# **COMMON APPLICATION FORM**

Application No.:



Name & Broker Code / ARN / RIA Code	Sub Broker / Agent ARN Code	Sub Agent Code	EUIN*	Internal Code for Sub-Agent/Employee	ISC Date Time Stamp Reference No.
Declaration for "Execution Only" Transaction (where as been intentionally left blank by me/us as this dvice of in-appropriateness, if any, provided by the	e Employee Unique Identification N transaction is executed without an employee/relationship manager/sa	umber-EUIN* box is left blank). If y interaction or advice by the er eles person of the distributor/sub	Please refer instruction 1 nployee/relationship mai broker.	2 of KIM for complete details on EUI nager/sales person of the above dist	N. I/We hereby confirm that the EUIN tributor/sub broker or notwithstanding
Signature of 1 <sup>st</sup> Applicant / Guard Authorised Signatory /PoA/Ka		Signature of 2 <sup>rd</sup> Applicant / Authorised Signatory			g <sup>st</sup> Applicant / Guardian / ed Signatory /PoA
Lumpsum Investment TRANSACTION CHARGES (Please ) IAMAFIRST TIME INVESTOR IN MUTU pplicable transaction charges will be deduct istributor) based on the investor's assessm	any one of the below. Re	OR	○ IAM AI	N EXISTING INVESTOR IN MUT	
1. EXISTING UNIT HOLDER INFOR	MATION [Please fill in your	Folio Number, KIN, Sec CKYC Identification	tion 2 & proceed to	o Section 7 - Investment De	tails]
2. APPLICANT(S) NAME AND INFO  st SOLE APPLICANT  Mr. / Ms. / M/s.  lease write the name as per Aadhaar Card)	RMATION [Refer Instruction	n 2] if the 1 / Sole Appli	cant is Minor, the	PAN PAN	naturai / iegai guardian
ADHAAR No. KYC ID No. (KIN)			Pls ind		se ✓) ○ Enclosed for tax purpose / Resident of Can o⁵ (\$Default if not ✓)
UARDIAN (In case 1st Applicant is a M r. / Ms. / M/s. UARDIAN CKYC	inor)		KYC (Please ✓)	GUARDIAN GUARDIAN	ip with Minor (Please ✓) ○ Father ○ Legal Guar
JARDIAN AADHAAR No.			Proof Attached	Aadhaar Copy (Plea	
OA / Custodian Name:  OA / Custodian  KYC ID No. (KIN)			P	OA / Custodian PAN	C (Please ✓) ○ Proof Attac
ontact Person for Corporate Investo  FIRST APPLICANT AND KYC DE  SOLE APPLICANT O Individual of	TAILS	e fill Ultimate Beneficial Ov	vnership (UBO) De	Designation:  claration Form in section 11a	& 11b - Refer Instruction No.
tate of Birth/Incorporation dividual) / (Non-individual) / (Non-individual) lease write the Date of birth as per Aadhaar Ca		of of Date of Birth (Please (For minor applicant)		_	School Leaving Certificate / Mark S Others (Please specify)
ace of Birth / corporation: lease write the Date of birth as per Aadhaar Ca pe: Resident Individual Sole		I	ionality:	Gender  Society/AOP/BOI N	Male Female C
HUF O LLP O Listed Company O Pr					
. Occupation Details [Please tick (   . Politically Exposed Person (PEP) Status	<ul><li>Business</li></ul>	O Retired	Government Serv Agriculture /Trustee/Whole time	O Proprietorship (	Professional House Others (Please specify) m Related to PEP Not Appli
*. Gross Annual Income (₹) [Please tid	2	1-5 Lakh	) 5-10 Lakh as o		>25 Lakh
. Non-Individual Investors involved/ any of the mentioned services 4. BANK ACCOUNT DETAILS - Ma	O Money L	Exchange / Money Chang Lending / Pawning Nos. 3 & 4]	ger Services (	Gaming/Gambling/Lottery/ None of the above	Casino Services
ame of the Bank:			A/c. Type	Pls. (✓) ○ NRE ○ CL	JRRENT O SAVINGS O 1
ranch Name:		ddress:			
ank Branch City:	St	ate:		Pin Co	ode

Mode of Holding: Anyone or S	Survivor	◯ Single	е	○ Joint	(1	Please note that th	e Default op	ion is Any	one or Surviv
2 <sup>nd</sup> APPLICANT Mr. / Ms. / M/s. (No (Please write the name as per Aadhaar Card)						G	ender $\bigcirc$ M	lale () F	emale Otl
AADHAAR No.							Aadhaar C	opy (Please	e ✓) ○ Enclos
PAN Details		P	ls indicate if US Pe	rson or a resid	lent for tax purpos	e / Resident of Cana	da O Yes	○ No*	(*Default if not
CKYC ID No. (KIN)				KYC Pls 🗸	O Proof Attac	hed Date of Bi	rth (Mandator laar Card)	y) <u>D D I</u>	MMYYY
Place of Birth		Country of Birth				Nationality:			
a*. Occupation Details [Please tick (	<b>✓</b> )1		<ul><li>Public Sector</li><li>Retired</li></ul>	O Gover	nment Service	<ul><li>Student</li><li>Proprietorship</li></ul>	_	essional ers	O Housew lease specify)
b*. Gross Annual Income (₹) [Please	/ 0		1-5 Lakh	○ 5-10 L		10-25 Lakh	O >25		○ > 1 Cro
c*. Politically Exposed Person (PEP) Status									
d. Net-worth ₹		O Cin al				(Not older than 1 y	<u> </u>		
Mode of Holding: Anyone or S		◯ Single		O Joint	(1	Please note that th			
3rd APPLICANT Mr. / Ms. / M/s. (No (Please write the name as per Aadhaar Card)	t Applicable in cas	se of Minor Applicant)	1				ender () N	lale () F	emale Otl
AADHAAR No.							Aadhaar C	opy (Please	e ✓) ○ Enclos
PAN Details		P	Is indicate if US Pe			e / Resident of Cana			`
CKYC ID No. (KIN)				KYC Pls 🗸	Proof Attac	hed Date of Bi (As per Aadl	rth (Mandator laar Card)	y) <u>D D I</u>	MMYYY
Place of Birth		Country of Birth	O =			Nationality:			
a*. Occupation Details [Please tick (	<b>√</b> )1		<ul><li>Public Sector</li><li>Retired</li></ul>	<ul><li>○ Gover</li><li>○ Agricu</li></ul>	nment Service Iture	<ul><li>Student</li><li>Proprietorship</li></ul>		essional ers(P	O Housew lease specify)
b*. Gross Annual Income (₹) [Please			1-5 Lakh	O 5-10 L		O 10-25 Lakh	○ >25	Lakh	○ > 1 Cro
c*. Politically Exposed Person (PEP) State		_		Not Applicable					
d. Net-worth ₹			as on DDD			(Not older than 1 y	ear)		
6a. MAILING ADDRESS [Please pro	ovide your E-m	ail ID and Mobile	Number to help	us serve yo	u better]				
Local Address of 1 <sup>st</sup> Applicant									
		City		Sta	ate		Pin Code		
Tel. Off.			Resi.			Mobile			
E - Mail^^  ^Please Use Block Letters. Investors pr	roviding email ID	would mandatarily							
6b. Mandatory for NRI / FII Applica		would mandatonly	receive all Commu	inications. St	atement of Accou	nts and Abridged Ar	nual Report	through e-	mail only.
ob. Mandatory for NRI / Fil Applica									•
Overseas Correspondence Address	ant [Please pro								•
	ant [Please pro								•
	ant [Please pro	vide Full Address	. P. O. Box No. n	nay not be s	ufficient. For O	verseas Investors	, Indian Ado		•
Overseas Correspondence Address	ant [Please pro	vide Full Address	. P. O. Box No. n tion on Investme	nay not be s	ufficient. For O	verseas Investors	, Indian Add	dress is p	•
Overseas Correspondence Address  7. INVESTMENT AND PAYMENT	ant [Please pro	complete informa	tion on Investme Regular Plan Direct Plan  Third P	ent Details p Growth ( arty Paymer	ufficient. For O	nstructions No. 6.  Dividend* Payout  Rein	, Indian Ado	Div fi	requency*
7. INVESTMENT AND PAYMENT Scheme	ant [Please pro	complete informa	. P. O. Box No. n tion on Investme Regular Plan Direct Plan	ent Details p Growth ( arty Paymer	ufficient. For O	nstructions No. 6.  Dividend* Payout	, Indian Add )  /estment   ent Declarat	Div fi	referred]
7. INVESTMENT AND PAYMENT Scheme Payment Type [Please ( ✓ )]	DETAILS ( For Self (Non-Thi	complete informa	tion on Investme Regular Plan Direct Plan  Third P  DD Charges	ent Details p Growth ( arty Paymer	ufficient. For O	nstructions No. 6.  Dividend* Payout	, Indian Add )  /estment   ent Declarat	Div fi	requency*
7. INVESTMENT AND PAYMENT Scheme Payment Type [Please ( ✓ )]	DETAILS ( For Self (Non-Thin Amount of C	complete informa	tion on Investment Regular Plan Direct Plan Third P DD Charges if any	ent Details p Growth ( arty Payment)	ufficient. For O	nstructions No. 6.  Dividend* Payout	, Indian Add )  /estment   ent Declarat	Div fi	requency*
Overseas Correspondence Address  7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please ( )] Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only  8. DEMAT ACCOUNT DETAILS - Manda</th <th>DETAILS ( For a Self (Non-Thin Amount of C RTGS / NEFT in for Mirae Asset tory for units in D</th> <th>complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please</th> <th>tion on Investment Regular Plan Direct Plan Third P DD Charges if any</th> <th>ent Details p Growth ( arty Paymer 6, sseet Savings</th> <th>ufficient. For O</th> <th>nstructions No. 6.  Dividend* Payout Rein  'Third Party Paym  Drawn or  Bran</th> <th>yestment ent Declarat Bank / ch</th> <th>Div fi</th> <th>requency* ) Bank A/c No.</th>	DETAILS ( For a Self (Non-Thin Amount of C RTGS / NEFT in for Mirae Asset tory for units in D	complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please	tion on Investment Regular Plan Direct Plan Third P DD Charges if any	ent Details p Growth ( arty Paymer 6, sseet Savings	ufficient. For O	nstructions No. 6.  Dividend* Payout Rein  'Third Party Paym  Drawn or  Bran	yestment ent Declarat Bank / ch	Div fi	requency* ) Bank A/c No.
7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please ( )] Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only  8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository	DETAILS ( For a Self (Non-Thin Amount of C RTGS / NEFT in for Mirae Asset tory for units in D	complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please	tion on Investment Regular Plan Direct Plan Third P DD Charges if any	ent Details p Growth ( arty Payments, ssset Savings quence of nam Central D	ufficient. For O	nstructions No. 6.  Dividend* Payout	yestment ent Declarat Bank / ch	Div fi	requency* ) Bank A/c No.
7. INVESTMENT AND PAYMENT Scheme Payment Type [Please ( ")] Cheque / DD / UTR No. & Date *Dividend frequency is applicable only 8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository DP Name	DETAILS ( For a Self (Non-Thing Amount of C RTGS / NEFT in the for Mirae Asset attory for units in D Limited (NSD	complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please	tion on Investment Regular Plan Direct Plan Third P DD Charges if any	ent Details part of Details part Payment of name Central DP Name	ufficient. For O	nstructions No. 6.  Dividend* Payout Rein  'Third Party Paym  Drawn or  Bran	yestment ent Declarat Bank / ch	Div fi	requency* ) Bank A/c No.
7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please ( )] Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only 8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository  DP Name  DP ID I N	Self (Non-Thi Amount of C RTGS / NEFT i for Mirae Asset tory for units in D Limited (NSD	complete informa  rd Party Payment theque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please DL)	tion on Investment Regular Plan Direct Plan Third P DD Charges if any t Fund & Mirae A	ent Details part of Details part Paymer of name Central Details part of Detail	ufficient. For O	nstructions No. 6.  Dividend* Payout Rein  'Third Party Paym  Drawn or  Bran	yestment ent Declarat Bank / ch es as per the mited (CD:	Depository	requency*  ) Bank A/c No. heque Only)
7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please ( ")] Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only 8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository DP Name  DP ID I N  Enclosures - Please ( ") 9. NOMINATION DETAILS [Minor	DETAILS ( For Self (Non-Thin Amount of C RTGS / NEFT in tory for units in D Limited (NSD Benef. A/C No. Client Masters / HUF / POA Ho	complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please DL)  List (CML)	tion on Investme Regular Plan Direct Plan Third P DD Charges if any  t Fund & Mirae A ensure that the sec	ent Details part of Details part Payment of name Central Details part of Details part of the Details part of D	ufficient. For Or	nstructions No. 6.  Dividend* Payout Rein' 'Third Party Paym  Drawn or  Bran	yestment ent Declarat Bank / ch es as per the mited (CD:	Depository	requency*  ) Bank A/c No. heque Only)
7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please ( ) ] Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only 8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository DP Name  DP ID I N	DETAILS ( For or Self (Non-Thine Amount of C RTGS / NEFT in for Mirae Asset story for units in D Limited (NSD Benef. A/C No. Client Masters / HUF / POA Homine AS PER	complete informa  rd Party Payment cheque / DD / n figures (Rs.)  Cash Managemen emat Mode - Please DL)  List (CML)  plder / Non Individe	tion on Investme Regular Plan Direct Plan  Third P DD Charges if any  t Fund & Mirae A ensure that the sec	ent Details party Payment Growth (arty Payment Growth Central Central Central Company Central	ufficient. For Or	nstructions No. 6.  Dividend* Payout Rein  'Third Party Paym  Drawn or  Bran	yestment ent Declarat Bank / ch es as per the mited (CD:	Depository	requency*  ) Bank A/c No. heque Only)
7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please ( ")] Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only 8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository DP Name  DP ID I N  Enclosures - Please ( ") 9. NOMINATION DETAILS [Minor	DETAILS ( For a Self (Non-Thine Amount of C RTGS / NEFT in the self (NSD Benef. A/C No. Client Masters / HUF / POA Home MINEE AS PER Date	complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please DL)  List (CML)	tion on Investme Regular Plan Direct Plan Third P DD Charges if any  t Fund & Mirae A ensure that the sec	ent Details party Payment of the same of t	ufficient. For Or	nstructions No. 6.  Dividend* Payout Rein' 'Third Party Paym  Drawn or  Bran	yestment ent Declarat Bank / ch es as per the mited (CD:	Div fi	requency*  ) Bank A/c No. heque Only)
Overseas Correspondence Address  7. INVESTMENT AND PAYMENT Scheme  Payment Type [Please (*/)]  Cheque / DD / UTR No. & Date  *Dividend frequency is applicable only 8. DEMAT ACCOUNT DETAILS - Manda National Securities Depository DP Name  DP ID I N  Enclosures - Please (*/)  9. NOMINATION DETAILS [Minor O PLEASE REGISTER MY/OUR NO	DETAILS ( For a Self (Non-Thine Amount of C RTGS / NEFT in the self (NSD Benef. A/C No. Client Masters / HUF / POA Home MINEE AS PER Date	complete informa  rd Party Payment cheque / DD / in figures (Rs.)  Cash Managemen emat Mode - Please OL)  List (CML)  older / Non Individe R BELOW DETAILS of Birth e of Minor)	tion on Investme Regular Plan Direct Plan  Third P DD Charges if any  t Fund & Mirae A ensure that the sec	ent Details party Payment of the same of t	ufficient. For O	nstructions No. 6.  Dividend* Payout Rein Third Party Paym Drawn or Bran	yestment ent Declarat Bank / ch es as per the mited (CD:	Div fi	requency*  ) Bank A/c No. heque Only)

## FOR NON-INDIVIDUALS ONLY

10. F	ATCA & CRS DETAILS	(Please consult your p	rofession	al tax	advisor for furth	er guidance on	FATCA & (	CRS cl	assification)		
PART	A To be filled by Fina	ncial Institutions or Dire	ect Repor	ting No	on Finacial Entity	y (NFEs)					
We are Financ or	a, ial institution	Note: If you do not have a GIIN	N but you are spo	onsored by	another entity, please prov	vide your sponsor's GIIN at	pove and indicate	e your spon	sor's name below		
Direct	reporting NFE ○ e tick (✓)]	Name of sponsoring er	ntity:								
GIIN no	ot available [Please tic	k (✓)]	for	O Not	t required to apply fo	or - please specify 2	digits sub-ca	itegory		O Not obtained -	<ul> <li>Non-participating F</li> </ul>
PART	B (please fill any one	as appropriate "to be f	illed by NI	FEs otl	her than Direct F	Reporting NFEs"	')				
1		y traded company rhose shares are regularl hed securities market)	у		es (If yes, please sp of stock exchange:	, ,	· ·		•	,	
2		entity of a publicly ompany whose shares ar n established securities n		Name	of listed company: _ e of relation  Sul	bsidiary of the Listed					regularly traded)
3	Is the Entity an active	NFE			of stock exchange: es (If yes, please fill		the next sec	ction.)			
				_	e of Business:			•			
				Pleas	e specify the sub-car	tegory of Active NFE		Mention	n code: Refer instruc	ction 16(c)	
4	Is the Entity a passive	e NFE		○ Ye	es (If yes, please fill	I UBO declaration in	the next sec	ction.)			
					e of Business:						
11a. [	DECLARATION FOR III	LTIMATE BENEFICIAL (	OWNERSE		details refer ins						
*This dec	claration is not needed for Con	npanies that are listed on any re	cognized sto	ck excha	nge or is a Subsidiary	of such Listed Comp	any or is Con	trolled by	such Listed Compar	ny. Please list below th	ne details of controlling
		tax residency / permanent resi uired details as mentioned in Fo			d ALL Tax Identification	on Numbers for EACI	H controlling	person(s)	. Owner-documented	FFI's should provide	FFI Owner Reporting
11b.		E BENEFICIAL OWNER	1			ce below is not	adequate,	please		1	1
	Name of UBO & Address	Address Type <sup>ss</sup>	PAN/Tax Identificati Equivalent	ion No./	Document Type Refer instruction No. 16(d)	Country of tax Residency/ permanent residency*	Country		UBO Code (Mandatory)	KYC (Yes / NO) [please attach the KYC acknowledgement copy]	% of beneficial interest
information that appli information	on is not provided, it will be pres cant has concealed the facts of on as may be required at your e	iness (default)/Residential/Bu sumed that applicant is the UBO, bene cial ownership. I/We also und.	with no decla undertake to k	ration to s ceep you i	submit. In such case, N nformed in writing abo	MAMF/AMC reserves t ut any changes/modi o	he right to rejectation to the a	ect the app bove info	plication or reverse the rmation in future and a	e allotment of units, if s also undertake to provid	subsequently it is found de any other additiona
Election I	Any other Identification I D, Govt. ID, Driving Licence NREGA f Birth - Country of Birth	· · · · · · · · · · · · · · · · · · ·	Nation	ality:	ype: Service, Busine: Mandatory if PAN				Date of Birth r: Male, Female, C	Other	
City of Birth: Nation				nality:					te Of Birth: under		
2. PAN: Occupation Type: City of Birth: Nationality: Country of Birth: Father's Name:				•				Of Birth: ler			
	: of Birth: ntry of Birth:		Occup Nation Father	ality:					te Of Birth:		
# Additio	onal details to be filled by coude US, where controlling po	ntrolling persons with tax resi erson is a US citizen or greer is not available, kindly provid	dency / perm	manent r	esidency / citizenshi	p / Green Card in ar	ny country ot	her than	India.		
		from Mr. / Ms. / M/s.								_	mpsum 'OR' () SIF
ĒNĀ		e Name and Plan			Payr	nent Details			Date & Stam	p of Collection	
OWLEDGMENT SLIP					unt (Rs.) jue / DD No.:						

Bank & Branch \_

FOR INDIVIDUALS: Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

FOR NON-INDIVIDUALS: Is the "Entity" a tax resident of any country other than India? O Yes O No

(If Yes, please provide country/ies in which the entity is a resident for tax purpose and the associated Tax Identification No. below)

1st Applicant (Sole / Guardian / Non-Individual)				2 <sup>nd</sup> A <sub>l</sub>	oplicant	3 <sup>rd</sup> Applicant			
Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency		◯ Yes ◯ No	Do you have any no Country(ies) of Birtl Citizenship / Nation and Tax Residency	n /	○ Yes ○ No	Do you have any no Country(ies) of Birtl Citizenship / Nation and Tax Residency	1/		
Country of Birth / Incorporation			Country of Birth			Country of Birth			
Country Citizenship / Nationality			Country Citizenship Nationality	1		Country Citizenship Nationality	I		
Are you a US specified person?		Yes No Please provide Tax Payer Id.	Are you a US specific person?	ied	<ul><li>○ Yes</li><li>○ No</li><li>Please provide Tax Payer Id.</li></ul>	Are you a US specific person?	ied Yes No Please provide Tax Payer Id.		
For non-Individual inv	estor in c	ase, if you country of incorporation /	Tax resistance in US, b	ut you are	e not a specified US person then ple	ase mention exemption	code(Refer instruction 16(e))		
Individual or Non-In if ticked Yes above.	dividual i	nvestors fill this section	Individual investor	r have to	fill in below details in case of join	t applicants			
	Countr	y:		Countr	y:		Country:		
Tax Residency Status: 1	No.:		Tax Residency Status: 1	No.:		Tax Residency Status: 1	No.:		
	Type:			Type:			Туре:		
	Country	y:		Countr	y:		Country:		
Tax Residency Status: 2 No.:  Type:		Tax Residency Status: 2			Tax Residency Status: 2	No.:			
				Type:			Туре:		
Country: Tax Residency Status: 3 No.:		<i>y</i> :		Country:			Country:		
			Tax Residency Status: 3	No.:		Tax Residency Status: 3	No.:		
	Type:			Type:			Type:		
Address Type			Address Type			Address Type			
(Addre	ss Type:	Residential or Business (default)	/ Residential / Busine	ss / Regis	stered Office) (For address mention	oned in form / existing	address appearing in folio)		
In case of applications	case of applications with POA, the POA holder should fill separate form to provide the above details mandatorily.								

#### 13. DECLARATION AND SIGNATURES / THUMB IMPRESSION OF APPLICANT(s) [Refer Instructions 2(e)]

To The Trustees, Mirae Asset Mutual Fund (The Fund) – (A) Having read and understood the contents of the Scheme, I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any provisions of the Income Tax Act, Anti Money Laundering Laws or any other applicable laws enacted by the Government of India from time to time. (C) Signature of the nomine acknowledging receipts of my/our credit will constitute full discharge of liabilities of Mirae Asset Mutual Fund. (D) The information given in / with this application form is true and correct and further agrees to furnish additional information sought by Mirae Asset Global Investments (India) Private Limited (AMC)/ Fund and undertake to update the information/details with the AMC / Fund/Registrars and Transfer Agent (RTA) from time to time. I/We hereby confirm that the AMC/Fund shall have the right to share my information and other details with the regulatory and government authorities as and when needed. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. (E) I/We further declare 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. (F) I/We hereby confirm that I/We have not been offered/ communicated any indicative portfolio and/ or any indicative yield by the Fund/AMC/fits distributor for this investment. I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. (G) Applicable to Investors availing the online facility: I/We have read and understood due the terms & conditions of the PIN agreement available on the AMC website for transacting online. (H) RIA: I/We have not received

x		x	
	Signature of 1 <sup>st</sup> Applicant / Guardian / Authorised Signatory /PoA/Karta		Signature of 2 <sup>rd</sup> Applicant / Guar Authorised Signatory /PoA

x

## Application No.:

### Cheque/DD should be Drawn in favour of the Scheme Name

Mirae Asset India Equity Fund	Mirae Asset Emerging Bluechip Fund	Mirae Asset Cash Management Fund
Mirae Asset Hybrid-Equity Fund	Mirae Asset Tax Saver Fund	Mirae Asset Dynamic Bond Fund
Mirae Asset Savings Fund	Mirae Asset Great Consumer Fund	Mirae Asset Short Term Fund