COMMON APPLICATION FORM



		DISTRIBUTOR IN	NFORMATION			FOR OFF	ICE USE ON	LY	Application No:			
Name & Distribu	utor Code Sub-Broker ARN	Code Employee Uniqu	ie Indentification Numb		-Broker Code E - Code ternal Code	Registrar/Bank Serial No.	Date & Ti	me of Receipt	CAF			
*Investors should	mention the EUIN of the	he person who has advi	ised the investor. If left	blank, the fund	will assume following decl	aration by the investor "I/	We hereby conf	firm that the EUIN	box has been intentionally left blar			
provided by the er	mployee/relationship ၊	manager/sales person o	of the distributor and th	e distributor ha	s not charged any advisory	fees on this transaction".		_	advice of in-appropriateness, if an			
please mention 'D	Direct' in the column 'N	ame & Distributor Code	, -		on the investors' assessme	ent of various factors inci	uding the servic	e rendered by the	e distributor. For Direct investment			
columns marked* BLOCK LETTERS.	* are mandatory). All	before filling up the sections to be filled in	application (all n English and in	Solo/								
Use this form If yo the separate SIP Fo	ou are making a one ti orm	me investment. For SIP	investment use	Authorise	1st Applicant/Guardian / ed Signatory / POA Signat	ory 2nd Applicant /	Authorised Sign	natory 3rd A	applicant / Authorised Signatory			
		ling the form [ple			INVEST NOW		BALANCE F		(Refer Instruction No. XIII)			
	INIT HOLDER INF	ORMATION / EX			IO NO. If you have exis	sting folio, please fill in	section 2 and p	proceed to secti	on 8. (Refer Instruction No. XV)			
Folio No.	ION CHAPGES (D	loaso V) (Dofault	Name of First		efer Instruction No	VIV)						
		or in Mutual Fund		investor) (iv		n Existing Investor	in Mutual F	unds				
In case the subs	scription amount is ₹	₹10,000/- or more an	nd your Distributor h	as opted to re		ges, ₹150 (for first time	e mutual fund	investor) or ₹10	00/- (for investor other than fi			
Mandatory			•	•	fer Instruction No.				(Refer Instruction No. XI			
1st Applicar	nt /Guardian	1 - 1 - 1 - 1 - 1 -	N U M B E	R Yes	(Please submit p			•	(YC Application Form)			
2nd Applica	ant	PAN N	N U M B E	R Yes	(Please submit p	proof) Y	'es (Ple	ase submit K	(YC Application Form)			
3rd Applica	nt	PAN N	N U M B E	R Yes	(Please submit p	proof) Y	es (Ple	ase submit K	(YC Application Form)			
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		(Refer Instruction	. '		OCK LETTERS*							
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in case of ivi	case of Minor - Parent/ Legal Guardian Name of 1st Applicant /Contact person (in case of non individual applicant) Relationship with Minor/ Designation											
^Mandatory	Mandatory proof of Date of Birth Certificate School Leaving Certificate Passport											
	nors (Any One)		t issued by Highe	er Secondar	y Board / ICSE / CB	SE Others	5	Please S _l	pecify			
Name of 2nd	d Applicant N	1r. Ms.							OOB DDMMY			
Name of 3rd	d Applicant M	lr. Ms.							OOB D D M M Y			
Mode of Hold	ding* [please ✓]	Occupation* [pl				Legal St	atus* [please	· /]				
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SB.c	Joint	Business	Service	Profession			ident Individu					
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8	E-MAIL COMMUNICATION (Refer Instruction No. III) [please ✓]						9 ELECTRONIC/TELECOMMUNICATION MODE (Refer Instruction IV) [please ✓] ☐ I have accepted the terms and conditions of electronic/ telecommunication						
	I/we wish to receive the follow Account Statement / News Let				Yes No			the terms and like to apply for t		electronic/	telecon	nmunication	
10	BANK ACCOUNT DETAIL	S* (Refer In	struction No	. V for multiple bank re	egistration)								
	A/c Type [please ✓] SB Current NRO NRE FCNR												
	Account No					Bank Nam	e						
	Branch				E	Branch Ad	dress						
						City			Pin				
	IFSC Code	: 6 1: /070	(h) FFT/F00 (F00	1.6 (5:1.1		MICR Cod	e						
	Preferred mode of payment: Electi *Mandatory – Please attach cancel cheque/ Bank Pass Book/ Bank Stati				ified Bank Statem	ent / first pag	e of the Bank Pass	book (bearing acco	ount number and t	first unit holde	r name o	n the face of th	
11	DEMAT ACCOUNT DETA		d as an increment	al additional document in case of	: a. Registration o	the investor:	s Bank Mandate at	the time of investme	ent b. Subsequen	t change in the	investor	s Bank Mandate	
	Do you want units in demat F		√] Yes	No [Please ensure that the	ne sequence o	f names as	mentioned in	the application f	form matches	with that of	the de	mat A/c. held	
١	with the depository participal	nt]. In case ur	it holders do r	not provide their demat a	ccount details,	an accoun	t statement sh	all be sent to the	em.				
	NATIONAL SECURI	ITIES DEPOS	ITORY LTD. (NSDL)		CENTE	RAL DEPOSIT	ORY SERVICES	(INDIA) LTD	. (CDSL)			
	Depository Participant	(DP) Nam	e:										
	DP ID No.:				Benefi	ciary A/c	No.						
12	INVESTMENT DETAILS*	Choice of	Scheme /Pl	an / Option (Refer In									
	INVESTIGIENT DE IAILS	CHOICE OF	Scheme /11	un / Option (Neier ii	istruction ive	o. vii) įpic	case ·]						
	Scheme/Plan/Option/Fa	acility	Edelweiss-	Schen	ne		Plan		Op	tion/Facili	ty		
	(Default Plan/Option/Fa	cility will be	applied in ca	se of no information,	ambiguity o	r discrepa	ncy)						
	Dividend Sweep to Sche	me											
	*Dividend Sweep facility	not applica	ble for Edelw	eiss Short Term Incom	e Fund								
	Schemes offered by Ede	lweiss Mut	ual Fund:										
	,		y Schemes					Debt S	Schemes				
	Edelweiss Absolute Return	•	•			Edelweiss	Liquid Fund						
	Edelweiss Diversified Grov	wth Equity To	p 100 (E.D.G.	E. Top 100) Fund		Edelweiss	Ultra Short Te	erm Bond Fund					
	Edelweiss ELSS Fund						Monthly Inco						
		Edelweiss Select Midcap Fund Edelweiss Short Term Income Fund											
13		Edelweiss Equity Enhancer Fund Edelweiss Gilt Fund PAYMENT DETAILS (Refer Instruction No. VIII)											
	•			Transfer Letter	r Ch	eque		Chara	ud NId			(Dotal V V	
	Mode of Payment [please Gross Amount (₹)	· •] K	TGS/NEFT	DD Charg		eque	Not /	Cnequ Amount (₹)	ue No.	D D M	IVI Y	Date Y Y	
	Bank /Branch & City			DD Charg	;es (\)		INCL P	Amount (X)					
	Account No.				Account	Type [ple	ase √1	SB Cur	rent 1	NRO	NRE	FCNR	
		(16										TOTAL	
14	NOMINATION DETAILS* I/We hereby nominate the ur	, ,			•				•		•	ants made to	
	such Nominee shall be a valid						y/our acath.i/	vvc also allacist	una macan pa	yments und		icitis made ti	
	Name of Nominee	Date of Bir		Address				Relationship v	vith Ad	dress of Le	gal Gu	ardian	
	('If Nominee is i	ninor)		(If I	Nominee is i	minor)	nominee					
15	DECLARATION AND SIGN	NATURE(S)							·				
	laving read and understood the contents of the Scheme Information Document of the Scheme and Statement of Additional Information and subsequent amendments there not underly the section on who cannot invest. "Prevention of Money Laundering" and "Know Your Customer" (We hereby apply to the Trustee of Edelweiss Mutual fund for units the Scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the Scheme. I We further declare, I am / we are authorised to invest the amount invested by me/us in the above mentioned Scheme is derived through legitimate sources and is not held or designed for the purpose of contravention any acts, rules, regulations or any statute or legislation or any other applicable laws or notifications, directions issued by the governmental or statutory authority from time to time, sexpensible if the investment is ultra vires thereto and the investment is contravy to the relevant constitutional documents. It was a my our investment in the Scheme and the AMC/Trustee/Fund would not esponsible if the investment is ultra vires thereto and the investment is contravy to the relevant constitutional documents. It was a my/our investment in the Scheme sequal to or more than 25% of the corpus of the Scheme, then Edelweiss Asset Management Ltd., Investment Manager, to the Edelweiss Mutual Fund, has full right to refund the sexcess to me/us to bring my/our investment below 25%. I/We have not received nor been induced by any rebate or girts, directly or indirectly in making this investments. I/We agree by authorise Edelweiss Mutual Fund, has full right to refund to reject the publication. Investment to my bank(s) / Edelweiss Mutual Fund, and the substrainment of Bonk or the substrainment of the Schemes of the fund, recover/debit my/our folios(s) with the penal interest and take any appropriate action against me/us in case it heques (s) payment instrument is/are returned by my/our banker for any reason whatsoever. I/We undertake that these investments are my/our own and												
	including the section on who	o cannot inve	st,"Prevention e to abide by t	of Money Laundering" The terms and conditions	and "Know Yo . rules and re	our Custom	er", I/We here of the Scheme	by apply to the	Trustee of Edd	elweiss Mu we are aut	tual fur horisec	nd for units o	
	amount & that the amount i	invested by m or any statute	e/us in the áb or legislation o	ove mentioned Scheme i or any other applicable la	is derived throws ws or notificat	oŭgh legitin ions, direc	nate sources a tions issued by	nd is not held o the governmer	r designed for ntal or statutor	the purpose vauthority	e of con / from ti	ntravention of me to time.	
	is expressly understood that responsible if the investmen	it I/We have 1 it is ultra vires	the express au thereto and t	ithority from our constit ne investment is contrary	utional docur to the releva	nents to in nt constitui	ivest in the un tional docume	its of the Scher nts. I/We agree	me and the All that in case m	vIC/Trusteé y/our inves	/Fund \ tment i	would not b n the Schem	
	is equal to or more than 25% excess to me/us to bring my	% of the corp y/our investn	us of the Sche ent below 25	me, then Edelweiss Asse %. I/We have not receive	t Managemer ed nor been i	nt Ltd., Inve nduced by	estment Mana any rebate or	ger to the Edelv gifts, directly o	veiss Mutual F r indirectly in	und, has fu making thi	ıll right s invest	to refund th ments. I _. /W	
	hereby authorise Edelweiss Distributor / Broker / Investi	Mutual Fund ment Advisor	i, its investme . I/We authori	ent Manager and its agei se this Fund to reject the	nts to disclose application, i	e details of eyert the i	my investment inits credited/	nt to my bank(s redeem units ci	s) / Edelweiss reated at appli	Mutual Fur icable NAV,	nd's bar restrai	nk(s) and / c n me/us fror	
	cheque(s)/payment instrum	ent in any of nent is/are ref	the Schemes c turned by my/	our banker for any reaso	t my/our folio n whatsoever	s(s) with the	ne penal intere ertake that the	est and take any ese investments	appropriate as are my/our o	wn and ack	ist me/	us in case th dge that AM	
	dividend payouts and redem	nption amour	it to my bank c	letails given above. I/We	hereby declar	e that the p	particulars abo	r nereby, further ve are correct.	r agree man m r the different	competing	airectly Schem	credit all th	
	Mutual Funds from amongst	t which the So	heme is being	recommended to me/us	s. I/We further	agree that	the Fund/AM	C can send us al	l types of SMS	relating to	the pro	ducts offere	
	Applicable to investors who Mutual Fund.	have not opt	ed for nomina	tion facility. I/We hereby	confirm that	it is my/ou	r informed dec	cision not to ava	il the nominat	ion facility	offered	by Edelweis	
	withem. belief to investors who have not opted for nomination facility. I/We hereby confirm that it is my/our informed decision not to avail the nomination facility offered by Edelweis Autual Fund. pplicable to NRI only: I/We confirm that I am / we are Non Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved anking channels from funds in my/our Non-Resident External/Ordinary Account/FCNR Account. Please (*) (Including amount of Additional Purchase Transaction made in future)												
	Repatriation Non Repa	• •	CIII EALCI IIAI/ C	y recounty FCNN ACCO	/case (*) (ciaunig all	.cantor Addition	an andiase Hailse		.carcj			
	Date D D M M Y	<u>S</u>											
		inre(
	Place	Signature(s)											
		N. Si	Authori	sed Signatory / POA Signatory	/	2nd Applica	ant / Authorised S	signatory	3rd App	licant / Autho	rised Sig	natory	
<u>م</u>	{			or Detailed Instructions on Fi	lling the Applicat	tion Form ple	ase refer to Page	no. 25.					
	CHECKLIST (Please submit the fol Notary Public.)	lowing docume	nts with your app	lication (where applicable). A	II documents sho	ould be origin	nal/true copies ce	rtified by a Directo	or/Trustee /Comp	any Secretary	//Author	rised signatory	
	Documents	est		Individual	Companies	Societies	Partnership Firm	ns Investmen	t through POA	Trusts	NRI	FIIs PIO	
	Resolution/ Authorisation to inve List of authorised signatories wit		atures	1	V	→		-	√	V /	+-	· /	

Documents	Individual	Companies	Societies	Partnership Firms	Investment through POA	Trusts	NRI	FIIs	PIO
Resolution/ Authorisation to invest		✓	√	✓		✓		✓	
List of authorised signatories with specimen signatures		✓	✓	✓	✓	✓		√	
Memorandum & Articles of Association		✓							
Trust Deed						✓			
Bye-laws			✓						
Partnership Deed				✓					
Overseas Auditor Certificate								✓	
Notarised POA					✓				
Proof of Address									✓
Copy of PAN Card	✓	✓	✓	✓	✓	✓	✓	✓	
KYC Compliance	✓	✓	✓	✓	✓	✓	✓	✓	✓
PIO Card									✓
Foreign Inward Remittance Certificate							√		✓
Trigger Form (if applied)	√	√	V	√	√	√	✓	V	✓