

Name & Broker Code / ARN	Sub Broker / Sub Agent ARN Code	Employee Unique Identification Number (EUIIN)	ISC Date Time Stamp Reference No.
ARN-90531		E086029	

Declaration for "Execution Only" Transaction (where EUIIN box is left blank). Please refer Instruction 12 for complete details on EUIIN. I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Signature of 1 st Applicant / Guardian / Authorized Signatory /PoA/Karta	Signature of 2 nd Applicant / Guardian / Authorized Signatory /PoA	Signature of 3 rd Applicant / Guardian / Authorized Signatory /PoA
<input type="checkbox"/> Lumpsum Investment	<input type="checkbox"/> Micro Application	<input type="checkbox"/> SIP Application

TRANSACTION CHARGES (Please tick any one of the below. Refer Instruction No. 11)

I AM A FIRST TIME INVESTOR IN MUTUAL FUNDS OR I AM AN EXISTING INVESTOR IN MUTUAL FUNDS
Applicable transaction charges will be deducted in case your distributor has opted for such charges. Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investor's assessment of various factors including the services rendered by the ARN Holder.

1. EXISTING UNIT HOLDER INFORMATION [Please fill in your Folio Number, Name, Section 2 & proceed to Section 6 - Investment Details]

Folio No.	Name of 1st Unit Holder -
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2. APPLICANT(S) NAME AND INFORMATION [Refer Instruction 2] If the 1st / Sole Applicant is Minor, then please provide details of natural/legal guardian

1st / SOLE APPLICANT - Mr. | Ms. | M/s.

PAN Details	KYC Pls (✓) <input type="checkbox"/> Proof Attached	Pls indicate if US Person/Resident of Canada - <input type="checkbox"/> Yes <input type="checkbox"/> No* (*Default if not ✓)
DATE OF BIRTH (Mandatory if applicant is Minor)	Proof of Date of Birth (Please ✓)	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate / Mark Sheet
		<input type="checkbox"/> Passport of the Minor <input type="checkbox"/> Others (Please specify)
GUARDIAN (In case 1st Applicant is a Minor)	Relationship with Minor Please (✓)	
Mr. Ms. M/s.	Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian <input type="checkbox"/>	
Contact Person for Corporate Investor	Name:	Designation:

POA Details	Name -	PAN Details	KYC Pls (✓) <input type="checkbox"/> - Proof Attached
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Mode of Holding Anyone or Survivor Single Joint (Please note that the Default option is Anyone or Survivor)

3. KYC DETAILS

1st SOLE APPLICANT Individual or Non-Individual (Please attach mandatory Ultimate Beneficial Ownership (UBO) Declaration Form - Refer Instruction 2(d))

Tax Status	Resident Individual <input type="checkbox"/> Sole Prop <input type="checkbox"/> NRI - NRE <input type="checkbox"/> Trust <input type="checkbox"/> Bank / FIs <input type="checkbox"/> FIs <input type="checkbox"/> PIO <input type="checkbox"/> Society/AOP/BOI <input type="checkbox"/> Minor thru Guardian <input type="checkbox"/>
NRI - NRO <input type="checkbox"/> HUF <input type="checkbox"/> LLP <input type="checkbox"/> Listed Company <input type="checkbox"/> Unlisted Company <input type="checkbox"/> Partnership Firm <input type="checkbox"/> FOF - MF Schemes <input type="checkbox"/> Others <input type="checkbox"/> (Please specify)	
a. Occupation Details [Please tick (✓)]	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife
	<input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (Please specify)
b. Gross Annual Income (Rs.) [Pls tick (✓)]	<input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lakh <input type="checkbox"/> 5-10 Lakh <input type="checkbox"/> 10-25 Lakh <input type="checkbox"/> >25 Lakh <input type="checkbox"/> > 1 Crore
c. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)	<input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable
d. Net-worth (Mandatory for Non-Individuals) Rs.	as on DD MM YY YY (Not older than 1 year)
e. Non-Individual Investors involved/providing any of the mentioned services	<input type="checkbox"/> Foreign Exchange / Money Changer Services <input type="checkbox"/> Gaming/Gambling/Lottery/Casino Services
	<input type="checkbox"/> Money Lending / Pawning <input type="checkbox"/> None of the above

3A. JOINT APPLICANTS, IF ANY AND THEIR DETAILS

2nd APPLICANT Mr. | Ms. | M/s. (Not Applicable in case of Minor Applicant)

PAN Details	KYC Pls (✓) <input type="checkbox"/> Proof Attached	Pls indicate if US Person/Resident of Canada - <input type="checkbox"/> Yes <input type="checkbox"/> No* (*Default if not ✓)
a. Occupation Details [Please tick (✓)]	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife	
	<input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (Please specify)	
b. Gross Annual Income (Rs.) [Pls tick (✓)]	<input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lakh <input type="checkbox"/> 5-10 Lakh <input type="checkbox"/> 10-25 Lakh <input type="checkbox"/> >25 Lakh <input type="checkbox"/> > 1 Crore	
c. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)	<input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable	

3rd APPLICANT Mr. | Ms. | M/s. (Not Applicable in case of Minor Applicant)

PAN Details	KYC Pls (✓) <input type="checkbox"/> Proof Attached	Pls indicate if US Person/Resident of Canada - <input type="checkbox"/> Yes <input type="checkbox"/> No* (*Default if not ✓)
a. Occupation Details [Please tick (✓)]	<input type="checkbox"/> Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife	
	<input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (Please specify)	
b. Gross Annual Income (Rs.) [Pls tick (✓)]	<input type="checkbox"/> Below 1 Lakh <input type="checkbox"/> 1-5 Lakh <input type="checkbox"/> 5-10 Lakh <input type="checkbox"/> 10-25 Lakh <input type="checkbox"/> >25 Lakh <input type="checkbox"/> > 1 Crore	
c. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)	<input type="checkbox"/> I am PEP <input type="checkbox"/> I am Related to PEP <input type="checkbox"/> Not Applicable	

ACKNOWLEDGEMENT SLIP MIRAE ASSET MUTUAL FUND

Date: No.:

Received from Mr. / Ms. / M/s. _____ an application for Purchase of Units of the Scheme(s) _____ alongwith Cheque / DD / Payment Instrument as detailed overleaf.

ISC Stamp & Signature

Please Read All Instructions as given in KIM, to help you complete the Application Form correctly.

4. MAILING ADDRESS [Please provide your E-mail ID and Mobile Number to help us serve you better]											
Local Address of 1 st Applicant-											
City	State		Pin Code								
Tel. Off.	Resi.		Mobile								
E - Mail ^{^^}											
^{^^} Please Use Block Letters. Investors providing email ID would mandatorily receive all Communications, Statement of Accounts and Abridged Annual Report through e-mail only.											
4a. Mandatory for NRI / FII Applicant [Please provide Full Address. P. O. Box No. may not be sufficient. For Overseas Investors, Indian Address is preferred]											
Overseas Correspondence Address-											
5. BANK ACCOUNT DETAILS - Mandatory [Refer Instruction Nos. 3 & 4]											
Name of the Bank											
Core Banking A/c No.			A/c. Type Pls. (✓) NRE <input type="radio"/> CURRENT <input type="radio"/> SAVINGS <input type="radio"/> NRO <input type="radio"/>								
Branch Name		Address									
Bank Branch City		State		Pin Code							
MICR Code	Please attach a cancelled cheque OR a clear photo copy of a cheque		IFSC Code (Mandatory for Credit via NEFT/RTGS)								
6. INVESTMENT AND PAYMENT DETAILS (For complete information on Investment Details please refer to instructions No. 6.)											
Scheme/Plan/Option/Sub Option	Mirae Asset										
Payment Type [Please (✓)]	<input type="radio"/> Non-Third Party Payment <input type="radio"/> Third Party Payment (Please attach 'Third Party Payment Declaration Form')										
Cheque / DD / UTR No. & Date	Amount of Cheque / DD / RTGS / NEFT in figures (Rs.)	DD Charges, if any	Net Purchase Amount	Drawn on Bank / Branch	Pay-In Bank A/c No. (For Cheque Only)						
7. DEMAT ACCOUNT DETAILS – Mandatory for units in Demat Mode -Please ensure that the sequence of names as mentioned under section 3 matches as per the Depository Details.											
National Securities Depository Limited (NSDL)			Central Depository Services (India) Limited (CDSL)								
DP Name -			DP Name -								
DP ID -	I	N	Benef. A/C No. -	16 Digit A/C No. -							
Enclosures - Please (✓) <input type="radio"/> Client Masters List (CML) <input type="radio"/> Transaction cum Holding Statement <input type="radio"/> Delivery Instruction Slip (DIS)											
8. NOMINATION DETAILS [Minor / HUF / POA Holder / Non Individuals cannot Nominate - Refer Instruction No. 9]											
<input type="radio"/> PLEASE REGISTER MY/OUR NOMINEE AS PER BELOW DETAILS OR <input type="radio"/> I/WE DO NOT WISH TO NOMINATE											
No.	Nominee(s) Name	Date of Birth (in case of Minor)			Name of the Guardian (in case of Minor)	Relationship	% of Share	Signature of Nominee / Guardian			
1		D	D	M	M	Y	Y	Y			
2		D	D	M	M	Y	Y	Y			
3		D	D	M	M	Y	Y	Y			
9. DECLARATION AND SIGNATURES / THUMB IMPRESSION OF APPLICANT(s) [Refer Instructions 2(e)]											
<p>To The Trustees, Mirae Asset Mutual Fund (The Fund) – (A) Having read and understood the contents of the SID of the Scheme(s), I/We hereby apply for units of the scheme(s) and agree to abide by the terms, conditions, rules and regulations governing the scheme. (B) I/We hereby declare that the amount invested in the scheme(s) 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 nominee 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) 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/its 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, understood and shall be bound by the terms & conditions of the PIN agreement available on the AMC website for transacting online. (H) Applicable for NRIs 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 and for all additional purchases have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/ Ordinary Account. (I) Applicable to Foreign Resident's Residing in India:- I/ We confirm that I/We satisfy the Residency test as prescribed under FEMA provisions. I/We further declare that I/We am/are "Person Resident in India" and are allowed to invest into the Scheme as per the said FEMA regulations and other applicable laws and regulations. (J) I / We confirm that I am / We are not United States person(s) under the laws of United States or resident(s) of Canada. In case of change to this status, I / We shall notify the AMC, in which event the AMC reserves the right to redeem my / our investments in the Scheme(s).</p>											
Signature of 1 st Applicant / Guardian / Authorised Signatory /PoA/Karta				Signature of 2 nd Applicant / Guardian / Authorised Signatory /PoA				Signature of 3 rd Applicant / Guardian / Authorised Signatory /PoA			

01/09/2014

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

Cheque/DD should be Drawn in favour of the Scheme Name	Mirae Asset India Opportunities Fund	Mirae Asset Emerging Bluechip Fund
Mirae Asset India China Consumption Fund	Mirae Asset China Advantage Fund	Mirae Asset Global Commodity Stocks Fund
Mirae Asset Ultra Short Term Bond Fund	Mirae Asset Short Term Bond Fund	Mirae Asset Cash Management Fund

For more information visit us at www.miraeassetmf.co.in	E-mail us at customer@miraeasset.com Call us at 1800-2090-777 (Toll Free)
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