COMMON APPLICATION FORM

LIC MUTUAL FUND

Investors must read the Key Information Memorandum, the instructions and product labeling on cover page before completing this Form. The Application Form should be completed in English and in BLOCK LETTERS only.

Application No.

KEY PARTNER / ARN HOLDER INFORMATION
(Investors applying under Direct Plan must mention "Direct" in ARN Code column.) (Refer Instruction 2 & 3)

ARN* / RIA Code / PMRN	ARN / RIA / PM Name	Sub-broker Code	Sub-broker ARN Code	RM Code	Employee Unique Identification Number (EUIN)	Time Stamp No.
ARN-111310					E-156922	

Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. 3)
"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." (please tick (✓)) and sign) ☐
#By mentioning RIA code (Registered Investment Adviser), I/we authorize you to share the investment Adviser the details of my/our transactions in the scheme(s) of LIC Mutual Fund.
By mentioning PMRN code (Portfolio Manager's Registration Number), I/we authorize you to share with the SEBI-Registered Portfolio Manager the details of my/our transactions in the scheme(s) of LIC Mutual Fund.

⊗ SIGN HERE First/Sole Applicant/Guardian	⊗ SIGN HERE Second Applicant	⊗ SIGN HERE Third Applicant

TRANSACTION CHARGES FOR APPLICANTS THROUGH ARN HOLDER ONLY [Refer Instruction 4]

☐ I confirm that I am a First time investor across Mutual Funds.
(₹ 150 deductible as Transaction Charge and payable to the Distributor)

☐ I confirm that I am an existing investor in Mutual Funds.
(₹ 100 deductible as Transaction Charge and payable to the Distributor)

In case the purchase/ subscription amount is ₹ 10,000 or more and your Distributor has opted in to receive Transaction Charges, the same are deductible as applicable from the purchase/ subscription amount and payable to the Distributor. Units will be issued against the balance amount invested. Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

01. EXISTING UNIT HOLDER INFORMATION (If you have existing folio, with PAN & KYC validation please fill in section 1 and proceed to section 14.)

Folio No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ The details in our records under the folio number mentioned alongside will apply for this application

02. APPLICANT(S) DETAILS (In case of Minor, there shall be no joint holders) (Mandatory information - If left blank the application is liable to be rejected.)

First Applicant's Name/Minor Name FIRST MIDDLE LAST **KYC** ☐

PAN ☐☐☐☐☐☐☐☐☐☐ **CKYC No.** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Date of Birth** (mandatory) D D M M Y Y Y Y

Second Applicant's Name FIRST MIDDLE LAST **KYC** ☐

PAN ☐☐☐☐☐☐☐☐☐☐ **CKYC No.** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Date of Birth** (mandatory) D D M M Y Y Y Y

Third Applicant's Name FIRST MIDDLE LAST **KYC** ☐

PAN ☐☐☐☐☐☐☐☐☐☐ **CKYC No.** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Date of Birth** (mandatory) D D M M Y Y Y Y

NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / **NAME OF CONTACT PERSON - DESIGNATION** (in case of non-individual Investors)

FIRST MIDDLE LAST **KYC** ☐

PAN ☐☐☐☐☐☐☐☐☐☐ **CKYC No.** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ **Date of Birth** (mandatory) D D M M Y Y Y Y

Relationship with minor Please (✓) ☐ Father ☐ Mother ☐ Court Appointed Legal Guardian

03. TAX STATUS (Please tick ✓)

☐ Resident Individual ☐ FIIs ☐ NRI-NRO ☐ HUF ☐ Club/Society ☐ PIO ☐ Body Corporate ☐ Minor ☐ Government Body ☐ Bank
☐ Trust ☐ FI ☐ NRI-NRE ☐ FPI ☐ QFI ☐ Sole Proprietor ☐ Others ☐ Partnership Firm ☐ LLP ☐ Private Sector ☐ Public Sector

04. KYC Details (Mandatory) Occupation Please tick (✓)

FIRST APPLICANT/ GUARDIAN (in case of minor)	☐ Private Sector	☐ Public Sector	☐ Government Service	☐ Business	☐ Professional	☐ Retired	☐ Housewife
	☐ Student	☐ Forex Dealer	☐ Agriculturist	☐ Other..... (please specify)			
SECOND APPLICANT	☐ Private Sector	☐ Public Sector	☐ Government Service	☐ Business	☐ Professional	☐ Retired	☐ Housewife
	☐ Student	☐ Forex Dealer	☐ Agriculturist	☐ Other..... (please specify)			
THIRD APPLICANT	☐ Private Sector	☐ Public Sector	☐ Government Service	☐ Business	☐ Professional	☐ Retired	☐ Housewife
	☐ Student	☐ Forex Dealer	☐ Agriculturist	☐ Other..... (please specify)			

GROSS ANNUAL INCOME [Please tick (✓)]

FIRST APPLICANT/ GUARDIAN (in case of minor)	☐ Below 1 Lac	☐ 1-5 Lacs	☐ > 5-10 Lacs	☐ > 10-25 Lacs	☐ > 25 Lacs-1 Crore	☐ >1 Crore OR Net Worth	
	Net worth (Mandatory for Non-Individual ₹ ..... as on D D M M Y Y Y Y (Not older than 1 year)						
SECOND APPLICANT	☐ Below 1 Lac	☐ 1-5 Lacs	☐ > 5-10 Lacs	☐ > 10-25 Lacs	☐ > 25 Lacs-1 Crore	☐ >1 Crore OR Net Worth ..... (Not older than 1 year)	
THIRD APPLICANT	☐ Below 1 Lac	☐ 1-5 Lacs	☐ > 5-10 Lacs	☐ > 10-25 Lacs	☐ > 25 Lacs-1 Crore	☐ >1 Crore OR Net Worth ..... (Not older than 1 year)	

For Individual

☐ I am Politically Exposed Person
(Also applicable for authorized signatories/Promoters/ Karta/Trustee/Whole time Directors) please mention)

☐ I am Related to Politically Exposed Person

☐ Not Applicable

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

Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company (If No please attach mandatory Ultimate Beneficial Ownership (UBO) Declaration)	☐ Yes	☐ No
Foreign Exchange / Money Changer Services	☐ Yes	☐ No
Gaming / Gambling / Lottery / Casino Services	☐ Yes	☐ No
Money Lending / Pawning	☐ Yes	☐ No
None of the above	☐ Yes	☐ No

05. GENDER [Please tick (✓)]

☐ Male ☐ Female ☐ Transgender

06. MODE OF HOLDING [Please tick (✓)]

☐ Joint ☐ Single ☐ Anyone or Survivor (Default option is Joint)

07. MAILING ADDRESS OF FIRST / SOLE APPLICANT (MANDATORY) (Refer Instruction 11)

Landmark City State Pincode Country

08. GO GREEN INITIATIVE (Mandatory) [Please tick (✓) the mode for receiving the copy of Annual Report/Abridged Summary] (Refer instruction 19)

As part of Go-Green initiative, investors are encouraged to register/update their email ID and Mobile Number with us to support paper-less communication.

Default communication mode is E-mail only, if you wish to receive following document(s) via physical mode : [please tick (√)]

☐ Account Statement ☐ Annual Report

09. CONTACT DETAILS OF SOLE/FIRST APPLICANT (Mobile No. and Email Id. Refer Instruction No. 11)

Email Id (EMAIL Id to be written in BLOCK letters)

Tel No.: (Resi) (STD Code) **(Off)** (STD Code) **Mobile No.**

☐ **I declare that Email address and Mobile number provided in this form belongs to Self (or) Family Member, and approve for usage of these contact details for any communication with LIC MF. Please note all kinds of investor communication will be sent through email only instead of physical, for investors who provide their email address.**

⊗ SIGN HERE
First/Sole Applicant/Guardian

10. Overseas address (Overseas address is mandatory for NRI / FII applicants in addition to mailing address in India)

Landmark City State PO Box No. Country

11. DEMAT ACCOUNT DETAILS (Optional - refer instruction 13)

	NSDL	CSDL
DP Name		
DP ID		
Beneficiary Account No		

12. FATCA Detail (For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill separate FATCA details 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 Imandatory).

Sole/First Applicant/Guardian ☐ **Yes** ☐ **No**		**2nd Applicant** ☐ **Yes** ☐ **No**		**3rd Applicant** ☐ **Yes** ☐ **No or POA** ☐ **Yes** ☐ **No**	
Country of Birth.....		Country of Birth.....		Country of Birth.....	
County of Citizenship/Nationality.....		County of Citizenship/Nationality.....		County of Citizenship/Nationality.....	
Are you e US Specified Person? ☐ **Yes** ☐ **No**		Are you e US Specified Person? ☐ **Yes** ☐ **No**		Are you e US Specified Person? ☐ **Yes** ☐ **No**	
Please provide Tax Payer Id.....		Please provide Tax Payer Id.....		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**	
3		**3**		**3**	

* Please indicate all countries in which you are a resident for tax purpose and associated Tax Payer Indentification number. In case of association with POA, the POA holder should fill form to provide the above details mandatorily.

13. BANK ACCOUNT DETAILS OF THE FIRST APPLICANT (refer instruction 8) As per SEBI Regulations it's mandatory for investors to provide bank account details

Account No. **Name of the Bank**

Type of A/c ☐ SB ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others ..... Please specify ..... **Branch**

Bank City **IFSC code**** **MICR No.**

Refer Instruction 8.3 (Mandatory to attach proof, in case the pay-out bank account is different from the bank account where the investment is made) For unit holders opting to hold units in demat form, please ensure that the bank account is mentioned here. (**Mandatory to credit via NEFT/RTGS)

14. INVESTMENT DETAILS [Please tick (✓)] (Refer Instruction No. 2, 3 & 10) (If this section is left blank, only folio will be created)

Separate cheque/demand draft must be Issued for each Investment, drawn in favour of respective scheme name.
Please write appropriate scheme name as well as the Plan / Option / Sub Option.

*Cheque/DD Favouring Scheme Name/Cash (refer Instruction 2 & 3)	Plan/Option	Amount Invested (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS) TSL No. (in case of CASH)	Bank and Branch and Account Number (for Cheque/DD)	For Cash
LIC MF	☐ Growth ☐ Payout of Income Distribution cum capital withdrawal option ☐ Reinvestment of income Distribution cum capital withdrawal option				Deposited in Bank Branch Code

*All purchases are subject to reliazation of fund (Refer to Instruction No. 10) Account Type (Please tick (✓)), Default Option is Growth. Only Growth Option is Available under LIC MF Children Gift Fund.

Type of A/c ☐ SB ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others ..... Please specify .....

15. LEGAL ENTITY IDENTIFIER DETAILS

LEI No: | | | | | | | | | | | | | | | | | | | | **Validity Period of LEI:** D D M M Y Y Y Y

Legal Entity Identifier is mandatory for all non-individuals and it should be quoted in any financial transactions of Rs.50 Crores and above routed through RTGS/NEFT w.e.f 1st April 2021.

16. NOMINATION DETAILS (Refer Instruction No. 15)

☐ **PLEASE REGISTER MY/OUR NOMINEE AS PER BELOW DETAILS** **OR** ☐ **I/WE DO NOT WISH TO NOMINATE**

	Nominee Name and Address	Guardian Name (in case of Minor)	Allocation %	Nominee / Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				
			100%	

17. POA (Power of Attorney) REGISTRATION DETAILS (Refer Instruction overleaf)

Name of the POA holder

PAN of the POA holder | | | | | | | | | | **Attached** ☐ KYC Letter (Mandatory) ☐ Notarized copy of POA

18. DECLARATION & SIGNATURE/S

a) Having read & understood the contents of the Scheme Information Document of the Scheme & reinvestment scheme, I/We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I /We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt. of India from time to time. I /We have understood the details of the scheme & I /We have nor received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I /We confirm that the funds invested in the Scheme, legally belong to me / us, In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the AMC. I /We hereby authorised the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b) for NRIs: I /We confirm that I am/ we are Non Resident of Indian Nationality / Origin & that I /we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External / Non-Resident Ordinary. I/We confirm that details provided by me/us are true & correct. c) 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. d) I/We have read & understood the SEBI Circular no. MRD/DoP/Cir 05/2007 dt. April 27, 2007 & SEBI Circular No. 35/ MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/we are holding valid PAN card / have applied for PAN. e) The ARN holder has disclosed to me/us all the commission (In the form of trail commission or any other mode), payable to him for the different competing Scheme of various Mutual Fund from amongst which the Scheme is being recommended to me /us.

I/We hereby accord my/our consent to LIC MF for receiving the promotional information/ material via email, SMS, telemarketing calls etc. on the mobile number and email provided by me/us in this Application Form (refer instruction no 20).

FOR INVESTMENT BY CASH : I have not invested in LIC Mutual Fund more than ₹ 50,000/- in cash including the current investment during the current financial year.

Date : ..... Place :	⊗ SIGN HERE First/Sole Applicant/Guardian	⊗ SIGN HERE Second Applicant	⊗ SIGN HERE Third Applicant

ACKNOWLEDGMENT SLIP

Application No.

(TO BE FILLED IN BY THE INVESTOR)

LIC MUTUAL FUND

Received an application for purchase of units of LIC MF ..... (Scheme Name with option)
from Mr/Mrs/M/s. ..... (Name of the investor) **alongwith**
Cheque/Draft No./Payment Instrument No. ..... **Date** D D M M Y Y Y Y **Bank** .....
Branch ..... **Drawn on** ..... **For ₹** .....
Bank Charges (in cases of Draft) of ₹ ..... **Date** D D M M Y Y Y Y

ISC Signature, Stamp & Date

Please Note: All purchases are subject to realisation of Cheque / Demand Draft / Payment Instrument.

Corporate Office:
Industrial Assurance Building, 4th Floor, Opp. Churchgate Station, Mumbai - 400020.
Tel.: 022-66016000 | Fax: 022-66016191 | Email ID: service@licmf.com
Website: www.licmf.com | Toll Free: 1800-258-5678

Register & Transfer Agents:
KFin Technologies Private Limited, Karvy Selenium Tower B, Plot Nos. 31 & 32 | Financial District Nanakramguda |Serilingampally Mandal | Hyderabad - 500032 .
Tel.: 040-44677131-40 | Fax: 040-22388705 | Email ID: licmf.customercare@kfintech.com
Website: www.kfintech.com