PRUDENTIAL ICICI MUTUAL FUND Application Form for Resident Indians and NRIs,	Prudential Value For A Close-Ended Equi (P10s. Investor must read Key Informatio	ity Fund	Application No. New Fund Offer Opens on August 29, 2017							
completing this form. All sections to be comple		RED INK and in BLOCK LETTERS.	New Fund Offer Closes on September 12, 2017 Riskometer							
 Long term wealth creation. A close ended equity fund that aims to provide capital appreciation by investing in a well diversified portfolio of stocks through fundamental analysis. 										
* Investors should consult their finance		•	Low High high risk							
BROKER CODE (ARN CODE) SUB-BROKER ARN CODE SUB-BROKER CODE Employee Unique ARN 23086 SUB-BROKER ARN CODE (As allotted by ARN holder) Identification No. (EUIN)										
#By mentioning RIA code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund. Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. X). – 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 has not charged any advisory fees on this transaction.										
SIGNATURE OF SOLE / FIRST APP	I.	E OF SECOND APPLICANT	SIGNATURE OF THIRD APPLICANT							
	0,000/- or more and your Distributor has o	pted to receive transactions charges, Rs 1	50/- (for first time mutual fund investor) or Rs 100/- (for investor							
other than first time mutual fund investor) will be Upfront commission shall be paid directly by the inv	·	•	l against the balance amount invested. factors including the service rendered by the distributor.							
1 EXISTING UNITHOLDERS I	NFORMATION If you have an	existing folio no. with PAN & KYC validation,	please mention your name & folio No. and proceed to Step 4							
Name Mr. Ms. M/s FIRST	MIDDLE	LAST FOLIO No.								
2 APPLICANT(S) DETAILS [PI	lesse Refer to Instruction No. 11 (h)]	Mandatory information If loft blar	ik the application is liable to be rejected.							
Sole/First	FIRST	MIDDLE								
Applicant Mr. Ms. M/s PAN/PEKRN*		(Please ✓) ^{§*} ◯ KYC Acknowledgement Le								
			D D M M Y Y Y							
Name Mr. Ms.										
GUARDIAN (ir	n case First/Sole applicant is minor)/CON									
Relationship with Minor applicant: Natura PAN/		KYC Proof Attached (Mandatory)	Date of Birth							
PEKRN*	Id No.*									
2nd Applicant KYC Proof Attached (Mandator	rv)		(Name should match with PAN Card) Date of Birth							
PAN/ PEKRN*	KYC Id No.¥		D D M M Y Y Y							
3rd Applicant			(Name should match with PAN Card)							
KYC Proof Attached (Mandator PAN/	КУС		Date of Birth							
PEKRN*	Id No. [¥]	I the 14 digit KYC Identification Number (KI	D D M M Y Y Y Y							
3 BANK ACCOUNT (PAY-O		•								
Mandatory information – If left blank the	e application is liable to be rejected	. (Mandatory to attach proof, in case	e the pay-out bank account is different from the source with the demat account is mentioned here.							
Account Number		Account Type	Savings Current NRO NRE FCNR							
A Name of Bank										
Branch Name		Branch City								
≥ 9 Digit MICR	11 Digit IFSC Code		Enclosed (<i>Please ✓</i>): Bank Account Details Proof Provided.							
code		4 YOUR INVESTMENT DETAILS OF ICICI PRUDENTIAL VALUE FUND - SERIES 17								
4 YOUR INVESTMENT DETAI	LS OF ICICI PRUDENTIAL \	ALUE FUND - SERIES 17								
code	LS OF ICICI PRUDENTIAL V Fund - Series 17 OPTIOI	N Dividend Payout option	Cumulative option Dividend Transfer Plan (DTP) Transfer Plan option, please fill in the Target Scheme details below:							
code 4 YOUR INVESTMENT DETAI PLAN ICICI Prudential Value F	LS OF ICICI PRUDENTIAL N Fund - Series 17 Fund - Series 17 - DIRECT	N □ Dividend Payout option □ ck (✓)): If the investor has selected Dividend If the investor has selected Dividend	Transfer Plan option, please fill in the Target Scheme details below:							
4 YOUR INVESTMENT DETAI PLAN □ ICICI Prudential Value I (Please tick (√)): □ ICICI Prudential Value I	LS OF ICICI PRUDENTIAL N Fund - Series 17 Fund - Series 17 - DIRECT Schemes of ICICI Prudential Mutua	Dividend Payout option ck (~)): If the investor has selected Dividend I Fund in which the dividend declared	Transfer Plan option, please fill in the Target Scheme details below:							
4 YOUR INVESTMENT DETAI PLAN □ ICICI Prudential Value I (Please tick (√)): □ ICICI Prudential Value I Target Scheme (Any of the open ended	LS OF ICICI PRUDENTIAL N Fund - Series 17 Fund - Series 17 - DIRECT Schemes of ICICI Prudential Mutua	Dividend Payout option ck (~)): If the investor has selected Dividend I Fund in which the dividend declared	Transfer Plan option, please fill in the Target Scheme details below:							

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5 PAYMENT DETAILS									
Amount Invested		Cheque/DD No.		Cheque/DD	Date	Account Type (For NRI Investors)			
Rs.				D D I	M M Y Y	NRO NRE FCNR			
BANK DETAILS Same as above [Please tick () if y	es]] Different from above [P	Please tick (✔) if	it is different from	n above and fill in the	e bank details below]			
Account Number			Aco	count Type	Savings O C	urrent ONRO ONRE OFCNR			
BANK NAME, BRANCH & ADDRESS:									
City			crossed "Accou	unt Payee Only".		"ICICI Prudential Value Fund - Series 17" and draft should be payable at the centre where the nstruction no. XIV.			
6 TRIGGER ON MATURITY OF TH	SCHEME								
Investor will have the option to set trigger at the time						n-ended schemes of ICICI Prudential Mutual			
Fund. The trigger facility is available only for the inves						Mutual Fund as target schemel			
SOURCE SCHEME: TARGET SCHEME: (Please mention any of the open-ended schemes of ICICI Prudential Mutual Fund as target scheme) ICICI Prudential Value Fund - Series 17 ICICI Prudential (If an investor fails to specify)									
	the option, he	e will be allotted un		,		the Target scheme.)			
I/We have read and understood the terms and condition I/We have read and understood the Scheme Information E						of the Target Scheme and have understood the			
investment objectives, investment pattern and risk factors									
SIGNATURE(S) (If the investor does not sign	then the units	will, by default, b	e redeemed a	and proceeds	will be paid to	the Unit holder.)			
SIGNATURE OF SOLE / FIRST APPLICAN		SIGNATURE OF S				ATURE OF THIRD APPLICANT			
7 MODE OF HOLDING	0:	Single O Joir	nt	O Anyone or Su	rvivor (Default)				
8 TAX STATUS [Please tick (✓)]									
Resident Individual 🔲 NRI	🗌 Partnershi	p FIRM 🛛 🖂 G	overnment Body	🗆 Foreign F	ortfolio Investor	□ QFI			
On behalf of Minor Foreign National	Company		.0P/B0I	Defence		NON Profit Organization/Charities			
HUF Body Corporate		nited Company 🛛 🗆 FI			. ,	Bank			
Financial Institution Trust/Society/NG0			ole Proprietorshi	p 🗀 Others (F	lease specify)				
9 DEMAT ACCOUNT DETAILS (
NSDL: Depository Participant (DP) ID (NSDL only) Bene	ficiary Account Num	ber (NSDL only)	CDSL: D	epository Participa	ant (DP) ID (CDSL only)				
10 CORRESPONDENCE DETAILS OF	SOLE/FIRST	APPLICANT:							
Correspondence Address (Please provide full ad	dress)*		Overseas Ad	dress (Mandat	ory for NRI / FII A	Applicants)			
HOUSE / FLAT N	10.				HOUSE / FL	AT NO.			
					070555 4 0				
STREET ADDRE	55				STREET AD	DRESS			
CITY / TOWN	STAT	E		CITY / TOWN		STATE			
COUNTRY	PIN CO			COLINITRY		PIN CODE			
COUNTRY	PIN CO	UE .	COUNTRY			PIN CODE			
Tel. Office		Residence		Mobil	e				
O Please 🗸 if you wish to receive Account sta				0	0				
Please ✓ any of the frequencies to receive Acc			0 , 0	, 0	onthly Ouarte				
* Mandatory information – If left blank the applica ** Mandatory in case the Sole/First applicant is min						case of Minor/Non-Individual Investor. lio refer instruction II-b(3)			
[§] For KYC requirements, please refer to the instruction		fll for	r email comm	unication plea	ise refer to instru	ction no. VI			
11 FATCA AND CRS DETAILS FOR I	NDIVIDUALS	S (Including Sole Pro	oprietor) <i>(Ma</i>	ndatory)					
Non-Individual investors should mandato		FATCA Form (Annex	xure II)						
The below information is required for all applica Place/City of		Country	of Dirth		Country o	f Citizenshin / Nationality			
First Applicant / Guardian	birtii	Country	of Birth		Country of Citizenship / Nationality ndian U.S. Others (Please specify)				
Second Applicant					Indian U.S. Others (Please specify)				
Third Applicant					Indian U.S. Others (Please specify)				
Are you a tax resident (i.e., are you assessed for Tax) in an		•	0	[Please tic					
If 'YES' please fill for ALL countries (other than India) in whice	ch you are a Resider					· · · · · · · · · · · · · · · · · · ·			
Country of Tax Res	idency	ency Tax Identification Number o Functional Equivalent		Identification Type (TIN or other please specify)		If TIN is not available please tick (✓) the reason A, B or C (as defined below)			
First Applicant / Guardian						Reason : A B B C			
Second Applicant									
						Reason : A B C			
Third Applicant						Reason : A B B C			
□ Reason A \Rightarrow The country where the Account □ Reason B \Rightarrow No TIN required (Select this re									
□ Reason C \Rightarrow Others, please state the reason	n thereof:								
Address Type of Sole/1st Holder:	-	ss Type of 2nd Holde	-			pe of 3rd Holder:			
Residential Registered Office Business									

12 KYC	DETAILS	S (Mandator	y)								
Occupation	[Please tic	k (🖌)]									
Sole/First Applicant	-	O Private Sector Service O Public O Housewife O Stude		Sector Service	○ Government Service ○ Forex Dealer		$^{\bigcirc}$ Business $^{\bigcirc}$ Others (Ple	O Business O Profe		[⊖] Agriculturist	O Retired
Second Applicant	O Private O House	e Sector Service wife	○ Public ○ Stude	Sector Service		O Government Service O Business O Forex Dealer O Others (Please specif		OPr ease specify)	rofessional	[⊖] Agriculturist	○ Retired
Third Applicant		Private Sector Service O Public Sector Service Housewife O Student			○ Government Service ○ Business ○ Forex Dealer ○ Others (Please specify			rofessional	[⊖] Agriculturist	○ Retired	
Gross Anni	ual Income	Please tick ()									
	Gross Annual Income [Please tick (√)] Sole/First Applicant O Below 1 Lac 0 1-5 Lacs 0 10-25 Lacs 0 > 25 Lacs-1 crore Note work (Mandatan for New Infinite) #										
Net worth (Mandatory for Non-Individuals) ₹ as on D D M Y Y Y Y (Not older than 1 year) Second Applicant O Below 1 Lac 0 1-5 Lacs 0 5-10 Lacs 0 10-25 Lacs 0 > 25 Lacs-1 crore 0 > 1 crore OR Net worth ₹											
Third Applicant O Below 1 Lac O 1-5 Lacs O 5-10 Lacs O 10-25 Lacs O > 25 Lacs-1 crore O > 1 crore OR Net worth ₹											
Others [Ple	ase tick (🗸)]									
For Individuals [Please tick (/)]: O I am Politically Exposed Person (PEP) ^ O I am Related to Politically Exposed Person (RPEP) O Not applicable											
Sole/First Applicant For Non-Individuals [Please tick ()] (Please attach mandatory Ultimate Beneficial Ownership (UBO) declaration form - Refer instruction no. XVII): (i) Foreign Exchange / Money Changer Services - OYES ONO; (ii) Gambing /Contery/Casino Services - OYES ONO; (iii) Money Lending / Pawning - OYES ONO											
Second Appl	· · · · ·				d to Politically Expo			applicable		Money Lending / Tawin	
Third Applica		O Politically Expos			d to Politically Expo			applicable			
	1	ON DETAILS					, , 0				
I/We hereby	y nominat	e the undermen	tioned no		eive the amoun	t to my/	our credit in e	vent of my/our	death as f	ollows:	B
Na	me and add	ress of Nominee(s)	Applicant's Relationship	Date of Birth	Na	me and address (of Guardian	Signat	ture of Nominee/	Proportion (%) in which the units will
		Nominee's address ble Applicant's addı		with the Nominee	[To be furnished	in case the	Nominee is a mir	or (Mandatory)]		if nominee is a minor	be shared by each Nominee (Should
30	110 03 130/30		6331								aggregate to 100%)
	Nominee 1										
	Nominee 2										
	Nominee 3										
L		ECLARATIO									
Rules, 1962. Laundering , to Plans/Opt Scheme is ti any Statutor has full right result in a tr different cor SMS, teleca Information/ and Transfer	I/We apply if Act, 2002 ar tions under t hrough legiti ry Authority. t to refund th otal investm mpeting Sch III, etc. If you (documents r Agent (RTA	for the units of the f d such other reguld he Scheme(s). I/w mate sources only I/We agree that in the excess to me/us ents exceeding Rs emes of various Mi 1 do not wish to re given in/with this ag	and and ag ations as ma e have not n and is not d case my/out to bring my, 50,000 in a utual Funds ceive, plea pplication fo tify the AM0	ree to abide by the ay be applicable fro received nor beer seigned for the pur r investment in the /our investment be year. The ARN ho from amongst whi ise call on tollfree rm is true and com 2/the Fund immedia	terms, conditions, , om time to time. I/V nduced by any rebz pose of contraventi Scheme is equal to low 25%. I/We here dider has disclosed t ich the Scheme is b on. 1800 222 999	rules and re Ve confirm ate or gifts, on or evasi or more the by declare to me/us all being recon (MTNL/B and I/we a n any inform	egulations of the s to have understou directly or indirec on of any Act, Re an 25% of the cor that I/we do not I the commissions mended to me/u SNL) or 1800 200 gree to provide an mation furnished I	cheme and other s od the investment ctly, in making this gulations or any ot pus of the plan, the have any existing N s (in the form of trr s. I/We interested 6666 (Others). y additional inform by me.	statutory required objectives, in investment. ther applicable en ICICI Prude Micro SIPs wail commission in receiving mation that material antion that the antion that material antion that the antion the antion that the antion that the antion the ant	Rules 114 F to 114H, as iirements of SEBI, AMF ivestment pattern, and I/We declare that the e e laws enacted by the I ential Asset Manageme hich together with the no or any other mode), promotional material fr ay be required by the AI TURE OF THIRD AF	, Prevention of Money risk factors applicable amount invested in the 3overnment of India or nt Co. Ltd.(the 'AMC'), surrent application will payable to him for the om the AMC via mail, MC/the Fund/ Registrar
	CICI DENTIAL [®] UAL FUI 's Name:	Ĵ.) e filled in by the	- Series 17 - A Please Retain tl Investor. Subje shing of Mandate	h is Slip) ct to real	ization of cheq		Application	n No. STING FOLIO NO.	 ->
Investor's Name: PLAN ICICI Prudential Value Fund - Series 17 [Please tick (√)]: ICICI Prudential Value Fund - Series 17 - DIRECT Amt. Rs. Cheque/DD No. dtd: Bank & Branch							PTION Dividend Payout option case tick (✓)]: Cumulative option				
Amt. Rs		·		dt		Bank & E		I PLEASE CO	ONTACT	US	
		e Office, 2nd F	IC loor, Blo	I CI Pruden ck B-2, Nirlon	tial Asset N Knowledge Pa	lanag ark, Wes	ement Cor stern Express	mpany Lim Highway, Go	ited pregaon (B	East), Mumbai - 4 VEBSITE www.io	
										omer Service Centre, ice Centre where app	