

DHFL Pramerica Perks Employee Common Application Form



(To be used / distributed with Key Information Memorandum)

Investors must read the Key Information Memorandum, the instructions and Product Labeling on cover page before completing this Form.

Application No. _____

Please read the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required.

1. DISTRIBUTOR INFORMATION

ARN	Sub broker ARN	Sub broker code (as allotted by ARN holder)	EUIN
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In case the EUIN box has been left blank, please refer the point related to EUIN in the Declaration & Signatures section overleaf.
Upfront commission shall be paid directly by the investor to the AMFI registered distributor, based on the investor's assessment of various factors, including the service rendered by the distributor.

2. TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (please ✓ any one of the below)

I confirm that I am a First time investor in Mutual Funds. OR I confirm that I am an existing investor in Mutual Funds.

3. EXISTING FOLIO NUMBER

_____ The details in our records under the folio number mentioned alongside will apply for this application.

4. SOLE / FIRST APPLICANT'S DETAILS

Name	Mr Ms M/s												
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Date of Birth (DOB) (Mandatory for Minor)	D D M M Y Y Y Y	<input type="checkbox"/> Proof of DOB of Minor enclosed (please ✓) <input type="checkbox"/> Passport <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Other
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PAN	KYC	<input type="checkbox"/> Proof attached	Nationality	Place of Birth	(Mandatory)
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Are you a citizen/tax resident of any country other than India? Yes No (Default) if yes, please specify country/(ies) _____

Guardian Name (if Sole/ First applicant is a Minor)	Mr Ms M/s												
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PAN	KYC	<input type="checkbox"/> Proof attached	Nationality	Place of Birth	(Mandatory)
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Are you a citizen/tax resident of any country other than India? Yes No (Default) if yes, please specify country/(ies) _____

Mailing Address (P. O. Box Address is not sufficient)															
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Pincode	(Mandatory)	State	Country	City
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Phone (Off.)	Fax No.	Mobile No.
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Phone (Res)	Email ID
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Overseas Address (Mandatory in case of NRI/ FIJ applicant, in addition to mailing address)															
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State	Country	Zip Code
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Status of the First Applicant (Mandatory, please ✓) <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI-Repatriation <input type="checkbox"/> NRI-Non Repatriation <input type="checkbox"/> Others (please specify)

Occupation of the Applicant (Mandatory, please ✓) <input type="checkbox"/> Service <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (please specify)
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Gross Annual Income (₹) (please ✓) <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1 - 5 Lacs <input type="checkbox"/> 5 - 10 Lacs <input type="checkbox"/> 10 - 25 Lacs <input type="checkbox"/> >25 Lacs - 1 Crore <input type="checkbox"/> >1 Crore OR <input type="checkbox"/> Net-worth (Mandatory for Non-Individuals) ₹ _____ as on D D M M Y Y Y Y (Not older than 1 year)
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Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) <input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable
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Non-Individual Investors involved/ providing any of the mentioned services <input type="checkbox"/> Foreign Exchange / Money Changer Services <input type="checkbox"/> Gaming / Gambling / Lottery / Casino Services <input type="checkbox"/> Money Lending / Pawning <input type="checkbox"/> None of the above
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5. MODE OF HOLDING

Single OR Anyone or Survivor OR Joint (Default option)

6. SECOND APPLICANT'S DETAILS

Name	Mr Ms												
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PAN	KYC	<input type="checkbox"/> Proof attached	Nationality	Place of Birth	(Mandatory)
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Are you a citizen/tax resident of any country other than India? Yes No (Default) if yes, please specify country/(ies) _____

Occupation of the Applicant (Mandatory, please ✓) <input type="checkbox"/> Service <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (please specify)
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Gross Annual Income (₹) (please ✓) <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1 - 5 Lacs <input type="checkbox"/> 5 - 10 Lacs <input type="checkbox"/> 10 - 25 Lacs <input type="checkbox"/> >25 Lacs - 1 Crore <input type="checkbox"/> >1 Crore OR Net Worth (₹) _____

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) <input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable
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7. THIRD APPLICANT'S DETAILS

Name	Mr Ms												
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PAN	KYC	<input type="checkbox"/> Proof attached	Nationality	Place of Birth	(Mandatory)
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Are you a citizen/tax resident of any country other than India? Yes No (Default) if yes, please specify country/(ies) _____

Occupation of the Applicant (Mandatory, please ✓) <input type="checkbox"/> Service <input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (please specify)
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Gross Annual Income (₹) (please ✓) <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1 - 5 Lacs <input type="checkbox"/> 5 - 10 Lacs <input type="checkbox"/> 10 - 25 Lacs <input type="checkbox"/> >25 Lacs - 1 Crore <input type="checkbox"/> >1 Crore OR Net Worth (₹) _____

Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) <input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable
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ACKNOWLEDGMENT SLIP (To be filled in by the investor)

Application No. _____

An Application for scheme															
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alongwith Cheque / DD No. / UTR No.	Dated	D D M M Y Y Y Y
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Drawn on (Bank)	Amount ₹
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Signature, Stamp & Date

8. POWER OF ATTORNEY (POA) HOLDER DETAILS (If investment is being made by a Constituted Attorney)

Name	Mr	Ms																
PAN											KYC	<input type="checkbox"/> Proof attached	Nationality				Place of Birth	(Mandatory)

Are you a citizen/tax resident of any country other than India? Yes No (Default) if yes, please specify country/(ies) _____

9. FIRST APPLICANT'S BANK ACCOUNT DETAILS (Mandatory) (Please attach copy of cancelled cheque)

Name of the Bank											Branch											
Account No.											Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> Others										
Bank Address																						
Pincode					State					City												
MICR Code (9 digits)					*IFSC Code for NEFT / RTGS					*This is an 11 Digit Number, kindly obtain it from your Bank Branch.												

10. INVESTMENT & PAYMENT DETAILS The name of the first/sole applicant must be pre-printed on the cheque. (Investors applying under Direct Plan must mention "Direct" against the Scheme name.)

Scheme Name _____ Option Growth* Dividend *Default Option

Dividend Facility Payout Re-Investment* Dividend Frequency _____ Mode of Investment Lump Sum Only SIP Only Lump Sum with SIP

Payment Type [Please ✓]	<input type="checkbox"/> Non-Third Party Payment	<input type="checkbox"/> Third Party Payment (Please attach Third Party Payment Declaration Form)		
Amount of Cheque / DD / Payment Instrument / RTGS/ NEFT in figures (₹)	DD Charges, if any	Net Cheque/ DD Amount	Cheque / DD / Payment Instrument No. & Date	Drawn on Bank / Branch

SIP Investment (Please ✓ any one) Daily Monthly Quarterly

SIP THROUGH AUTO DEBIT (ECS/Direct Debit/NACH)
Please also fill and attach the SIP Auto Debit Facility Form OR

SIP THROUGH POST-DATED CHEQUE Second and subsequent Instalment cheque Details

Cheque Nos. From _____ To _____

Dated From _____ D D M M Y Y Y Y To _____ D D M M Y Y Y Y

Second and Subsequent Instalment Details: (All subsequent instalment amounts should be same as the first instalment.)
Instalment Amount ₹ _____
SIP Date (Please ✓): 1st 7th 10th 15th 25th All 5 dates
SIP Period (Please ✓): _____
 Till I/we instruct to discontinue the SIP No. of instalments _____

Please mention
Enrolment Period: From _____ M M Y Y Y Y To _____ M M Y Y Y Y

11. DEMAT ACCOUNT DETAILS

National Securities Depository Limited				Central Depository Services (India) Limited			
Depository Participant Name	Mr / Ms / M/S			Depository Participant Name	Mr / Ms / M/S		
DP ID No.	Beneficiary A/c No.			Target ID No.			

12. NOMINATION DETAILS (To be filled in by individuals singly or jointly. Mandatory only for Investors who opt to hold units in Non-Demat Form)

I/we do not wish to nominate OR I/we do hereby nominate the undermentioned Nominee(s) to receive the Units allotted to my/our credit in my/our folio in the event of my/our death. I/we also understand that all payment and settlements made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC/Mutual Fund/Trustees.

Name and Address of the Nominess(s)	PAN	Date of Birth	Name & Address of Guardian (to be furnished in case the nominee is minor)	Signature of Guardian / Nominee	Proportion (%) by which the units will be shared by each nominee (% to aggregate to 100%)
Nominee 1					
Nominee 2					
Nominee 3					

13. DECLARATION AND SIGNATURES

I/We hereby confirm and declare as under:-
I/We have read and understood the contents of the Statement of Additional Information of DHFL Pramerica Mutual Fund and the Scheme Information Document(s)/Key Information memorandum of the respective Scheme(s) and Addenda thereto, issued from time to time and the Instructions. I/We, hereby apply to the Trustee of DHFL Pramerica Mutual Fund for allotment of units of the respective Scheme(s) of DHFL Pramerica Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/We declare that I am/We are authorised to make this investment and 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. 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(s) is/are being recommended to me/us. I/We declare that the information given in this application form is correct, complete and truly stated. In the event of my/our not fulfilling the KYC process to the satisfaction of the AMC/DHFL Pramerica Mutual Fund, I/We hereby authorise the AMC/DHFL Pramerica Mutual Fund to redeem the units against the funds invested by me/us at the applicable NAV as on the date of such redemption. I/We agree that DHFL Pramerica Mutual Fund can debit from my Folio Transaction Charges as applicable. I/We agree to notify DHFL Pramerica Asset Managers Private Limited (erstwhile Pramerica Asset Managers Private Limited) immediately in the event the information in the self-certification changes.
For investors investing in Direct Plan: I/We hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product/scheme/plan.
Applicable to Micro Investors: I/We hereby declare that I/We do not have any existing Micro investments which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year.
Applicable to NRIs: I/We confirm that I am/We are Non-Resident(s) of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account(s).
FATCA Declaration: I/We hereby acknowledge and confirm that the information provided in this form is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We shall be liable for it. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required at your end. I/We hereby authorise you to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/us to Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees (the Authorised Parties) or any Indian or foreign governmental or statutory or judicial authorities/agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax/revenue authorities and other investigation agencies without any obligation of advising me/us of the same.
 Please ✓ if the EUIN space is left blank: I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

1st Applicant Signature / Guardian Signature / POA Signature / Thumb Impression	2nd Applicant Signature / POA Signature / Thumb Impression	3rd Applicant Signature / POA Signature / Thumb Impression
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GENERAL GUIDELINES

- Please read the Scheme Information Document/Key Information Memorandum of the Scheme carefully before investing.
- Please furnish all information marked as 'MANDATORY'. In the absence of any mandatory information, the application would be rejected.
- Applications on behalf of minors should be made by natural guardian (i.e. father or mother) or legal guardian (court appointed) and signed by them. The name of the Guardian should be filled in the relevant space provided in the Application Form. No joint applicant/joint holder is permitted with the minor beneficiary.
- Please strike off sections that are not applicable.

INSTRUCTIONS

1. DISTRIBUTOR INFORMATION

- 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.
- Please mention 'DIRECT' in case the application is not routed through any distributor.
- Pursuant to SEBI circular dated September 13, 2012, mutual funds have created a unique identity number of the employee/relationship manager/sales person of the distributor interacting with the investor for the sale of mutual fund products, in addition to the AMFI Registration Number (ARN) of the distributor. This Employee Unique Identification Number is referred as "EUIIN". EUIIN aims to assist in tackling the problem of mis-selling even if the employee/relationship manager/sales person leaves the employment of the distributor or his/her sub broker. **Quoting of EUIIN is mandatory in case of advisory transactions.**
- Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided, in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIIN of the Sales Person (if any) in the "EUIIN" column.
- Investors are requested to note that EUIIN is applicable for transactions such as Purchases, Switches, Registrations of SIP / STP / Trigger STP / Dividend Transfer Plan and EUIIN is not applicable for transactions such as Installments under SIP/ STP / SWP / STP Triggers, Dividend Reinvestments, Redemption, SWP Registration, Zero Balance Folio creation and installments under Dividend Transfer Plans.
- Investors are requested to note that EUIIN is largely applicable to sales persons of non individual ARN holders only (whether acting in the capacity of the main distributor or sub broker). Further, EUIIN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ARN-14/12-13 dated July 13, 2012.

2. TRANSACTION CHARGES

In terms of SEBI circular, Cir/ IMD/ DF/13/ 2011 dated August 22, 2011, the distributors of mutual fund products are allowed to be paid transaction charges for purchase transactions:

- @ ₹ 100/- per subscription of ₹ 10,000/- and above in respect of existing unitholders; and
- @ ₹ 150/- for subscription of ₹ 10,000/- and above in respect of a first time investor in mutual funds.

In case of SIPs, the transaction charge if any, shall be applicable only if the total commitment through SIPs aggregates to ₹ 10,000/- and above and shall be recovered in 4 installments. The transaction charge shall be deducted from the subscription amount and paid to the distributor; and the balance shall be invested in the Scheme. The transaction charges and the net investment amount and the number of units allotted will be clearly mentioned in the Account Statement issued by the Mutual Fund.

There shall be no transaction charges on

- 'Direct' investments;
- subscription below ₹ 10,000/- and
- switch (including STP) and redemption (including SWP) transactions.

Distributors shall be able to choose to opt out of charging the transaction charge. However, the 'opt-out' shall be at distributor level and not investor level i.e. a distributor shall not charge one investor and choose not to charge another investor.

3. UNIT HOLDING OPTION (Demat / Non - Demat Mode)

- Investors can hold units in demat / non-demat mode. In case demat account details are not provided or details of DP ID / BO ID, provided are incorrect or demat account is not activated or not in active status, the units would be allotted in non-demat mode.
- Statement of Accounts would be sent to investors who are allotted units in non-demat mode.
- Units held in dematerialized form are freely transferable with effect from October 01, 2011, except units held in Equity link savings Scheme during the lock-in period.

4. (A) EXISTING INVESTORS OF DHFL PRAMERICA MUTUAL FUND (DHFLPMF)

If you are an existing investor please fill your existing folio number and fill section 10 & 13 only.

(B) APPLICANT'S INFORMATION

- Please furnish names of all applicants. The name of the Sole /First Applicant should be mentioned in the same manner in which it appears in the Income Tax PAN card. Please note the following:
 - In case the applicant is a Non-Individual investor, the Contact Person's name should be stated in the space provided (Name of Guardian / Contact Person)
 - In case the applicant is a minor, the Guardian's name should be stated in the space provided (Name of Guardian / Contact Person). It is mandatory to provide the minor's date of birth in the space provided.
 - In case the application is being made on behalf of a minor, he / she shall be the Sole Holder/Beneficiary. There shall be no joint account with a minor unitholder.
 - If there is more than one applicant but the mode of holding is not specified, the same would be treated as Joint.
 - Please indicate the tax status of the sole/1 applicant at the time of investment. The abbreviations used in this section are:
NRI: Non-Resident Indian Individual, PIO : Person of Indian Origin, FI: Foreign Institutional Investor, NGO: Non Government Organization, AOP: Association of Persons, BOI: Body of Individuals, HUF : Hindu Undivided Family.
 - Please mention your Occupation by ticking the appropriate option.
- (C) In case of a minor, it is mandatory to submit photocopy of any one of the following towards proof of date of birth at the time of initial investment:
- Birth certificate of minor, or
 - School leaving certificate / Mark sheet issued by Higher Secondary Board of respective states, ICSE, CBSE etc, containing the minor's date of birth, or
 - Passport of minor

- (D) In case of minor applicants, Guardian in the Folio should either be a natural guardian (i.e. father or mother) or a court appointed legal guardian. In both the cases, it is mandatory to submit a document evidencing the relationship (in case of a natural guardian, if the same is not available as part of the documents submitted as per 4 (C) above) between the minor and the Guardian.

(E) KYC/PROOF OF IDENTITY AND ADDRESS DETAILS/ Additional Information for FATCA compliance (MANDATORY):

Please furnish PAN, KYC, Additional details for FATCA compliance in this section for each applicant/unit

holder, including the Guardian and/or Power Of Attorney (POA) holders as explained in (i) & (ii) below.

i. PAN

It is mandatory for all investors (including guardians, joint holders, NRIs and power of attorney holders) to provide their Income Tax Permanent Account Number (PAN) and also submit a photo copy of the PAN card at the time of purchase of Units except for investors who are exempted from PAN requirement, please refer to KYC Form for exemption of PAN requirement.

ii. Know Your Customer (KYC)

KYC compliance is compulsory for all irrespective of the amount of investment. Additionally, Non Individual applicants are required to fill & submit the Ultimate Beneficial Owner (UBO) Declaration Form (Annexure II) also.

iii. Micro Investment

With effect from October 30, 2012, where the aggregate of the lump sum investment (fresh purchase & additional purchase) and Micro SIP installments by an investor in a financial year i.e. April to March does not exceed ₹ 50,000/- it shall be exempt from the requirement of PAN. However, requirements of Know Your Customer (KYC) shall be mandatory. Accordingly, investors seeking the above exemption for PAN still need to submit the KYC Acknowledgement, irrespective of the amount of investment. This exemption will be available only to Micro investment made by the individuals being Indian citizens (including NRIs, Joint holders, minors acting through guardian and sole proprietary firms). PIOs, HUFs, QFIs and other categories of investors will not be eligible for this exemption.

iv. Additional Information for FATCA compliance

To comply with the requirements of Foreign Account Tax Compliance Act (FATCA), it is mandatory for all investors to provide additional information as explained below:

Please indicate whether you are a citizen/tax resident of any country other than India.

- Please select Yes if you are a tax resident of a country other than India and specify the name of the country (ies) in the space provided. Additionally, if you are a citizen/ tax resident of the USA, please fill & submit Individual Self Certification (Annexure I) and the W-9 Form.
- Please select No if you are only a tax resident of India.

All Non Individual applicants are required to fill & submit the Ultimate Beneficial Owner (UBO) Declaration Form (Annexure II).

Exception to UBO Declaration Form - This declaration is not needed for Companies that are listed on any recognized stock exchange or is a Subsidiary of such Listed Company or is a beneficial owner of such Companies.

5. CONTACT INFORMATION

- Please furnish the full postal address of the Sole/ First Applicant with PIN/Postal Code and complete contact details. (P.O. Box address is not sufficient).
- Please note that all communication i.e. Account statement, Annual Report, News Letters will be sent via e-mail, if the e-mail id of the investor is provided in the application form. The Account statement will be encrypted with a password before sending the same to the registered email id. Should the unitholder face any difficulty in accessing/opening the Account Statements/documents sent via email, the unitholder may call/write to the AMC/Registrar and ask for a physical copy.

6. BANK DETAILS

- Please furnish complete Bank Account Details of the Sole/First Applicant. This is a mandatory requirement and applications not carrying bank account details shall be rejected. Bank details provided in the application form will be considered as the default Bank Mandate for remitting redemption proceeds/dividend amount.
- Please provide your complete Core Banking Account Number, (if applicable), in your Bank Mandate in the Application Form. In case you are not aware of the Core Banking Account Number, kindly check the same with your bankers.
- Please attach a original cancelled cheque leaf if your investment instrument is not from the same bank account mentioned in the Application form.
- DHFL Pramerica Mutual Fund will endeavour to remit the Redemption and Dividend proceeds through electronic mode, wherever sufficient bank account details of the unit holder are available.

7. INVESTMENT/PAYMENT DETAILS

Introduction of Direct Plan:-

The AMC has introduced a separate plan for direct investments (i.e. investments not routed through an AMFI Registration Number (ARN) Holder ("Distributor") (hereinafter referred to as "Direct Plan") with effect from January 1, 2013 ("Effective Date").

- Direct Plan is only for investors who purchase/subscribe Units in a Scheme directly with the Fund and is not available for investors who route their investments through a Distributor.
- Investors may please note that the Direct Plan under the Schemes is meant for investors who understand the capital market, mutual funds and the risks associated therewith. The risks associated with the investments in the Schemes vary depending upon the investment objective, asset allocation and investment strategy of the Schemes and the investments may not be suited for all categories of investors. The AMC believes that investors investing under the Direct Plan of the Schemes are aware of the investment objective, asset allocation, investment strategy, risks associated therewith and other features of the Schemes and has taken an informed investment decision. Please note that Scheme Information Document(s), Statement of Additional Information, Key Information Memorandum or any other advertisements and its contents are for information only and do not constitute any investment advice or solicitation or offer for sale of units of the Schemes from the AMC.
- All Options/Sub-Options offered under the Schemes (hereinafter referred as "Regular Plan") will also be available for subscription under the Direct Plan. Thus, from the Effective Date, there shall be 2 Plans available for subscription under the Schemes viz., Regular Plan and Direct Plan.
- Investors subscribing under Direct Plan of the Schemes should indicate the Scheme/Plan name in the application form as "Scheme Name - Direct Plan" form for e.g. "DHFL Pramerica Midcap Opportunities Fund Direct Plan". Investors should also indicate "Direct" in the ARN column of the application form. However, in case Distributor code is mentioned in the application form, but "Direct Plan" is indicated against the Scheme name, the Distributor code will be ignored and the application will be processed under Direct Plan.
- Please note, where application is received for Regular Plan without Distributor code or "Direct" mentioned in the ARN Column, the application will be processed under Direct Plan.

Please indicate the Option/Plan under which you wish to invest. Also indicate your choice of dividend payout or re-investment or transfer. If any of the information is left blank, the default option will be applicable.

INSTRUCTIONS (contd.)

Payment may be made only by Cheque or Bank Draft or Electronic Fund Transfer. Cheque/Draft should be drawn in favour of the "Scheme name", e.g. "DHFL Pramerica Midcap Opportunities Fund" and crossed "Account Payee only".

Please tick and fill in the appropriate section based on the Type of Investment i.e. LUMPSUM or SIP investment. Please fill an Auto Debit form in case of investment through SIP - Auto Debit Facility. Please note that third party payments shall not be accepted.

Third Party Payment³ shall mean payment made through an instrument issued from an account other than that of the beneficiary investor. In case of payment instruments issued from a joint bank account, the first named applicant/investor must be one of the joint holders of the bank account from which the payment instrument is issued. 'Related person/s' means such persons as may be specified by the AMC from time to time.

Exceptions: The AMC/ Registrar of DHFL PMF will accept subscriptions to schemes of DHFL PMF accompanied by Third-Party Payment Instruments only in the following exceptional cases:

1. Payment by Parents/Grandparents/related persons on behalf of a minor in consideration of natural love and affection or as gift for a value not exceeding ₹ 50,000/- (each regular purchase or per SIP installment);
2. Payment by employer on behalf of employee under Systematic Investment Plan (SIP) facility through payroll deductions;
3. Custodian on behalf of an FII or a Client

The investors making an application under the above mentioned exceptional cases are required to comply with the following, without which their applications for subscriptions for units will be rejected / not processed.

- Mandatory KYC compliance of the investor and the person making the payment, in order to determine the identity of the investor and the person issuing the payment instrument.
- Submit a separate, prescribed, 'Third Party Payment Declaration Form' from the beneficiary applicant/s (guardian in case of minor) and the person making the payment i.e., the Third Party, giving details of the bank account from which the payment is made and the relationship of the Third Party with the beneficiary. (The declaration form is available at www.dhflpramerica.com)
- Submit a cancelled cheque leaf or copy of bank statement / pass book page mentioning bank account number, account holders' name and address or such other document as the AMC may require for verifying the source of funds to ascertain that funds have been remitted from the drawer's account only.

For identifying Third Party Payments, investors are required to comply with the requirements specified below:

- a. Payment by Cheque: An investor at the time of his/her purchase must provide the details of pay-in bank account (i.e. account from which a subscription payment is made) and pay-out bank account (i.e. account into which redemption/dividend proceeds are to be paid). Identification of third party cheques by the AMC / Registrars will be on the basis of either matching of pay-in bank account details with registered/pay-out bank account details or by matching the bank account number/name/signature of the first named investor with the name/account number/signature available on the cheque. If the name/bank account number is not pre-printed on the cheque and signature on the cheque does not match with signature on the application, then the first named applicant/investor should submit any one of the following documents:

- (i) a copy# of the bank passbook or a statement of bank account having the name and address of the account holder and account number;
- (ii) a letter* (in original) from the bank on the bank's letterhead certifying that the investor maintains an account with the bank, along with information like bank account number, bank branch, account type, the MICR code of the branch & IFSC Code (where available).

*In respect of (ii) above, it should be certified by the bank manager with his/her full signature, name, employee code, bank seal and contact number. Investors should note that where the bank account numbers have changed on account of the implementation of core banking system at their banks, any related communication from the bank towards a change in bank account number should accompany the application form for subscription of units.

- b. Payment by Prefunded Instrument:

- (i) If the subscription is settled with pre-funded instruments such as Pay Order, Demand Draft, Banker's cheque, etc., a certificate (in original) from the Issuing banker must accompany the purchase application, stating the Account holder's name and the Account number which has been debited for issue of the instrument. The account number mentioned in the Certificate should be a registered bank account or the first named unitholder should be one of the account holders to the bank account debited for issue of such instruments.

- (ii) A pre-funded instrument issued against cash shall not be accepted, except in case of payment made by Parents/Grandparents/related persons on behalf of a minor in consideration of natural love and affection or as gift for a value not exceeding ₹ 50,000/-. This also should be accompanied by a certificate from the banker giving name, address and PAN of the person who has procured the payment instrument.

The Certificate(s) mentioned in (i) and (ii) above should be duly certified by the bank manager with his/her full signature, name, employee code, bank seal and contact number.

- c. Payment by RTGS, NEFT, ECS, Bank transfer, etc:

A copy of the instruction to the bank stating the account number debited must accompany the purchase application. The account number mentioned on the transfer Instruction copy should be a registered bank account or the first named unitholder should be one of the account holders to the bank account.

The above broadly covers the various modes of payment for mutual fund subscriptions. The above list is only indicative not exhaustive list and any other mode of payment as introduced from time to time will also be covered accordingly. In case the application for subscription does not comply with the above provisions, the AMC / Registrars retains the Sole and absolute discretion to reject/not process such application and refund the subscription money and shall not be liable for any such rejection.

I. LUMPSUM INVESTMENT

If you are from a city where there is no designated Investor Service Centre of DHFL PMF, you may make a payment by a Demand Draft for the investment amount. Please enter the cheque or DD amount, DD Charges (if applicable) and the investment amount. The AMC shall bear the DD Charges incurred by an applicant as per demand draft charges prescribed by State Bank of India. The AMC shall, however, not refund any DD charges to the investor under any circumstances.

II. INVESTMENT UNDER SIP

- a. SIP frequency - Daily (for DPLCEF & DPDAAF only), Monthly or Quarterly (for all Schemes). Please tick the appropriate option
- b. The following criteria should be met for an SIP investment as specified in the SID and any addenda issued there to:
 - Minimum amount per instalment
 - Minimum number of instalments
 - Aggregate investment via SIP

If the SIP period is not specified by the investor then the SIP enrolment will be deemed to be for

perpetuity and processed accordingly. The SIP facility will be available on the following dates in a Month or Quarter as chosen by the investor: 1st, 7th, 10th, 15th and 25th of every Month or Quarter. If any of the said dates happen to be a holiday / non-transaction day, then the SIP transaction will be processed on the next business day.

- c. SIP Mode - Auto Debit (ECS/Direct Debit/NACH) OR Post-Dated Cheques
- d. The first SIP instalment can be paid either through a Cheque, a Demand Draft (DD) / Pay Order (PO). In case of payment of first instalment through DD or PO, the Auto Debit Bank details mentioned by you must be attested by the banker in Section 4 of Auto Debit Facility form.
- e. For your second and subsequent SIP Instalments you may pay either through Auto Debit (ECS/Direct Debit/NACH) or by Post Dated Cheques. If you wish to opt for payments through Auto Debit, please indicate your preference for SIP through Auto Debit (ECS/Direct Debit/NACH) in the box provided for the purpose and fill in the attached AUTO DEBIT FACILITY FORM. If you wish to pay for your future SIPs through Post Dated Cheques (PDC), you should not fill in the AUTO DEBIT FACILITY FORM. Please mention the second and subsequent Instalment cheque details in the space provided for the purpose.
- f. The first instalment cheque should be dated with the date of submission of the Application Form. Please note the following:
 - For SIPs through PDCs, the first SIP cheque needs to be from the same bank account as the PDCs for your future SIP Instalments.
 - The Second SIP Instalment has to be at least 20 days in case direct debit and 30 days in case of ECS after the date of the first SIP Instalment.
 - The first Instalment cheque and the subsequent Instalments (either through PDCs or Auto Debit) should be for the same amount.
- g. Please note that the Cheque should be made favoring the scheme name. (For e.g. "DHFL Pramerica Midcap Opportunities Fund").
- h. In case of SIP through Auto Debit, the Auto Debit Authorisation needs to be filled in and signed by the Bank Account holders in the same order and manner in which the Bank account is held by them.
- i. In case of any mismatch between the 'No. of instalment' and the 'SIP period', the SIP period will be considered as per the Auto Debit Facility Form.
- j. In case of any discrepancy between the Application Form and the Auto Debit Facility Form, the SIP details provided in the latter will be considered for investment.

NRI investors

NRIs and PIOs may purchase units of the scheme(s) on a repatriation and non-repatriation basis, while FIIs may purchase units only on a repatriation basis. They shall attach a copy of the cheque used for payment or a Foreign Inward Remittance Certificate (FIRC) or an Account Debit Certificate from the bankers along with the application form to enable the AMC to ascertain the repatriation status of the amount invested. The account type shall be clearly ticked as NRE or NRO or FCNR, to enable the AMC determine the repatriation status of the investment amount. The AMC and the Registrar may rely on the repatriation status of the investment purely based on the details provided in the application form.

Repatriation basis

- NRIs and PIOs may pay their subscription amounts by way of Indian Rupee drafts purchased abroad, cheques drawn on Non-Resident External (NRE) Accounts or Indian Rupee drafts payable at par at any of the centres where the AMC has a designated ISC and purchased out of funds held in NRE Accounts / FCNR Accounts. FIIs may pay their subscription amounts either by way of inward remittance through normal banking channels or out of funds held in Foreign Currency Accounts or Non Resident Rupee Accounts maintained with a designated branch of an authorised dealer with the approval of RBI.
- In case Indian Rupee drafts are purchased abroad or from FCNR/NRE accounts, an account debit certificate from the bank issuing the draft confirming the debit shall also be submitted with the application form. NRIs shall also be required to furnish such other documents as may be necessary and as requested by the AMC/Mutual Fund/Registrar, in connection with the investment in the schemes.

Non-Repatriation basis

NRIs and PIOs may pay their subscription amounts by cheques/demand drafts drawn out of Non-Resident Ordinary (NRO) accounts/ Non-Resident Special Rupee (NSR) accounts and Non Resident Non-Repatriable (NRR) accounts payable at the city where the application form is accepted.

8. NOMINATION DETAILS

- You may nominate a maximum of 3 persons, to receive the Units/amounts standing to your credit payable in the event of death of the Unit Holder(s) in respect of investment under a folio.
- The nomination may be made only by individuals applying for/holding units on their own behalf, singly or jointly.
 - Non-individuals including society, trust, body corporate, partnership firm, Karta of HUF, holder of POA or a parent/guardian applying on behalf of a minor beneficiary cannot nominate.
 - A minor can be nominated and in that event, the name and address of the guardian of the minor nominee shall be provided in the application. Nomination can also be in favour of the Central Government, State Government, and a local authority, any person designated by virtue of his office or a religious or charitable trust.
 - The Nominee shall not be a trust (other than a religious or charitable trust), society, body corporate, partnership firm, Karta of Hindu Undivided Family or a Power of Attorney holder.
 - A Non-Resident Indian can be a Nominee subject to the exchange control regulations in force, from time to time.
 - Transfer of units in favour of a Nominee shall be valid discharge by the AMC/Mutual Fund against the legal heir.
 - The cancellation of nomination can be made only by the individual(s) who hold units on their own behalf singly or jointly and who made the original nomination. On cancellation of the nomination, the nomination shall stand rescinded and the AMC shall not be under any obligation to transfer the units in favour of the Nominee.
 - In the event of the unit holders not indicating the percentage of allocation/share for each of the nominees, the AMC shall settle the claim equally amongst all the nominees
 - It is recommended for the nominee/Guardian (in case the nominee is a minor) to provide the signature in the space provided.

In case you do not wish to nominate, kindly indicate by ticking in the space provided.

9. DECLARATION AND SIGNATURES

1. Please tick the box provided for EUIN declaration in this section in case the ARN is mentioned in the distributor section and the EUIN is left blank.
2. All signatures should be hand written in English or any Indian language. Thumb impressions should be from the left hand for males and the right hand for females and in both cases must be attested by a Judicial Magistrate or a Notary Public.
3. If the application form is signed by a Power of Attorney (PoA) holder, the form should be accompanied by a notarised photocopy of the PoA. Alternatively, the original PoA may be submitted, which will be returned after verification. If the PoA is not submitted with the application, the Application Form will be rejected. The PoA should contain the signature of the investor (PoA Donor) and the PoA holder.
4. In case of corporates or any non-individual investors, a list of authorised signatories should be submitted along with Application form or in case of any change in the authorised signatory list, the AMC / Registrar must be notified within 7 days.
5. In case of application under POA or by a Non- Individual (i.e. Company, trust, society, partnership firm etc.) the relevant POA or the resolution should specifically provide for/ authorize the POA holder/authorized signatory to make application/invest moneys on behalf of the investor

SIP AUTO DEBIT FACILITY REGISTRATION CUM MANDATE FORM



Please read the Scheme information Document of the respective scheme for minimum SIP instalment, minimum SIP period and aggregate amount of investment.

1. DISTRIBUTOR INFORMATION

ARN code	Sub broker ARN code	Sub broker code (as allotted by ARN holder)	Employee Unique Identification Number (EUIIN)
ARN -	ARN -		

Incase the Employee Unique Identification Number (EUIIN) box has been left blank please refer point 3 related to EUIIN.

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

2. APPLICANT INFORMATION

Application No. / Existing Folio No. _____

Name of Sole/ 1st Applicant _____

3. SIP DETAILS (First SIP cheque and subsequent via Auto Debit Facility)

Scheme Name _____ Option Growth* Dividend *Default Option

Dividend Facility Payout Re-Investment*

Dividend Frequency _____

SIP Frequency (Please ✓ any one) Daily* Monthly Quarterly

Only for DHFL Pramerica Dynamic Asset Allocation Fund & DHFL Pramerica Large Cap Equity Fund. Facility available only through select banks. Refer Terms and Conditions - Point 3

SIP Date for (Monthly / Quarterly) 1st 7th 10th 15th 25th All 5 dates

Instalment Amount (In figures) ₹ _____

SIP Period (Please ✓ A or B)

Till I/we instruct to discontinue the SIP (A)

No. of Instalments (B) _____

Please mention Enrolment Period:

From _____ To _____
M M Y Y Y Y M M Y Y Y Y

DECLARATION & SIGNATURE: I/we hereby declare that the particulars given above are correct and express my willingness to make payments referred above to debit my/our account directly or through participation in Auto Debit. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/we would not hold the user institution responsible. I/we will also inform AMC, about any changes in my/our bank account. I/we have read and agreed to the terms and conditions mentioned. I/we confirm that 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 different competing Schemes of various Mutual Funds from amongst which the Scheme is recommended to me/us. For investors investing in Direct Plan: I/we hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product/scheme/plan. Applicable to Micro Investors (Delete if not applicable): I/we hereby declare that I/we do not have any existing Micro Investments which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year.

Please ✓ if the EUIIN space is left blank: I/we hereby confirm that the EUIIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Authorisation to Bank: This is to inform that I/we have registered for ECS / NACH (Debit Clearing) / Direct Debit / Standing instructions facility and that my/our payment towards my/our investment in DHFL Pramerica Mutual Fund shall be made from my/our below mentioned bank account with your Bank. I/we authorize the representatives of DHFL Pramerica Mutual Fund carrying t his mandate form to get it verified and executed. I/we authorize the bank to debit my account for any charges towards mandate verification, registration, transactions, returns, etc. as applicable.

SIGNATURE (S) (Applicants must sign as per Common Application Form)	1 st Applicant/Guardian/Authorised Signatory/POA	2 nd Applicant/Guardian/Authorised Signatory/POA	3 rd Applicant/Guardian/Authorised Signatory/POA

4. BANKER'S ATTESTATION (Mandatory, if your First SIP instalment is through a Demand Draft/Pay Order)

Certified that the signature of account holder and the Details of Bank account are correct as per our records

Signature verification request (To be retained by the Customer's Bank)

Signature of Authorised Official from Bank (Bank stamp and date)



MANDATE INSTRUCTION FORM (Please read Instruction no. 4 overleaf) (*Mandatory field)

UMRN _____ For office use _____ Date* D D M M Y Y Y Y

Sponsor Bank Code _____ For office use _____ Utility Code _____ For office use _____

CREATE
MODIFY
CANCEL

I/we hereby authorize _____ DHFL PRAMERICA MUTUAL FUND to debit (Please ✓) SB / CA / CC / SB-NRE / SB-NRO / Other

Bank a/c number* _____

With Bank* _____ Name of customers bank _____ IFSC* _____ MICR* _____

an amount of Rupees* _____ SIP instalment amount in words _____ ₹ In Figures _____

FREQUENCY* Mthly Qtrly H-Yrly As & When presented DEBIT TYPE* Fixed Amount Maximum Amount

Reference - 1 _____ Application no. / Folio number _____ Phone No _____

Reference - 2 _____ Email ID _____

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

PERIOD*

From _____ To _____ OR _____
x x Signature of first account holder x x Signature of second account holder x x Signature of third account holder

_____ Name of first account holder* _____ Name of second account holder* _____ Name of third account holder*

- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/ Corporate to debit my account.
- I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User entity/ corporate or the bank where I have authorized the debit.

GENERAL GUIDELINES

1. This form should be used only for Registration of SIP through Auto Debit (NACH/ECS/Direct Debit) facility.
2. A. Applicants need to fill in this form together with the Common Application Form, for the purpose of availing the facility of Systematic Investments through Auto Debit (NACH/ECS/Direct Debit) facility.
B. Existing investors to provide cancelled cheque leaf only if the bank account details provided in Mandate Instruction Form are different from the bank account details already registered in the folio for remitting redemption proceeds/dividend amount OR are different from the bank account from which auto debits are already happening for an SIP registered in the past.
3. Please read the terms and conditions for SIP in Key Information Memorandum.
4. Please furnish all information marked as "MANDATORY" in the form. In the absence of any mandatory information, your application for investment would be rejected.
5. Please refer the "INSTRUCTIONS" below. This will help you fill in the necessary details in the form correctly and completely.
6. Please tick the box provided for EUIJN declaration in this section in case the ARN is mentioned in the distributor section and the EUIJN is left blank.

INSTRUCTIONS

1. **Distributor Information**
 - a. Please mention "Direct" in case the application is not routed through any distributor.
 - b. Pursuant to SEBI circular dated September 13, 2012, mutual funds have created a unique identity number of the employee/ relationship manager/ sales person of the distributor interacting with the investor for the sale of mutual fund products, in addition to the AMFI Registration Number (ARN) of the distributor. This Employee Unique Identification Number is referred as "EUIJN". EUIJN aims to assist in tackling the problem of mis-selling even if the employee/relationship manager/sales person leaves the employment of the distributor or his/her sub broker. Quoting of EUIJN is mandatory in case of advisory transactions.
 - c. Distributors are to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided, in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIJN of the Sales Person (if any) in the "EUIJN" column.
 - d. Investors are requested to note that EUIJN is applicable for transactions such as Purchases, Switches, Registrations of SIP / STP / Trigger SIP / Dividend Transfer Plan and EUIJN is not applicable for transactions such as Installments under SIP/ STP / SWP / STP Triggers, Dividend Reinvestments, Redemption, SWP Registration, Zero Balance Folio creation and installments under Dividend Transfer Plans.
 - e. Investors are requested to note that EUIJN is largely applicable to sales persons of non individual ARN holders only (whether acting in the capacity of the main distributor or sub broker). Further, EUIJN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ ARN-14/12-13 dated July 13, 2012.
 2. **Applicant Information**
Please mention the Application Form number / existing folio number and furnish the name of sole/ 1st applicant as it appears in the Application Form.
 3. **SIP Details** - Please furnish the following details with respect to your systematic investment:
 - a. **Scheme Details** - Scheme Name, Scheme Plan and Option. (If the Scheme details indicated in the Auto Debit Facility form materially vary from the Scheme details indicated in the Application Form, the Scheme details mentioned in the Application Form would be considered).
 - b. **SIP Frequency** - Daily#, Monthly or Quarterly. Please tick the appropriate option.
#Please note that SIP Daily frequency is only available to investors providing the SIP Debit mandate of active NACH Banks/ Direct Debit banks with Core banking account numbers.
 - c. **SIP Dates (Monthly/Quarterly)** - 1st, 7th, 10th, 15th and 25th of every month or quarter. You also have a choice to have SIP instalments on all 5 dates by ticking the appropriate box provided for all 5 dates.
 - d. **SIP Instalment Requirement** : Monthly : 10 instalments of ₹ 500/- each and in multiples of ₹ 100/- thereafter. Quarterly: 5 instalments of ₹ 1,000/- each and in multiples of ₹ 100/- thereafter.
 - e. **SIP Auto Debit Enrollment Period** - Please mention the Auto Debit Enrollment commencement date and end date in the Auto Debit Form and the Mandate Instruction Form. In order to save you from the hassle of sending us renewal instructions each time your SIP expires, DHFL Pramerica offers you two ways to invest. If you know how long you wish to invest for, specify the From Date and To Date. Alternatively, you can choose the open option-where you specify only the From Date and select the option 'Until Cancelled' in the Mandate Instruction Form - and can discontinue your SIP by writing to us. Please note if the SIP Dates, SIP Instalment Amount and the SIP Auto Debit Period indicated in the Auto Debit Registration Form materially vary from the SIP Dates, SIP Instalment Amount and the SIP Auto Debit Period indicated in the Application Form, the details contained in the Auto Debit Registration Form would be considered for enrolment.
 - f. **Declaration and Signature**: This section needs to be signed by the applicants at the places marked "X" in the same order and manner in which they have signed the Application Form.
 - g. Please provide either a cancelled cheque leaf (or copy thereof) of the bank account from which the Auto Debit is to be effected or the Banker's attestation (in Section 4 of the Auto Debit Registration Form in case the first SIP Instalment is through a DD or a Pay Order). This would help us cross-verify your bank details appearing in the cheque with the bank details furnished in this form and let you know of discrepancies, if any, for early corrective action.
 - i. The SIP enrolment will be discontinued if (a) 3 consecutive SIP instalments in case of monthly & quarterly frequency are not honoured. b) the Bank Account (for standing instruction) is closed and request for change in bank account (for Standing Instruction) is not submitted at least 21 days before the next SIP Auto Debit instalment due date or if written request for cancellation is submitted by you at least 21 days before the due date.
4. **Instructions to fill the Mandate Instruction Form**:
 1. Date and the period of the mandate should be mentioned in DD/MM/YYYY format.
 2. UMRN, Sponsor Bank Code and Utility Code of the Service Provider will be mentioned by DHFL Pramerica Mutual Fund.
 3. Please furnish your Bank Account details from which the Auto Debit is to be effected. Please note that the sole/first applicant as mentioned in the "Applicant Information" section on this form need to be one of the a/c holders in the bank records registered for Auto Debit. If your bank is part of the Core Banking System (CBS), then the full CBS Account Number should be provided.
 4. Please indicate the Bank Account Type
 5. It is mandatory to furnish the Name of Bank and Branch, IFSC and MICR Code. In the absence of this information, your SIP Application would be rejected.
 6. Please mention the SIP Instalment amount in Words and Figures. The amount in figures should be same as the amount mentioned in words, in case of ambiguity the mandate will be rejected.
 7. Please indicate Frequency & Debit Type
 8. Please mention your folio number or application number in the space provided for Reference 1 and the Scheme name in the space provided for Reference 2.
 9. For the convenience of our investors, the following fields have been pre-populated on the Mandate: Action - 'Create'
Name of the Company - 'DHFL Pramerica Mutual Fund'
10. The name(s) and signature(s) on the Mandate Instruction Form should be in the order in which the Bank Account is held and in the manner in which they appear in the Bank records. If the mode of operation of your bank account is joint, all bank account holders would need to sign at the places marked "xx" in the same order and manner in which their signatures appear on bank records.

TERMS AND CONDITIONS FOR AUTO DEBIT FACILITY

1. SIP Auto Debit is available through NACH, ECS or Direct Debit Facility. By opting for this facility you agree to abide by the terms and conditions of NACH facility of National Payment Corporation of India (NPCI), ECS facility of Reserve Bank of India (RBI), Direct Debit Facility of the Banks as applicable at the time of investment and as may be modified or amended from time to time.
2. **ECS** - The SIP through ECS Facility is offered only to investors having Bank Accounts in select cities listed below:
 - Agra • Ahmedabad • Allahabad • Amritsar • Anand • Asansol • Aurangabad • Bangalore • Bardhaman • Baroda • Belgaum • Bhavnagar • Bhillwara • Bhopal • Bhubaneswar • Bijapur • Bikaner • Calicut • Chandigarh • Chennai • Cochin • Coimbatore • Cuttack • Dargeeling • Davangere • Dehradun • Delhi • Dhanbad • Durgapur • Erode • Gadag • Gangtok • Goa • Gorakhpur • Gulbarga • Guwahati • Gwalior • Haldia • Hubli • Hyderabad • Indore • Jabalpur • Jaipur • Jalandhar • Jammu • Jamnagar • Jamshedpur • Jodhpur • Kakinada • Kanpur • Kolhapur • Kolkata • Kota • Lucknow • Ludhiana • Madurai • Mandya • Mangalore • Mumbai • Mysore • Nagpur • Nasik • Nellore • Patna • Pondicherry • Pune • Raichur • Raipur • Rajkot • Ranchi • Salem • Shimla • Shimoga • Sholapur • Siliguri • Surat • Thirupur • Tirunelveli • Tirupati • Trichur • Trichy • Trivandrum • Tumkur • Udaipur • Udipi • Varanasi • Vijaywada • Vizag • Hasan • Imphal • Shillong

The cities listed above may be modified/ removed at any time purely at the discretion of DHFL Pramerica Mutual Fund without assigning any reason or prior notice. **Applications for SIP ECS Facility would be accepted only if the Bank Branch in the locations listed above in point 2 participates in local MICR/ECS Clearing.**
3. **Direct Debit** - Applications for SIP Direct Debit would be accepted for the following banks where the Core Banking Account number is provided.

Direct Debit banks with Core Banking Account Number Length

Bank of Baroda - 14 digits, Bank of India - 15 digits, Union Bank of India - 15 digits, IDBI Bank - 13 to 16 digits, IndusInd Bank - 13 to 16 digits, Kotak Mahindra Bank - 15 digits, Citibank - 10 digits, State Bank of India - 11 digits starting with 1, 2, 3, 5 and 6, Punjab National Bank - 16 digits, Axis Bank - 15 digits, United Bank of India - 13, State Bank of Patiala - 11, Corporation Bank - Not fixed but should accompany with copy of the bank passbook
4. In case your bank chooses to cross-verify the Auto Debit mandate with you as the Bank's customer, you would need to promptly act on the same. DHFL Pramerica Mutual Fund (DHFLPMF) and its Registrar and other service providers will not be liable for any transaction failures due to rejection of the transaction by your bank/branch or its refusal to register the SIP mandate or any charges that may be levied by your Bank/Branch on you.
5. While mentioning the SIP Auto Debit period (from) in this form, please consider the minimum gap requirement is at least of 15 days for NACH & Direct Debit setup & 21 days for ECS setup and indicate the correct SIP Auto Debit commencement date.
6. For cancellation of the Auto Debit (NACH/ECS/Direct Debit) Facility, you need to give a notice 21 days in advance to the AMC or its Registrars.
7. You will not hold DHFL Pramerica Mutual Fund (DHFLPMF)/ DHFL Pramerica Asset Managers Private Limited (DHFLPAMPL) (erstwhile Pramerica Asset Managers Private Limited) /Trustees to the Fund, its Registrars and other service providers responsible if the transaction is not/incorrectly effected due to incomplete or incorrect instructions from the applicant. Besides, you will not hold either of the entities listed herein before responsible if the transaction is delayed or not effected or the applicant bank account is debited in advance or after the specific SIP date due to various clearing cycles of NACH/ RBI's ECS/local holidays.
8. DHFLPMF/DHFLPAMPL (erstwhile Pramerica Asset Managers Private Limited) reserves the right not to re-present any mandate for Auto Debit facility, if the registration could not be effected in time for reasons beyond its/their control.
9. DHFLPMF/DHFLPAMPL (erstwhile Pramerica Asset Managers Private Limited) /Trustees to the Fund, its Registrars and other service providers shall not be responsible and liable for any damages/compensation for any loss, damage, etc. incurred / suffered by you as a result of use of this facility.
10. As per the RBI circular DPSS (CO) EPPD No. 191/04.01.01/2009-2010, SIP - ECS instructions from January 01, 2010, has to be forwarded only with the Core Banking System (CBS) Account Numbers. In order to enable smooth processing of the debits from your bank account towards purchase of SIP units, we request you to mention the CBS account number, wherever applicable.

AUTO DEBIT FACILITY FORM- CHECKLIST

✓	Applicant's Information	<input type="checkbox"/> Application Form No.	<input type="checkbox"/> Name of Sole/1 st Applicant
✓	Scheme Details	<input type="checkbox"/> Scheme	<input type="checkbox"/> Option <input type="checkbox"/> Dividend Facility <input type="checkbox"/> Dividend Frequency (if applicable)
✓	SIP Details	<input type="checkbox"/> SIP Instalment Amount	<input type="checkbox"/> Preferred SIP Date <input type="checkbox"/> SIP Auto Debit Period
✓	Bank Account Details	<input type="checkbox"/> Name of Sole/1 st Bank A/c Holder	<input type="checkbox"/> Bank A/c No. (CBS A/c, wherever applicable)
✓	MICR code	<input type="checkbox"/> Cancelled Cheque leaf/Copy of Cheque leaf is attached.	
✓	Banker's attestation in Section 4 where the payment for first instalment is through a Demand Draft or Pay Order.		
✓	Third Party Declaration Form, in case of third party payment.		
✓	Banker's certificate in case of first instalment through a Demand draft.		
✓	All Bank Account Holders have signed the Form at the places marked "X" in the same order and manner in which their signatures appear on Bank Records.		

ANNEXURE I
Individual Self-Certification under FATCA
 (INDIVIDUAL / NRI / HUF / ON BEHALF OF MINOR / PROPRIETORSHIP FIRM)



Tax Regulations require us to collect information about each investor's tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should any information provided change in the future, please ensure you advise us of the changes promptly.

	Applicant 1	Applicant 2	Applicant 3
Name			
PAN			
Country of Tax Residency			
Tax Reference Number			
Guardian Name (If Applicable)			
Guardian PAN			
Guardian Country of Tax Residency			
Guardian Tax Reference Number			
Power Of Attorney(POA) Name (If Applicable)			
POA PAN			
POA Country of Tax Residency			
POA Tax Reference Number			

Declaration

- I declare that the information provided on this form is to the best of my knowledge and belief, accurate and complete.
- I agree to notify DHFL Pramerica Asset Managers Private Limited (erstwhile Pramerica Asset Managers Private Limited) immediately in the event the information in the self-certification changes.
- I/We hereby authorise you to disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us to Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees ('the Authorised Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities and other investigation agencies without any obligation of advising me/us of the same.

(Applicant 1) Name & Signature	(Applicant 2) Name & Signature	(Applicant 3) Name & Signature
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(To be signed as per the mode of holding)

Date

D	D	M	M	Y	Y	Y	Y
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