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Please Note : All purchases are subject to realization of instruments and furnishing of mandatory information / documents

ISC Stamp, Signature & Date

r. _____ ed _

4. BANK ACCO	UNT DETAILS (Mandatory as per SEBI	Guidelines, refer instruction F)			ARN	-97821		
A/c. No.		Account Type (✔)	⊖Savings ⊖Cu	rrent Others (please specify)			
Bank Name								
Branch Address								
City					Pi	n Code		
MICR Code	RT	rGS IFSC Code (For Rs 2 lakhs and)	a bolve)	NEFT IFSC Co	de	(For upto R\$.	2 lakh\$)	
	(9 digit number next to your Cheque No.)		ase also provide a				as mention	ned above
	• •	IFSC Code, as applicable, will help us transfe	r the amount to y	our bank accour	nt quicker, electi	ronically.		
5. SCHEME DE	TAILS (Refer instruction G)							
Scheme DAIW	Α			Plan				
Option		Sub-option		Dividend Free	quency			
6. INVESTME	NT AND PAYMENT DETAILS (Refer ins	truction H)						
Investment Amo	unt (Rs.) (A)		Cheque / DD No					
DD Charges (Rs.) (B)		Date					
Net Amount (Ch	eque / DD amount) (Rs.) (A minus B)		Cheque / DD Dr	awn on Bank				
Amount in word	5		°					
Mode of Paymer	t OCheque OD O	Fund Transfer	Branch					
A/c. No.			A/c. Type (✔)	Ourrent ()Savings ()	Others		
		t provided above pertain to my / our own ban						
	÷	oofs. Application Form without this information				Form submitte	ed 🔾 Yes /	$1 \bigcirc No.$
		or SIP by filling SIP / Micro SIP Auto Debit / E	S facility - Regist	ration cum Man	date Form.			
7. NOMINATIO	ON DETAILS (To be filled by individual(s)	applying single or jointly, refer instruction I)						
I/We				and				
the units allotted	to my/our credit in my Folio in the event of	my / our death. I/We also understand that all						
	scharge by the Mutual Fund / Trustee / AN		payments and se	ttiements made	to such Nomine	e(s) acknowled	iging receip	Ji mereor
Name of the Firs	t nominee					Date of birth	(if nominee	is minor)
Mr. Ms. M/s.								
Address of nomi	ee (Please provide full address)							
Name of the gua	rdian (if nominee is minor)				P	in code	Cf	
Mr. Ms. M/s.	(in normeens minor)					Date of birth	(IT nominee	IS MINOR)
	ian (Please provide full address)						Alloca	ation %
guard								
Name of the Sec	ond nominee					Date of birth	(if nominee	is minor)
Mr. Ms. M/s.								
Address of nomi	ee (Please provide full address)						Alloca	ation %
Name of the Thir	d nomine e					Data of blath	(16	
Mr. Ms. M/s.	anonimee					Date of birth	(if nominee	is minor)
and the second second second	nee (Please provide full address)						Alloca	ation %
8. DECLARAT	ION AND SIGNATURES							
To, The Trustee, Dai								
		nation Document and the Statement of Additional tion'. I/We hereby apply for allotment/purchase of						
and regulations of t	he Scheme. I/We have read and understood the	details of the Scheme and have neither received r	or been induced by	any rebate or gif	ts, directly or indi	ectly, in making	this investm	nent. I/We
		nt and that the investment and the amount investe ons, Notifications or Directions issued by any regu						
(India) Private Limit	ed (Investment Manager to Daiwa Mutual Fund)	and its agents to disclose details of my investmen rue and correct. If the transaction is delayed or no	t(s) to my bank(s) /	Daiwa Mutual Fun	d's bank(s) and / o	r Advisor/Broke	er/Investme	nt Advisor.
Mutual Fund, its inv	estment manager, their appointed service prov	iders or representatives responsible. The ARN hole	ler has disclosed to	me/us all the co				
mode), payable to h	im for the different competing schemes of vari	ious mutual funds from amongst which the Schem	e is being recomme	nded to me / us.	Date			

			SIGNATURE(S)		
X	Sole / First Applicant / Guardian / PoA	ХΧ	Second Applicant	xх	Third Applicant
	ulication from investors meiding in UCA or Canada shall be	roi.	acted Default entions will be applied in cases where the is	form	ation provided is either amhiguous or has any discreption

Application from investors residing in USA or Canada shall be rejected. Default options will be applied in cases where the information provided is either ambiguous or has any discrepancy.

Document	Individual	Companies	Societies	Partnership Firms	Investment through PoA	Trust
Resolution/Authorization to invest		√	√	√		√
List of authorized signatories with specimen signatures		√	√	√	√	√
Memorandum & Articles of Association		√				
Trust Deed						√
Bye-laws			√			
Partnership Deed				√		
Notarized PoA					√	
Proof of Address						
Copy of PAN Card	√	√	√	√	√	√
KYC	√	√	v	1	V	v