

Please read Product labeling details available on cover page and instructions before filling this Form

Application No.:

Distributor ARN and Name	Sub Broker ARN Code	Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
ARN-ARN-85155			E070576	

I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

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.

I am a First Time Investor in Mutual Fund Industry. I am an Existing Investor in Mutual Fund Industry.

Sole / First Applicant's Signature Mandatory

1. FIRST APPLICANT'S DETAILS

Name of First Applicant (Should match with PAN Card) PAN (1st Applicant / Guardian) KYC

Existing Folio Number Name of Guardian if minor PoA PAN KYC

On behalf of Minor Date of Birth Date of Birth Guardian named is :
 (* Attach Mandatory Documents as per instructions). Minor's Proof attached * Father Mother Court Appointed

2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS

Email ID (in capital)

Mobile +91 Tel (STD Code)

Address

Landmark

City (Mandatory) State

3. KYC DETAILS (Mandatory)

3a. Status of Sole/1st Applicant (Please tick) Indian Resident Individual Minor (Resident) Minor NRI NRI (Repatriable) NRI (Non-Repatriable) PIO Sole Proprietorship HUF - Indian HUF - NRI Partnership Firm Limited Partnership (LLP) Public Ltd. Co. Private Ltd. Co. Body Corporate Bank FIs Insurance Companies Government Body AOP/BOI Trust Society Provident Fund Superannuation / Pension Fund Gratuity Fund Mutual Fund FII NP0/NGO FPI-Category I/II/III FCRA GDN Defence Establishment NPST Trust Others (Please specify)

3b. Occupation Details (Please tick) Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife Student Forex Dealer Others (Please specify)

3c. Gross Annual Income (Please tick) Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs →25 Lacs-1 crore →1 crore
Net-worth in (Mandatory for Non-Individuals) ₹ as on (Not older than 1 year)

3d. For Individuals I am Politically Exposed Person I am Related to Politically Exposed Person Not Applicable

For Non-Individual Investors (Companies, Trust, Partnership etc)

I. Is the company an Indian Listed Company or Subsidiary / Controlled by an Indian Listed Company: YES NO (If No, please attach mandatory UBO declaration)

II. Foreign Exchange / Money Changer Services YES NO

III. Gaming / Gambling / Lottery/Casino Services YES NO

IV. Money Lending / Pawning YES NO

4. JOINT APPLICANTS (IF ANY) DETAILS

Mode of Holding (Please tick) Joint (Default) Anyone or Survivor

2nd Applicant Name (Should match with PAN Card) PAN (2nd Applicant) KYC

Occupation Details (Please tick) Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife Student Forex Dealer Others (Please specify)

b. Gross Annual Income Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs →25 Lacs-1 crore →1 crore **OR Net worth** ₹

c. Others (Please tick) Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not Applicable

3rd Applicant Name (Should match with PAN Card) PAN (3rd Applicant) KYC

Occupation Details (Please tick) Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife Student Forex Dealer Others (Please specify)

b. Gross Annual Income Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs →25 Lacs-1 crore →1 crore **OR Net worth** ₹

c. Others (Please tick) Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) Not Applicable

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Received, subject to realisation and verification an application for purchase of Units as mentioned in the application form.

From _____

DSPBR		
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Application No.

5. FATCA DETAILS For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA detail form

Do you have any non-Indian Country [ies] of Birth / Citizenship / Nationality and Tax Residency? Yes No Please tick as applicable and if yes, provide the below mentioned information (mandatory)

Sole/First Applicant/Guardian <input type="checkbox"/> Yes <input type="checkbox"/> No		2nd Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No		3rd Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No or <input type="checkbox"/> POA <input type="checkbox"/> Yes <input type="checkbox"/> No	
Country of Birth		Country of Birth		Country of Birth	
Country of Citizenship/ Nationality		Country of Citizenship/ Nationality		Country of Citizenship/ Nationality	
Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No please provide Tax Payer Id.	Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No please provide Tax Payer Id.	Are you a US Specified Person?	<input type="checkbox"/> Yes <input type="checkbox"/> No please provide Tax Payer Id.
Country of Tax Residency# (other than India)	Taxpayer Identification No	Country of Tax Residency# (other than India)	Taxpayer Identification No	Country of Tax Residency# (other than India)	Taxpayer Identification No
1		1		1	
2		2		2	

#Please indicate all countries in which you are a resident for tax purpose and associated Taxpayer Identification number. In case of applications with PoA, the PoA holder should fill separate form to provide the above details mandatorily.

6. BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)

Bank Name

Bank A/C No. A/C Type Savings Current NRE NRO FCNR Others

Branch Address

City Pin

IFSC code: (11 digit) MICR code (9 digit) (This is a 3 digit number next to your cheque number)

7. INVESTMENT AND PAYMENT DETAILS (Cheque DD should be in favour of "Scheme Name")

Scheme/Plan /Option/Sub Option **DSP BlackRock -** Scheme **Plan** Option/Sub Option

(Default plan/option/sub option will be applied incase of no information, ambiguity or discrepancy)

One time Lumpsum Investment SIP: Systematic Investment Plan. Attach OTM form, if not already registered. Mention First SIP Cheque Details below

Payment Mode: Cheque DD RTGS NEFT Funds transfer

Cheque/DD/RTGS/NEFT No.

Amount (Rs.) (i)

DD charges, (Rs.)(ii)

Total Amount (Rs.) (i) + (ii) In figures

In Words

Cheque/DD/RTGS/NEFT/ DD Date D D / M M / Y Y Y Y

Payment from Bank A/c No. Pay In A/c No.

Bank Name

Branch

Account Type Savings Current NRE NRO FCNR

Documents Attached to avoid Third Party Payment Rejection, where applicable: Bank Certificate, for DD Third Party Declarations

8. NOMINATION DETAILS Individuals (single or joint applicants) are advised to avail Nomination facility.

I/We wish to nominate. I/We DO NOT wish to nominate and sign here 1st Applicant Signature (Mandatory)

	Nominee Name	Guardian Name (In case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				
Address			Total = 100%	

9. UNIT HOLDING OPTION:

In Account Statement Mode (default): In Demat mode: NSDL: I N Depository Participant (DP) ID (NSDL only)

Beneficiary Account Number (NSDL only)

CDSL:

Enclose for demat option:
 Client Master List
 Transaction/Holding Statement
 DIS Copy

10. DECLARATION & SIGNATURES

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund, I / We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. 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, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

Where the EUIN box is left blank being an execution only transaction, I/we confirm that the transaction is notwithstanding the advice of in-appropriateness, if any, provided by the distributor's employee/relationship manager/sales person and the distributor has not charged any advisory fees on this transaction.

Sole / First Applicant / Guardian

Second Applicant

Third Applicant

POA holder, if any

Email: service@dspblackrock.com Website: www.dspblackrock.com Contact Centre: 1800 200 4499

Quick Checklist

Name, Address are correctly mentioned Full scheme name, plan, option is mentioned Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used.

Email ID / Mobile number are mentioned Pay-In bank details and supportings are attached Non Individual investors should attach FATCA Details and Declaration Form

PAN / KYC / FATCA details are enclosed Nomination facility opted Form is signed by all applicants UBO Form Declaration Form