

All details in the form are mandatory.

Application No.:

Distributor ARN and Name	Sub Broker ARN Code	Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
ARN-97821			E113814	

I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

I am a First Time Investor in Mutual Fund Industry.

☐ I am an Existing Investor in Mutual Fund Industry

Sole / First Applicant's Signature Mandatory

1. FIRST APPLICANT'S DETAILS

Name of First Applicant [Should match with PAN Card]										PAN [1st Applicant / Guardian]										☐ KYC																			
Name of Guardian if minor / Contact Person for non-individuals / PoA Holder name:										PoA PAN										☐ KYC																			
On behalf of Minor (* Attach Mandatory Documents as per instructions).										Date of Birth Minor's										Date of Birth Proof attached * [										Guardian named is :									
										/ /																				☐ Father ☐ Mother ☐ Court Appointed									

2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS

Email ID (in capital)																																							
Mobile	+91																			Tel	(STD Code)																		
Address																																							
Landmark																																							
City											Pin Code (Mandatory)									State																			

3. KYC DETAILS (Mandatory)

3a. Status of Sole/1st Applicant (Please tick✓) ☐ Indian Resident Individual ☐ On Behalf of Minor ☐ NRI (Repatriable) ☐ NRI (Non-Repatriable) ☐ Sole Proprietorship ☐ HUF - Indian ☐ HUF - NRI ☐ Partnership Firm ☐ Limited Partnership (LLP) ☐ Listed Company ☐ Unlisted Company ☐ Body Corporate ☐ Bank / FI ☐ Insurance Companies ☐ Government Body ☐ AOP/BOI ☐ Trust / Society ☐ Provident Fund ☐ Superannuation / Pension Fund ☐ Gratuity Fund ☐ FOF - MF schemes ☐ FII ☐ Others _____ (Please specify)

3b. Occupation Details (Please tick✓) ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others _____ (Please specify)

3c. Gross Annual Income (Please tick✓) ☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore

Net-worth in (Mandatory for Non-Individuals) ₹ _____ as on DD / MM / YY [Not older than 1 year]

3d. For Individuals ☒ I am Politically Exposed Person ☒ I am Related to Politically Exposed Person ☒ Not Applicable

For Non-Individual Investors (Companies, Trust, Partnership etc)

I. Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company:	☐ YES	☐ NO
II. Foreign Exchange / Money Changer Services	☐ YES	☐ NO
III. Gaming / Gambling / Lottery/Casino Services	☐ YES	☐ NO
IV. Money Lending / Pawning	☐ YES	☐ NO

4. JOINT APPLICANTS, IF ANY AND THEIR DETAILS

Mode of Holding (Please tick ✓) ☐ Joint (Default) ☒ Anyone or Survivor		
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2nd Applicant Name (Should match with PAN Card)

PAN (2nd Applicant) ☐ KYC

a. **Occupation Details** (Please tick ✓)
 ☐ Private Sector Service
 ☐ Public Sector Service
 ☐ Government Service
 ☐ Business
☐ Professional
☐ Agriculturist
☐ Retired
☐ Housewife
☐ Student
☐ Forex Dealer
☐ Others (Please specify)

b. **Gross Annual Income**
☐ Below 1 Lac
☐ 1-5 Lacs
☐ 5-10 Lacs
☐ 10-25 Lacs
☐ >25 Lacs-1 crore
☐ >1 crore OR Net worth ₹

c. **Others** (Please tick ✓)
☐ Politically Exposed Person (PEP)
☐ Related to a Politically Exposed Person (PEP)
☐ Not Applicable

3rd Applicant Name (Should match with PAN Card)

PAN (3rd Applicant) ☐ KYC

a. **Occupation Details** (Please tick ✓)
 ☐ Private Sector Service
 ☐ Public Sector Service
 ☐ Government Service
 ☐ Business
☐ Professional
☐ Agriculturist
☐ Retired
☐ Housewife
☐ Student
☐ Forex Dealer
☐ Others (Please specify)

b. **Gross Annual Income**
☐ Below 1 Lac
☐ 1-5 Lacs
☐ 5-10 Lacs
☐ 10-25 Lacs
☐ >25 Lacs-1 crore
☐ >1 crore OR Net worth ₹

c. **Others** (Please tick ✓)
☐ Politically Exposed Person (PEP)
☐ Related to a Politically Exposed Person (PEP)
☐ Not Applicable

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Received, subject to realisation and verification an application for purchase of Units as mentioned in the application form.

ARN-97821

DSP BLACKROCK MUTUAL FUND

Application No.

From _____			
Scheme	Cheque no.	Cheque Date	Amount

5. BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)

Bank Name

Bank A/C No.

A/C Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others

Branch Address

City

Pin

IFSC code: (11 digit)

MICR code (9 digit)

(This is a 9 digit number next to your cheque number)

6. INVESTMENT AND PAYMENT DETAILS (Cheque/DD should be in favour of "Scheme Name")Scheme/Plan
/Option/Sub Option

DSP BlackRock -

Scheme

Plan

Option/Sub Option

(Default plan/option/sub option will be applied incase of no information, ambiguity or discrepancy)

☐ One time Lump sum Investment: Please fill the details hereunder.Payment Mode: ☐ Cheque ☐ DD ☐ RTGS ☐ NEFT ☐ Funds transferCheque/RTGS/
NEFT/DD Date

D D / M M / Y Y Y Y

Cheque/DD/RTGS/NEFT No.

Payment from
Bank A/c No.

Pay In A/c No.

Amount (Rs.) (i)

Bank Name

DD charges, (Rs.)(ii)

Branch

Total Amount (Rs.) (i) + (ii)

In figures

In Words

Account Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNRDocuments Attached to avoid Third Party Payment Rejection, where applicable: ☐ Bank Certificate, for DD ☐ Third Party Declarations☐ SIP: Systematic Investment Plan. Attach OTM form, if not already registered.

First SIP Cheque Details: (Mention Amount in SIP Form)

Cheque / DD No.

Drawn on Bank A/c No.

Pay In A/c No.

Cheque/DD Date

D D / M M / Y Y Y Y Y

Bank & Branch

7. NOMINATION DETAILS

Individuals (single or joint applicants) are advised to avail Nomination facility.

☐ I/We wish to nominate. ☐ I/We DO NOT wish to nominate and sign here 1st Applicant Signature (Mandatory)

	Nominee Name	Guardian Name (In case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				
Address			Total = 100%	

8. UNIT HOLDING OPTION:☐ In Account Statement Mode
(default):(Switch/Redemption through
Fund/RTA offices only.)☐ In Demat mode, in demat account provided below: (Switch not allowed. Redemption through SE platforms/ DPs only)

Depository Participant (DP) ID (NSDL only)

Beneficiary Account Number (NSDL only)

NSDL:

I N

CDSL:

Enclose for demat option: ☐ Client Master List ☐ Transaction/Holding Statement ☐ DIS Copy**9. DECLARATION & SIGNATURES**

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund, I/We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. 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, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. 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.

Where the EUIN box is left blank being an execution only transaction, I/we confirm that the transaction is notwithstanding the advice of in-appropriateness, if any, provided by the distributor's employee/relationship manager/sales person and the distributor has not charged any advisory fees on this transaction.

Sole / First Applicant / Guardian

Second Applicant

Third Applicant

POA holder, if any

Email: service@dspblackrock.com
Website: www.dspblackrock.com

Contact Centre: 1800 200 4499

Quick
Checklist

- ☐ Name, Address are correctly mentioned
☐ Email ID / Mobile number are mentioned
☐ PAN / KYC details are enclosed
☐ Complete Bank details provided

- ☐ Full scheme name, plan, option is mentioned
☐ Pay-In bank details and supportings are attached
☐ Nomination facility opted
☐ Form is signed by all applicants

- ☐ Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used.
☐ Additional documents provided in case of specific exceptional Third Party Payments.