((t))) LIC NOAL	IDΔ	COMM	ION ADDI	ICATION FO	PM APP.	No.		
MUTUAL FU?	N D			LICATION FO				
Investors must read the I	Key Information Memorandun	n and the instructions	before completing this Fe	orm. The Application Form should be	completed in English a	and in BLOCK LETTERS only.		
KEY PARTNER / ARN HOLI	DER INFORMATION (Investors	applying under Direct F	Plan must mention "Direct"	in ARN code column) (Refer Instruction	on 2 & 3)			
ARN Code	Sub-broker Co		ployee Unique tion Number (EUIN)	Sub-broker Code (as allotted by ARN holder)	RM Code	Time Stamp No		
ARN-97821		E113				For office use only		
"I / We hereby confirn employee/ relationshi	ip manager/ sales person	een intentionally l of the above distr	eft blank by me / us a ibutor or notwithstar	as this is an "execution-only" tra	iteness, if any, prov	rided by the employee / relationship		
	SIGN HERE le Applicant/ Guardian GES FOR APPLICANTS TH	ROUGH DISTRIBU	Second	N HERE I Applicant Instruction 4]		SIGN HERE Third Applicant		
the purchase/ subscri	ption amount and payab	le to the Distribute	or. Units will be issue	r has opted in to receive Transa d against the balance amount i	nvested. Upfront c	same are deductible as applicable from ommission shall be paid directly by the		
				ection 1 and proceed to section	11.)	ber mentioned alongside will apply		
2. APPLICANT(S) DE	TAILS (In case of Minor,	there shall be no jo	oint holders)					
SOLE/FIRST APPLICA	ANT NAME		FIRST	MIDDLE		LAST KYC:		
DOB D D M M	Y Y Y DOB is	mandatory in case of	unit holder is minor. Pro	of attached. Please (√)				
SECOND APPLICANT	'S NAME		FIRST	MIDDLE		LAST KYC:		
THIRD APPLICANT'S	NAME		FIRST	MIDDLE		LAST KYC:		
FIRST APPLICANT PAN:		SECOND A	APPLICANT PAN:		THIRD APPLICANT PA	N:		
	(in case of First / Sole App			PERSON – DESIGNATION (in case	of non-individual I	nvestors)		
PAN:	KYC	MIDDI C: Relation	ship with Minor Plea	LAST se(√) Father Mother	Court Appointed	d Legal Guardian		
3. TAX STATUS Plea	ese tick (🗸)		•					
Resident Individ		- NRO HUF	Club / Society	y PIO Body Corpo	rate Minor	☐ Government Body		
	RI - NRE Bank &			tnership Firm	Others	(Please Specify)		
4. KYC DETAILS (Mai			oprictor :		_ others			
OCCUPATION Please tid								
FIRST APPLICANT	☐ Private Sector ☐ Student	☐ Public Sector ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Forex Dealer ☐ Others						
SECOND APPLICANT		☐ Public Sector☐ Forex Dealer	Governme		ofessional 🗌 Agr	iculturist \square Retired \square Housewife		
THIRD APPLICANT	☐ Private Sector ☐ Student	☐ Public Sector☐ Forex Dealer	☐ Governme	ent Service 🗆 Business 🗆 Pr	ofessional 🗆 Agr	iculturist \square Retired \square Housewife		
GROSS ANNUAL INCO		- Forex Dealer	U Others		(ріеа	se specify)		
FIRST APPLICANT	Below 1 Lac 1	5 Lacs 🗌 10-2	25 Lacs	acs - 1 Crore > 1 Crore				
	Net worth (Mandatory				D M M Y			
				s - 1 Crore \square > 1 Crore OR I				
THIRD APPLICANT	☐ Below 1 Lac ☐ 1-5	Lacs 10-25	Lacs □ > 25 Lacs	s - 1 Crore \square > 1 Crore OR	Net Worth			
For Individuals		For Non-Individ	dual Investors (Con	npanies, Trust, Partnership	etc.)			
I am Related to Politically Exposed Not Applicable Listed Foreign Gamin		Listed Company Foreign Exchang Gaming / Gambl	a Listed Company or :(If No, please attach ge / Money Charger : ling / Lottery / Casin	☐ Yes ☐ No ☐ Yes ☐ No				
	,	Money Lending	/ rawning			☐ Yes ☐ No		
5. MODE OF HOLDING	Please tick (🗸)	nt Sin	gle Any	one or Survivor (Default option	is anyone or survivor)			
. MAILING ADDRESS	OF FIRST / SOLE APPLI	CANT (Mandator	y) (Refer Instructio	n 11)				
andmark	City	State)	Pincode	Country			
LIC NOMUR	(TO BE FILLED IN BY T	THE INVESTOR)	ACKNOWLE	ARN-9782	1 APP. No			
eceived an application for	purchase of unite of LIC Nom	ura MF		(Scheme Name with optio	n)	Time Stamp No.		
om Mr/Mrs/M/s.		(Name	e of the investor)	- Span		ngwith		
heque/Draft No./Payment ranch		Date		For₹				
ank Charges (in cases of D	raft) of₹are subject to realisation of C	heque / Demand Dra	ft / Payment Instrument.	Date		ISC Signature, Stamp & Date		

	T DETAILS OF	SOLE/FIRST APPI	ICANT (Mobile	No or Email l	ld. Refer Instru	ction No.	11)						
^E mail id	^E mail id (Please Specify) Mobile No												
Tel no (I	Resi) STD Cod	le	Off	STD Code									
^ On providing email-id investors shall receive scheme wise annual report or an abridged summary thereof / account statements / statutory and other documents by email.											r documents by email.		
8. OVERSEAS ADDRESS (Overseas address is mandatory for NRI / FII applicants in addition to mailing address in India)													
Landmark City State Pincode Country													
9. DEMAT ACCOUNT DETAILS* - (Optional - refer instruction 14)													
			N	SDL						CDSL			
DP NAME													
DP ID Read Signary Assessment No.													
Beneficiary Account No * Investors opting to hold units in demat form should provide a copy of DP statement to match the demat details as stated in the application form.													
10. BANK ACCOUNT DETAILS OF THE FIRST APPLICANT (refer instruction 8) As per SEBI Regulations it is mandatory for investors to provide their bank account details													
Account No. Name of the Bank													
Name of the Dank													
Type of A/c	SB Cui	rent NRE 1	NRO FCNR	Others	Pls specify	Branch				Bank City			
Refer Instruction 8.3 (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank) In case if the bank details provided by you is different from the payment bank account please enclosed a canceled cheque.													
11. INVESTMENT DETAILS [Please tick (/)] (Refer Instruction No. 2, 3 & 10) (If this section is left blank, only folio will be created)													
											Plan / Option / Sub Option.		
	Cheque / DD Fa		Plan/Option	Amoun			unt Paid		e/DD No./ UTR No.	Bank and Branch and Account Number			
Schem	e Name (refer ms	truction 2 & 3)		Invested (F	Rs.) Charges	(Rs	.)	(in cas	se of NEFT/RTGS)				
Account Type	e (Please tick (√))	SB	Curren	nt	NRE		NRO	0	F	CNR	Others (Ps Specify)		
*All purchas	es are subject to	realization of fund	s ^Refer to Instr	ruction No. 10)								
12. NOMIN	ATION DETAIL:	S (Mandatory) (R	efer Instruction	No. 16)									
☐ I/We wis	h to nominate	☐ I/We DO NO	T wish to nomin	ate and sign l	here				1st	Applicant Signat	ture (Mandatory)		
	Nominee	Name and Addres	S		Guardian Name (in case of Minor)			r)	Allocation %	rdian Signature			
Nominee 1													
Nominice 1													
Nominee 2													
Nominee 3													
	ı							1	Total = 100%	tal = 100%			
DECLARATIO	ON & SIGNATUR	E/S											
a.) Having read & understood the contents of the Scheme Information Document of the Scheme & reinvestment scheme, I/ We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I/ We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt. of India from time to time. I/ We have understood the details of the scheme & 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 belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b.) For NRIs: I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I/ we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary. I/ We confirm that details provided by me / us are true & correct. c) 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. d.) I/We have read & understood the SEBI Circular no. MRD/DoP/Cir- 05/2007 dt. April 27, 2007 & SEBI Circular No. 35/MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/ we are holding valid PAN card /													
SIGN HERE First Applicant/ Guardian					SIGN HERE Second Applicant				SIGN HERE Third Applicant				
оссоналрушение типа прупочи													
Date : Place :													
For any queries please contact our nearest Investor Service Centre or													
	Call	Toll Free Numbe	r 1800-258-567	8			Em	ail : se	rvice@licnomu	ıramf.com			
			_										
	Website : www.licnomuramf.com												