

For first time (PLEASE REA	e investors for Lumpsu D THE INSTRUCTIONS	um Investments / SIP Invest	ON FORM ments / Zero Balance folio registration. ORM. ALL SECTIONS TO BE COMPLETED IN TERS)	
Distributor ARN	ARN-3086	Sub-Distributor ARN	Internal Sub-Broker/ Sol ID	Application No.
EUIN		Employee Code	RIA CODE ^	
Serial No.,	Date & Time Stan	η		
distributor. ^I∕V	Ne, have invested in the sc	heme(s) of Axis Mutual Fund und	ed distributor based on the investor's assessment of varie er Direct Plan. I/We hereby give my/our consent to sha chemes of Axis Mutual Fund, to the above mentioned SE	re/provide the transactions data feed/portfolio
relationsh	nip manager/sales pers		blank by me/us as this transaction is executed witho sub broker or notwithstanding the advice of in- broker."	
You/ Sole	Applicant /Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
In case the sub purchase/subsc EXISTING IN	escription amount is ₹ 10 ription amount and payab	le to the Distributor. Units will be MBER (If you have an existing	OR I confirm that I am an exist utor has opted to receive Transaction Charges, the ssued against the balance amount invested. MODE OF HOLDING (in case of Demat Purchase Mode of Holding should be same as in Demat Account)	ing investor across Mutual Funds. same are deductible as applicable from th Unit Holding Option
Folio number			Single Joint (Default)	Demat Mode Physical Mode
			Anyone or Survivor	(in case of Demat, please fill sec 6)
1. YOUR PE	RSONAL DETAILS (MA	NDATORY) (In case of investi	nent "On behalf of minor", Please refer instruction No	o. 11)
First Applican	t Mr. Ms. M/s.		IRST APPLICANT	Gender M F O
PAN (Mandatory)		Aadhaa (Optional)	r No.	
DOB	D D M M Y	Y Y Y Y (Optional)	lo. 14 digitCKYCN u	m b e r
Address				
			-	
City		State		Pincode
Mobile		Email I		
Occupati		Service Public Sector S	ervice Govt. Service Business P	rofessional Agriculturist
Details	Retired	Housewife	Forex Dealer Student C	Specify Specify
Gross Anı Income	(尹)	Lac 1-5 Lacs	5-10 Lacs 10-25 Lacs 25 Lacs - s) ₹ as	1 Crore > 1 Crore
I / we her	eby prefer to 'OPT-IN'	to receive physical copies of s	cheme Annual Report or Abridged summary.	
BANK ACCO	OUNT DETAILS FOR PAY	OUT (Please note that as per SE	BI Regulations it is mandatory for investors to provide the	ir bank account details. Refer Instruction No. 6)
Name of the b	ank			
Branch Address	;			
	L			
City		State		Pincode
Account No.				
L				
Account type	Savings Curre	ent NRE NRO	FCNR Others	Specify

Second Appli	cant	Mr.	Ms.	M/s.							SECC	DND	AP	PLIC	ANT							G	ende	r 🗌	м		FCC
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2. FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor. Refer Instruction No. 23)

The below information is required for all applicants/guardian.

	Place / City of Birth	Country of Birth	Country of Citizenship / Nationality
First Applicant / Guardian			Indian U.S. Others
Second Applicant			Indian U.S. Others
Third Applicant			Indian U.S. Others

Are you a tax resident (i.e., are you assessed for tax) in any other country outside India? If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries.

Yes No

i.e. where you dre	a Chizen / Resident /	Green Card Holder / Tax Reside	en in me respective coornines.		
	Country of Tax Residency	Tax Identification Number of Functional Equivalent	r Identification Type (TIN or other please specify)		Address Type
First Applicant / Guardian				R	esi 🦳 Regd. Office 📃 Business
Second Applicant				R	esi 🦳 Regd. Office 📃 Business
Third Applicant				R	esi 🦳 Regd. Office 📃 Business
Overseas Address					
				City	
State		Country			Zipcode

For Non Individual investors Annexure I and Annexure II are available on the website of AMC i.e. www.axismf.com or at the Investor Service Centres (ISCs) of Axis Mutual Fund

3.	NOMINATION DETAILS (Mandatory) (R	efer Instruction No.	18)						
Sr. No.	Nominee Name	PAN	All	ocation (%)	Relationship with Investor	Nominee date of birth		Name ase of Minor)	Guardian Signature
1						D D M M Y Y			
2						D D M M Y Y			
3						D D M M Y Y			
	I/We DO NOT wish to nominate a	nd sign here	You/	/ Sole A	pplicant	Second Applica	nt	Third Ap	plicant

4. INVESTMENT DETAILS (For multiple schemes ref instruction no. 22) (Investors applying under Direct Plan must select "DIRECT" against scheme name, Refer Instruction No. 2.)

Sr. No.	Scheme	Plan	Option	Amount
1		Direct Regular		
2		Direct Regular		
3		Direct Regular		
Total	In words			In figures

5. PAYMENT DETAILS

Non-Third Party Payment Third Party Payment (Please attach 'Third Party Payment Declaration Form')
Mode DD Axis Bank Debit Mandate (Please fill section 9.) Date D M Y Y Y Y
in figures) (in words)
Yay-in A/c No.
Account type Savings Current NRE NRO FCNR Others Specify
FSC code (11 digit) MICR Code (9 digit)
Drawn on bank / branch name & address

6. DEMAT ACCOUNT DETAILS (OPTIONAL)

(Please ensure that the sequence of names as mentioned in the application form matches with that of the A/c held with the depository participant) Refer Instruction No. 19.

NGDI	Depository Participant Name	DP ID: I N
NSDL:	Beneficiary A/c No.	
an ci	Depository Participant Name	
CDSL:	Beneficiary A/c No.	
Enclos	ed Client Master	Transaction / Statement Copy / DIS Copy

7. DECLARATION AND SIGNATURE

Having read and understood the content of the SID / KIM of the scheme and SAI of the Axis Mutual Fund (The Fund), I/we hereby apply for units of the scheme. I have read and understood the terms, conditions, details, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate source only and does not involve designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directives of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Government of India from time to time. I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme, legally belongs to me/us. In event "Know Your Customer" process is not completed by me/us to the satisfaction of the Autual Fund, (I/we hereby authorize the Mutual Fund, to redeem the funds invested in the Scheme, in favour of the applicant, at the applicable NAV prevailing on the date of such redemption 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 (trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds samogst which the Scheme is being recommended to me/us. I / we give my / our consent to collect personal data or information as prescribed in the privacy policy which is available on the website of the AMC / Fund. I /We give my consent to AMC and its agents to contact me over phone, SMS, email or any other address my investment related queries and/or receive communication perfaining to transactions/ non-commercial transactions/ potential investments and other communication / material irrespective of my blocking preferences with the Customer Preference Registration Facility .

I/We confirm that I/We do not have any existing Micro SIP/Lumpsum investments which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year (Applicable for Micro investment only.) with your fund house. For NRIs only - I / We confirm that I am/ we are Non Residents of Indian nationality/origin 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. I/We confirm that details provided by me/us are true and correct.

CERTIFICATION: I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm 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 below and hereby accept the same.

AADHAAR DECLARATION: 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 (ii) 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/disclosing of the Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund (s) and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios with my PAN.

You/ Sole Applicant /Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
		-	
Date D D M M Y Y Y	Place		

8. QUICK CHECKLIST

KYC acknowledgement letter (Compulsory for MICRO Investments)
Self attested PAN card copy
Plan / Option / Sub Option name mentioned in addition to scheme name
Multiple Bank Accounts Registration form (if you want to register multiple bank accounts so that future payments can be made from any of the accounts)
Email id and mobile number provided for online transaction facility
SIP Registration Form for SIP investments
Relationship proof between guardian and minor (if application is in the name of a minor)
FATCA Declaration
Additional documents attached for Third Party payments. Refer instruction No. 7.





EasyInvest http://online.axismf.com Invest online without any prior registration

Toll Free 1800 221322/ 1800 3000 3300 Additional Contact No. 8108622211



Easy SMS SMS HELP to 92120 10033 Transact and get folio details on the go

Axis MF IFA CONNECT

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Risk Managed Products

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We Name	Application No.						
uthorise you to debit my/our account no.							
ccount type Savings NRO NRE	Current FCNR Others Specify	to pay for the purchase o					
🗌 Axis Bluechip Fund 🗌 Axis Long Term Equity Fund 📄 Axis Regular Saver Fund 📄 Axis Triple Advantage Fund 📄 Axis Midcap Fund							
Axis Focused 25 Fund Axis Arbitrage Fund	Axis Equity Saver Fund Axis Multicap Fund Axis D	ynamic Equity Fund					
Axis Equity Hybrid Fund Axis Growth Opp	ortunities Fund Axis Small Cap Fund OR Axis MF Multip	le Schemes					
n words) (in Figu	res)						
Signature of First Account Holder	Signature of Second Account Holder	Signature of Third Holder					

WE ACKNOWLEDGE YOUR APPLICATION Received subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form.

From

Cheque No.	Date	Amount	Scheme	Stamp & Signature	Application No.

May 17, 2019

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