant / Authorised Signatory
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