

# Common application form for Lumpsum and SIP investments

Please read instructions before filling the Form

Application No :

## Key Partner / Agent Information

Distributor / Broker ARN <b>ARN-97821</b>	Sub-Broker Code	Internal Sub-Broker/Employee Code	Employee Unique Identification No. (EUIIN) (Of Individual ARN holder or Of employee / Relationship Person of the Distributor) <b>E113814</b>	For Office Use Only
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I/We hereby confirm that the EUIIN 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. (Refer Instruction no.1(f)).

Sign Here Sole/First Applicant/Guardian	Sign Here Second Applicant	Sign Here Third Applicant
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Upfront commission, if any, 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.

**Existing Unitholder Details :** Pl. fill in Folio Number below. Pl. furnish PAN details in section 1 and then proceed to section 2.

Folio Number, if any

<b>1. Applicant's Details</b>		<b>Name</b>		<b>PAN/KRN<sup>1</sup></b>		<b>Date of Birth<sup>2</sup></b>	
<b>First/Sole</b>	Mr. / Ms. / M/s.					D D M M Y Y Y Y	
Gross Annual Income (✓)	<input type="checkbox"/> Below 1 lac <input type="checkbox"/> 10-25 lacs <input type="checkbox"/> 1-5 lacs (if not ✓, then default) <input type="checkbox"/> 25 lacs - 1 crore <input type="checkbox"/> 5-10 lacs <input type="checkbox"/> >1 crore					<input type="checkbox"/> Enclosed (✓) <input type="checkbox"/> KYC Proof <sup>3</sup> <input type="checkbox"/> For Individuals (✓) <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not Applicable	
Net-worth <sup>4</sup>	in ₹ as on D D M M Y Y Y Y (Not older than 1 year)					<input type="checkbox"/> Occupation (✓) <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Student <input type="checkbox"/> Public Sector/Govt. Service <input type="checkbox"/> Others	
Is the entity involved in any of the following services (✓)							
(i) Foreign Exchange/Money Changer Services <input type="checkbox"/> Yes <input type="checkbox"/> No (ii) Gaming/Gambling/Lottery/Casino Services/Betting Syndicates <input type="checkbox"/> Yes <input type="checkbox"/> No (iii) Money Lending/Pawning <input type="checkbox"/> Yes <input type="checkbox"/> No							

<b>Second</b>	Mr. / Ms. No Joint Holder where Minor is First Holder					D D M M Y Y Y Y	
Gross Annual Income (✓)	<input type="checkbox"/> Below 1 lac <input type="checkbox"/> 10-25 lacs <input type="checkbox"/> 1-5 lacs (if not ✓, then default) <input type="checkbox"/> 25 lacs - 1 crore <input type="checkbox"/> 5-10 lacs <input type="checkbox"/> >1 crore					<input type="checkbox"/> Enclosed (✓) <input type="checkbox"/> KYC Proof <sup>3</sup> <input type="checkbox"/> For Individuals (✓) <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not Applicable	
Net-worth <sup>4</sup>	in ₹ as on D D M M Y Y Y Y (Not older than 1 year)					<input type="checkbox"/> Occupation (✓) <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Student <input type="checkbox"/> Public Sector/Govt. Service <input type="checkbox"/> Others	
<b>Third</b>	Mr. / Ms. No Joint Holder where Minor is First Holder					D D M M Y Y Y Y	
Gross Annual Income (✓)	<input type="checkbox"/> Below 1 lac <input type="checkbox"/> 10-25 lacs <input type="checkbox"/> 1-5 lacs (if not ✓, then default) <input type="checkbox"/> 25 lacs - 1 crore <input type="checkbox"/> 5-10 lacs <input type="checkbox"/> >1 crore					<input type="checkbox"/> Enclosed (✓) <input type="checkbox"/> KYC Proof <sup>3</sup> <input type="checkbox"/> For Individuals (✓) <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not Applicable	
Net-worth <sup>4</sup>	in ₹ as on D D M M Y Y Y Y (Not older than 1 year)					<input type="checkbox"/> Occupation (✓) <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Student <input type="checkbox"/> Public Sector/Govt. Service <input type="checkbox"/> Others	

<b>Guardian/Contact Person</b>	(if Sole/First applicant is a Minor) Contact Person (in case of Non-individual Investors only)					D D M M Y Y Y Y	
Relation	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court appointed Guardian					<input type="checkbox"/> Enclosed (✓) <input type="checkbox"/> KYC Proof <sup>3</sup> <input type="checkbox"/> For Individuals (✓) <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not Applicable	
Gross Annual Income (✓)	<input type="checkbox"/> Below 1 lac <input type="checkbox"/> 10-25 lacs <input type="checkbox"/> 1-5 lacs (if not ✓, then default) <input type="checkbox"/> 25 lacs - 1 crore <input type="checkbox"/> 5-10 lacs <input type="checkbox"/> >1 crore					<input type="checkbox"/> Occupation (✓) <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Student <input type="checkbox"/> Public Sector/Govt. Service <input type="checkbox"/> Others	
Net-worth <sup>4</sup>	in ₹ as on D D M M Y Y Y Y (Not older than 1 year)						
<b>POA Holder</b>	(If the investment is being made by a Constituted Attorney, please furnish the details of POA Holder)					D D M M Y Y Y Y	
Gross Annual Income (✓)	<input type="checkbox"/> Below 1 lac <input type="checkbox"/> 10-25 lacs <input type="checkbox"/> 1-5 lacs (if not ✓, then default) <input type="checkbox"/> 25 lacs - 1 crore <input type="checkbox"/> 5-10 lacs <input type="checkbox"/> >1 crore					<input type="checkbox"/> Enclosed (✓) <input type="checkbox"/> KYC Proof <sup>3</sup> <input type="checkbox"/> For Individuals (✓) <input type="checkbox"/> Politically Exposed Person (PEP) <input type="checkbox"/> Related to a Politically Exposed Person (PEP) <input type="checkbox"/> Not Applicable	
Net-worth <sup>4</sup>	in ₹ as on D D M M Y Y Y Y (Not older than 1 year)					<input type="checkbox"/> Occupation (✓) <input type="checkbox"/> Private Service <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Housewife <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Student <input type="checkbox"/> Public Sector/Govt. Service <input type="checkbox"/> Others	

<b>Mailing Address:</b> (Address should be as per KYC records, refer Instruction no. 14b)		<b>Overseas Address:</b> (Mandatory in case of NRI / FII applicant)	
City	PIN	City	State/Province
State		Country	PIN
Tel. No. (Resident)	Tel. No. (Office)	<b>Status (✓)</b> <input type="checkbox"/> Individual <input type="checkbox"/> Minor <input type="checkbox"/> Minor - NRI Repatriable <input type="checkbox"/> Minor - NRI Non-Repatriable <input type="checkbox"/> HUF <input type="checkbox"/> NRI Repatriable <input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> Listed Co. <input type="checkbox"/> Unlisted Co. <input type="checkbox"/> Non-Profit Entity <input type="checkbox"/> Body Corporate <input type="checkbox"/> Society/Club <input type="checkbox"/> Trust <input type="checkbox"/> FII <input type="checkbox"/> FPI <input type="checkbox"/> AOP <input type="checkbox"/> Others	
Mode of Holding (Only for non-demat mode) (✓) <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor (Default)			

<b>2. Investment Details</b> (Cheque / DD should be drawn in favour of the Scheme. Investors applying under direct plan must mention "Direct" in the box provided below.) Refer Scheme Ready Reckoner			
Scheme 1	Religare Invesco	Scheme Name	Dividend Frequency <sup>5</sup>
Scheme 2	Religare Invesco	Scheme Name	Dividend Frequency <sup>5</sup>
Scheme 3	Religare Invesco	Scheme Name	Dividend Frequency <sup>5</sup>

<sup>1</sup> PAN/KRN (Refer Instruction no. 3), <sup>2</sup> Mandatory in case of Minor, additionally refer Instruction no. 2, <sup>3</sup> KYC & <sup>4</sup> Networth (Refer Instruction no. 14), <sup>5</sup> Not applicable in Growth option

## Acknowledgement Slip (To be filled by the Applicant)

Received from	Mr. / Ms. / M/s.	Date	D D M M Y Y Y Y	Application No : <b>ARN-97821</b>
Towards Subscription under below Schemes				
Scheme 1	Religare Invesco	Scheme Name	Amount (₹)	Cheque/DD No.
Scheme 2	Religare Invesco	Scheme Name	Amount (₹)	Cheque/DD No.
Scheme 3	Religare Invesco	Scheme Name	Amount (₹)	Cheque/DD No.
				Signature, Stamp & Date

ARN-97821

Payment Details (Attach separate cheques for each Scheme. Refer instruction no. 5a)

Scheme	Investment Amt. (Rs)	Net Amt. (Rs)	Cheque/DD No.	Bank Name	A/c. No.
1		Net of DD Charges			
Account Type (✓) <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others					
2		Net of DD Charges			
Account Type (✓) <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others					
3		Net of DD Charges			
Account Type (✓) <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others					

Applicable in case of Third Party Payment: Payment on behalf of (✓) ☐ Minor ☐ Client ☐ Employee ☐ Distributor (Refer instruction no. 7).PAN/KRN<sup>1</sup>Name of the person making payment  Enclosed (✓) ☐ KYC Proof<sup>3</sup> 

## 3. For SIP / Micro SIP

Refer instruction no. 6 &amp; 7

☐ SIP ☐ Micro SIP ☐ SIP through Auto-Debit (ECS / Direct Debit/NACH)  
☐ SIP through Post Dated Cheques (PDCs)
Subsequent Rs.  Investment Amount X  No. of Installments = Rs.  Total Amount

## First SIP Installment Cheque Details

Cheque No.  Amount  Dated  DD MM YYYY Drawn on Bank Branch  Frequency (✓) ☐ Monthly (Default) or ☐ Quarterly SIP Date (✓) ☐ 3<sup>rd</sup> ☐ 10<sup>th</sup> ☐ 15<sup>th</sup> (Default) ☐ 20<sup>th</sup> or ☐ 25<sup>th</sup>

SIP through Post Dated Cheques (Use CTS (Cheque Truncation System) Cheques only)

Applicable in case of Third Party Payment: Payment on behalf of (✓)

☐ Minor ☐ Client ☐ Employee ☐ DistributorPeriod From  MM YYYY To  MM YYYYName of the person making payment Chq. Nos. From  To  Enclosed (✓) ☐ KYC Proof<sup>3</sup> PAN 

## 4. Demat Account Details

Optional, Refer instruction no. 11

DP ID #  Beneficiary Account No.  DP Name  (✓) ☐ NSDL ☐ CDSL

(# Not applicable in case of CDSL).

The details of the Bank Account linked with the Demat A/c as mentioned below should be provided under section 5.

## 5. Bank Account Details (Mandatory As Per SEBI Guidelines)

Refer instruction no. 4

Account No.  Account Type (✓) ☐ Current ☐ Savings ☐ NRE ☐ NRO ☐ FCNR ☐ SNRR ☐ Others

Bank Name  Branch

City  Address

MICR Code  NEFT/RTGS/IFSC Code  PIN

(9 digit No. next to your Cheque No.) (11 digit character code appearing on cheque leaf)

Please provide a cancelled cheque leaf of the same bank account as mentioned above. We will credit the redemption/dividend proceeds directly into investors' account through electronic means if the details provided by the investors are sufficient for the same. Mentioning your IFSC will help us transfer the amount to your bank account faster. To receive cheque payout, (✓) ☐ If you have provided multiple bank registration form (✓) ☐

Unit holders who have opted to hold Units in dematerialised form must provide Bank Account details linked with the Demat account, as mentioned under section 4. In case of discrepancy, bank details as per depository records will be final.

## 6. Nomination Details (Mandatory for investors who opt to hold units in non-demat form.)

Refer Instruction no. 10

	Name	Date of Birth (for minor)	% Share	Relationship	Signature
Nominee 1	<input type="text"/>	<input type="text"/> DD MM YYYY	<input type="text"/>	<input type="text"/>	Optional
Nominee 2	<input type="text"/>	<input type="text"/> DD MM YYYY	<input type="text"/>	<input type="text"/>	Optional
Nominee 3	<input type="text"/>	<input type="text"/> DD MM YYYY	<input type="text"/>	<input type="text"/>	Optional
Name of Guardian (If Nominee is Minor)					Signature of Guardian
					Mandatory
Address <input type="text"/>					

I do not intend to nominate (✓ the box, in case you do not wish to nominate) ☐

## 7. Declaration &amp; Signature(s)

The Trustees, Religare Invesco Mutual Fund  
 Having read and understood the contents of the Statement of Additional Information / Scheme Information Document(s) of the respective schemes, I / We hereby apply to the Trustees of Religare Invesco Mutual Fund for units of the Scheme / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We have understood the details of the Scheme and I / We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We do not have any existing Micro Investments which together with the current Micro Investment application will result in aggregate investments exceeding Rs. 50,000/- in a year (applicable to Micro Investment investors only). The Distributor 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 / We hereby authorise Religare Invesco Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my / our bank(s) / Religare Invesco Mutual Fund's Bank(s) and / or Distributor / Broker / Investment Advisor and to verify my / our bank details provided by me / us. I / We hereby declare that the particulars given above are correct. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I / We would not hold Religare Invesco Asset Management Company Pvt. Ltd. (Investment Manager to Religare Invesco Mutual Fund), their appointed

service providers or representatives responsible. I / We will also inform Religare Invesco Asset Management Company Pvt. Ltd., about any changes in my / our bank account. I / We hereby declare that the amount being invested by me / us in the Scheme of Religare Invesco Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.  
 I / We confirm that I / We are not United States person(s) under the laws of United States or residents(s) of Canada as defined under the applicable laws of Canada.  
**Applicable to KRN holders :** I, the first / sole holder hereby declare that I do not hold a Permanent Account Number and hold only a single 'PAN exempt KRN' issued by KRA and that my existing investment in schemes of Religare Invesco Mutual Fund together with current application will not result in aggregate investments exceeding Rs. 50,000/- in a rolling 12 months period or in a financial year i.e. April to March.  
**Applicable to NRIs only :** I / We confirm that I am / we are Non-Residents of Indian Nationality / Origin and that the funds are remitted from abroad through approved banking channels or from my / our NRE / NRO / FCNR / SNRR Account. I / We confirm that the details provided by me / us are true and correct.

(✓) Yes ☐ No ☐If NRI (✓) ☐ Repatriation basis ☐ Non-Repatriation basisDate  DD MM YYYYPlace 

Sole / First Applicant / Guardian / POA

Second Applicant / POA

Third Applicant / POA

## GET IN TOUCH

Religare Invesco Mutual Fund

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