

6. BANK ACCOUNT DETAILS (Payout Bank) (* Mandatory - If left blank, Application will be rejected) (Refer Instruction No. 6)

A/c Type [please] Saving Current NRO NRE FCNR Others (Please Specify) _____

Bank Name

Account No

Branch City Pin

IFSC Code* (mandatory for credit via NEFT/RTGS) (11 Character code appearing on your cheque leaf.)

MICR Code* (9 Digit No. next to your Cheque Number) **(Please attach blank cancelled cheque/Copy of cheque)**

Direct credit facility is available for redemption/dividend proceeds for investors having HDFC Bank Account.

IN CASE INVESTOR WISH TO RECEIVE A CHEQUE
 (instead of a direct credit into their bank account), please indicate the preference below:
 I/We want to receive the redemption and dividend proceeds (if any) by way of a cheque. Please (For multiple bank registration, use multiple bank account registration form

7. SCHEME DETAILS (Refer Instruction No. 7)

Scheme Name : _____

Investment In	Plan	In case of Dividend Option	
		Option	Dividend Sub-Option
<input type="checkbox"/> Lumpsum <input type="checkbox"/> SIP (please fill the SIP Form)			

8. INVESTMENT & PAYMENT DETAILS (Refer Instruction No 8)

Investment Amount DD Charges Net Amount

Cheque/DD No Cheque/DD Date Drawn on Bank

Branch Name A/c Type [please] Saving Current NRO NRE FCNR

*** Third Party & O/S cheques will not be accepted and transaction is liable to be rejected. Separate cheque/demand draft is required for investment in each plan of a scheme. Further for different mode of payments specified declaration should be provided as mentioned in instruction no. 8**

9. NOMINATION DETAILS (Refer Instruction No. 9)

I/ we do wish to nominate as under: I/ we do not wish to nominate.

Name & Address of Nominee(s)	Date of Birth	Name & Address of the Guardian	Signature of Guardian	Proportion (%) by which the unit will be shared by each Nominee (should aggregate to 100%)
(To be furnished in case the Nominee is a Minor)				
1.				
2.				
3.				

10. BENEFICIAL OWNER (Refer Instruction No. 12 b)

"I am / we are the Beneficial Owners of the Units that will be allotted pursuant to this Application - Yes No

(If No, indicate name of Beneficial Owner _____)

(Note: If the response is not completed, it is assumed that you are the Beneficial Owner)

11. DECLARATION AND SIGNATURE(S) (Refer Instruction No. 10)

I/We have read and understood the contents of the Scheme Information Document and Statement of Additional Information of Bharti AXA Mutual Fund including the section on "Who cannot invest" and "Prevention of Money Laundering". I/We hereby apply for Allotment/Purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. I/We hereby declare that I/We am /are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We hereby authorise Bharti AXA Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/Bharti AXA Mutual Fund's bank(s) and /or Distributor /Broker / Investment Advisor. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct, complete and truly stated.

I/We are aware that the information provided/collected in this application form is necessary in relation to operation of my/our investment account. I/We hereby give consent for sharing my/our data/information with any third party as may be required by Bharti AXA Mutual Fund for the purpose of providing services to me/us or for opening, continuing and operating my/our investment account/folio.

Applicable to NRI only: I/We confirm that I am/we are Non-Resident Indian/Person of Indian Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/NRO/FCNR Account. I/We undertake that all additional purchases made under this Folio will also be from funds received from abroad through approved banking channels or from funds in my/our NRE/NRO/FCNR Account.

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 the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

DATE

SIGNATURE(S)

Sole/1 st applicant/Guardian/Authorised Signatory/POA	2 nd applicant/Guardian/Authorised Signatory/POA	3 rd applicant/Guardian/Authorised Signatory/POA
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CHECKLIST (Please submit the following documents with your application (where applicable). All documents should be original/true copies Certified by a Director/Trustee /Company Secretary /Authorised signatory / Notary Public.)

Documents	Ind	Co.	Soc.	Partnership Firms	Investment through POA	Trusts	NRI
PAN Card (not required for Micro SIP)							
KYC Acknowledgement*							
Resolution/ Authorisation to invest							
List of authorised signatories with specimen signatures							
Memorandum & Articles of Association							
Trust Deed							
Bye-laws							
Partnership Deed							
Notorised POA (signed by investor and POA Holder)							

*Please refer instruction no. 12 for further details

For more information visit us at
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Email us at
service@bharti-axa-im.com

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