

APPLICATION FORM FOR UNION KBC ASSET ALLOCATION FUND - MODERATE PLAN

Application No. _____

(Please read the instructions carefully and complete the relevant section legibly in black / dark coloured ink and in BLOCK LETTERS.)

Broker Code/ ARN ARN-97821	Sub-Broker Code/ Branch Code	Branch Manager Code	LG/ MO/ CRE Code	Collection Date D D M M Y Y Y Y	Time Stamping
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Any 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.

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY. (Refer Section 'J' of instructions)

In case the subscription amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

1. EXISTING UNIT HOLDER INFORMATION (Please complete Section 1, 7 & 9 only) * Mandatory

Folio No. _____

2. UNITHOLDING OPTION (Please shade (●)) ☐ Physical Mode ☐ Demat Mode (If demat account details are provided below, units will be allotted by default in electronic mode only)

DEMAT ACCOUNT DETAILS (Refer Section 'G' of instructions)

NSDL: Depository Participant (DP) Name _____ DP ID No: **I N** _____ Beneficiary Account Number _____

CDSL: Depository Participant (DP) Name _____ Beneficiary Account Number _____

It may be noted that the combination/ sequence of names and mode of holding in the application form must match exactly with the account held with the Depository participant. Investor willing to invest in demat option, may provide a copy of the DP statement to enable us to match the demat details as stated in the Application Form.

3. APPLICANT INFORMATION * (Please shade (●)) (Refer Section 'B' and 'C' and 'G' of instructions) (Please ensure that the details mentioned matches with the KYC details)

Name of First Applicant / Non-individual Investor (First time investors, please fill in all the blocks) _____ Date of Birth (Mandatory in case of minor) D D M M Y Y Y Y

☐ Mr. ☐ Ms. ☐ M/s.

Name of Guardian (In case of minor) / PoA Holder / Contact Person (In case of Non-individual Investors)

☐ Mr. ☐ Ms.

Relationship with Minor (Please attach proof for date of birth and relationship) ☐ Mother ☐ Father ☐ Legal Guardian Designation of Contact Person (For Non-individual Investor) _____

Name of Second Applicant ☐ Mr. ☐ Ms.

Name of Third Applicant ☐ Mr. ☐ Ms.

PAN and KYC* (Please shade (●)) (PAN - Not applicable for Micro SIP and investor(s) from Sikkim) Mode of Holding Status

Applicant Details	PAN *Please attach Proof (Mandatory for Demat mode)	Know Your Client (KYC) (For Demat mode this is optional)	Mode of Holding	Status
First Applicant		<input type="radio"/> KYC Proof	<input type="radio"/> Single	<input type="radio"/> Resident Individual <input type="radio"/> Minor <input type="radio"/> HUF
Second Applicant		<input type="radio"/> KYC Proof	<input type="radio"/> Joint (Default option)	<input type="radio"/> Sole Proprietor <input type="radio"/> FII <input type="radio"/> Bank
Third Applicant		<input type="radio"/> KYC Proof	<input type="radio"/> Anyone or Survivors	<input type="radio"/> NRI-NRE <input type="radio"/> NRI-NRO <input type="radio"/> PIO-NRE
Guardian/ PoA Holder		<input type="radio"/> KYC Proof		<input type="radio"/> PIO-NRO <input type="radio"/> Society <input type="radio"/> Trust
				<input type="radio"/> Partnership Firm <input type="radio"/> Govt. Entity <input type="radio"/> Company
				<input type="radio"/> AOP/ BOI <input type="radio"/> Others (Please Specify)

OCCUPATION ☐ Service ☐ Housewife ☐ Business ☐ Professional ☐ Retired ☐ Student ☐ Political Rep. ☐ Others (Please Specify)

4. CONTACT INFORMATION (Refer Section 'I' of instructions)

Mailing address of First Applicant / Non-individual Investor (P. O. Box address is not sufficient.)

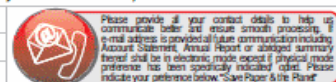
City _____ State _____ Pin Code _____

Overseas address (Mandatory for NRI/FII. P. O. Box address is not sufficient. Investors residing overseas and with P. O. Box address please provide your Indian address)

City _____ Country _____ Area Code _____

Contact details of First Applicant/ PoA Holder/ Contact Person (Refer Section 'I' of Instructions) (Please ensure to mention Country and Area Code)

Tel. (Off.)	Country/ Area code	Mobile	Country/ Area code
Tel. (Res.)	Country/ Area code	Fax	Country/ Area code
E-mail			



I/ we wish to receive the Account Statement, Annual Report or Abridged Report, Consolidated Account Statement and other statutory documents in ☐ Physical ☐ E-mail

5. INVESTOR PROFILE (Please shade (●))

	Gender	Annual Income (₹)	Annual Savings (₹)
First Applicant	<input type="radio"/> M <input type="radio"/> F	<input type="radio"/> <2L <input type="radio"/> 2L-5L <input type="radio"/> 5L-10L <input type="radio"/> >10L	<input type="radio"/> <1L <input type="radio"/> 1L-3L <input type="radio"/> 3L-5L <input type="radio"/> >5L
Second Applicant	<input type="radio"/> M <input type="radio"/> F	<input type="radio"/> <2L <input type="radio"/> 2L-5L <input type="radio"/> 5L-10L <input type="radio"/> >10L	<input type="radio"/> <1L <input type="radio"/> 1L-3L <input type="radio"/> 3L-5L <input type="radio"/> >5L
Third Applicant	<input type="radio"/> M <input type="radio"/> F	<input type="radio"/> <2L <input type="radio"/> 2L-5L <input type="radio"/> 5L-10L <input type="radio"/> >10L	<input type="radio"/> <1L <input type="radio"/> 1L-3L <input type="radio"/> 3L-5L <input type="radio"/> >5L
Risk Tolerance	<input type="radio"/> Low <input type="radio"/> Medium <input type="radio"/> High	Investment Horizon	<input type="radio"/> 1-12 months <input type="radio"/> 12-24 months <input type="radio"/> 24-36 months <input type="radio"/> 36 months and above

7A DEBIT MANDATE FOR UNION KBC ASSET ALLOCATION FUND - MODERATE PLAN (Lumpsum Investment) (For Union Bank of India account holders at CMS Locations only)

Application No. _____

To be detached by the Registrar (CAMS Pvt. Ltd.) and presented to Union Bank of India.

To Branch Manager - Union Bank of India

Date ____/____/____

I/ We _____

authorise you to debit my / our Account No. _____ Type of Account _____

₹ (in figures) _____ ₹ (in words) _____ to

pay for the purchase of units of Union KBC Asset Allocation Fund - Moderate Plan.

Signature of Account Holder(s) / Authorised Signatory (ies)
(As per Bank records)

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Application No. _____

Received from: Mr./ Ms. /M/s _____

an application for units of _____ (Scheme/Option)

Amount _____ Instrument No _____

Dated ____/____/____ Drawn on Bank & Branch _____

Unitholding Option ☐ Physical Mode ☐ Demat ModeEnd: ☐ Third Party Payment Declaration Form ☐ Bank Accounts Registration Form ☐ Nomination Form ☐ SIP Form

Please note: All purchases are subject to realisation of cheques/ Demand Drafts/ Debit Mandate

Collection centre's stamp with
date and time of receipt

For Office use only

NFO OPENS ON : June 04, 2012 CLOSES ON : June 18, 2012

6. BANK ACCOUNT DETAILS* [Please shade (●)] (Refer Section 'D' and 'G' of instructions) (Multiple Bank Accounts Registration form available at www.unionkbc.com)

For unit holders opting to invest in demat, please ensure that the bank account linked with the demat account is mentioned here.

Bank Name _____

Bank A/C No _____ Bank Branch _____

A/C Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others _____ (Please Specify)

Bank City _____ State _____ PIN _____

IFSC CODE _____ MICR CODE _____

Document Attached ☐ Bank Statement ☐ Cancelled cheque with name pre-printed ☐ Pass Book

(In case bank details are not provided in 'Multiple Bank Account Registration Form' as default bank, the above section 6 bank details shall be treated as default bank.)

(IFSC Code is the 11 digit no appearing on your cheque leaf, mandatory for credit via NEFT/ RTGS) (MICR Code is the 9 digit code next to the cheque no)

7. INVESTMENT AND PAYMENT DETAILS* [Please shade (●)] (Refer Section 'E', 'F' and 'G' of instructions) (Third Party payment(s) will not be accepted)

Scheme **U N I O N K B C A S S E T A L L O C A T I O N F U N D - M O D E R A T E P L A N**

Option ☐ Growth (Default) ☐ Dividend Pay Out ☐ Dividend Reinvestment ☐ Dividend Sweep (Default option/facility will be applied in case of no information, ambiguity or discrepancy)

Dividend Sweep to **U N I O N K B C**

Option _____ Facility _____

LUMP SUM

Payment Mode: ☐ Cheque ☐ DD ☐ RTGS ☐ NEFT ☐ Fund Transfer ☐ Debit Mandate (Union Bank of India A/C Holders only)

Cheque / DD / RTGS / NEFT No. _____ Cheque / DD / RTGS / NEFT Date **D D M M Y Y Y Y**

Amount in ₹ (Figures) _____ Amount in ₹ (words) _____

Source Bank Name _____ Source Branch _____

Source Bank A/C No. _____ Account Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR

Cheque Issuer Name _____ In case the cheque is issued by a person other than the investor

Document attached in the case of third party payments ☐ Proof / Bank Certificate for DD ☐ Third Party Declarations

MICRO SIP

☐ SIP Through Post Dated Cheques (Available only during the Ongoing Offer Period) ☐ SIP Through Auto Debit (Please fill and attach the SIP Auto Debit Form) (Available during NFO and Ongoing Offer Period)

SIP Period From **M M Y Y Y Y** To **M M Y Y Y Y** SIP Date ☐ 2nd ☐ 8th ☐ 15th ☐ 23rd

SIP Frequency ☐ Monthly ☐ Quarterly Instalment Amount in ₹ (Figures) _____ No. of Instalments _____

Cheque Nos. From _____ To _____ Drawn on Bank A/c No. _____

Bank Name _____ Branch _____

SIP

Document Details in case of Micro SIP^{*} Document Description _____ Document No. (if any) _____

^{*}I/We hereby declare that we do not have any existing SIPs which together with the current application, in a rolling 12 month period, or in a financial year i.e. April to March, will result in aggregate investments exceeding ₹ 50,000/-.

8. NOMINATION DETAILS* [Please shade (●)] (Refer Section 'H' and 'G' of instructions) (In case of multiple nominees, please complete the separate nomination form available on our website)

☐ Please register nomination as requested below ☐ I/We wish to nominate multiple nominees^{*} ☐ I/We do not wish to nominate^{*}

(^{*}Please strike out the form below)

I/We hereby nominate the under mentioned Nominee to receive the amounts to my / our credit in the event of my / our death. I/We also understand that all payments and settlements made to such Nominee shall be a valid discharge by the AMC / Mutual Fund / Trustee.

Name of the Nominee: _____ Address: _____

Relationship: _____ Date of Birth (In Case of Minor) ____/____/____

Name of the Guardian (in case of minor): _____ Signature of Nominee/ Guardian (not mandatory)

9. DECLARATION & SIGNATURES* (Refer Section 'K' of instructions)

Having read and understood the terms and contents of the Scheme Information Document (SID), Statement of Additional Information (SAI), Key Information Memorandum (KIM), and the relevant addenda thereto, if any of Union KBC Asset Allocation Fund - Moderate Plan, I/We, hereby apply to the Trustees of Union KBC Mutual Fund for Units of the Union KBC Asset Allocation Fund - Moderate Plan and agree to abide by the terms and conditions, rules and regulations of the said Scheme. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/We hereby nominate the above nominee to receive all the amounts to my/our credits in the event of my/our death and have read the instructions for nomination. I understand that acknowledging receipts to my/our credit will constitute full discharge of liabilities of Union KBC Mutual Fund. 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, Regulations, Rules, Notifications, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/her for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

Applicable to NRIs only: I/We confirm that I am / We are Non-Resident(s) of Indian Nationality / Origin and I/We hereby confirm that the funds for subscriptions have been remitted from abroad through normal banking channels or from fund in my/our Non Resident External / Ordinary account/ FCNR account(s). I/We hereby agree to have read and understood the terms and conditions with regard to payment of transaction charges as specified in the SID/SAI/KIM and addenda thereto and this application form and instructions thereto.

Signature _____ Signature _____ Signature _____

Sole / First Applicant / Guardian / POA / Authorised Signatory Second Applicant / POA / Authorised Signatory Third Applicant / POA / Authorised Signatory

Document Checklist	Individual	Company	Society	Partnership Firms	Investment through POA	Trusts	NRI	FII's	HUF	AOP & BOI	Demat Holder
PAN Card (Investor(s) from Sikkim, government officials specifically exempt)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
KYC Acknowledgement	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Resolution/ Authorisation to invest	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
List of authorised signatories with specimen signatures	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Memorandum & Articles of Association	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Certificate of Incorporation	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Trust Deed	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Bye-laws	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Partnership Deed	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Notarised POA (signed by investor and POA Holder)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Bank Account Proof (Latest available)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Demat Statement (Latest available)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Client Master Statement (Latest available)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
HUF Deed	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Overseas Auditor's Certificate & SEBI Regn. Certificate	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

^{*}For demat holder, submission of KYC is optional.

Please address all future communication(s) in connection with this application to the Registrar & Transfer Agent of the scheme


Computer Age Management Services Pvt. Ltd.,

Unit: Union KBC Mutual Fund

148, Old Mahabalipuram Road, Okkiyam Thuraiyakkam, Chennai - 600097.

Toll Free : 1 800 200 2267

Email: enq_uk@camsonline.com | Website: www.camsonline.com

 **Union KBC**
MUTUAL FUND
Your Bridge to Responsible Investing

Union KBC Asset Management Company Pvt. Ltd.

7th Floor, Piramal Tower, Peninsula Corporate Park, Ganpatrao Kadam Marg, Lower Parel (W), Mumbai - 400013.

Tel No. : 022 24833333

Website: www.unionkbc.com | Email: investorcare@unionkbc.com