

ARN Code & Name	Sub-Broker's ARN Code	Employee Unique Identity Number*	Internal Code for Sub-broker/Employee	Time Stamp

Upfront commission shall be paid directly by the investor to the AMFI registered distributors based on the investors' assessment of various factors including the service rendered by the distributor. Investors subscribing under the "DIRECT" plan of the scheme should mention "DIRECT" in the ARN column

EXECUTION ONLY (To be signed when EUIN is left blank)

*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 Sign here _____

Please Sign here _____

Please Sign here _____

First / Sole Applicant/ Guardian / POA Holder / Auth. Sign

Second Applicant / Auth. Sign

Third Applicant Sign

TRANSACTION CHARGES (Please tick any one of the below. Refer Instruction no.7)

I am a first time investor in Mutual Funds or I am an existing Investor in Mutual Funds

1. EXISTING UNIT HOLDER INFORMATION (Please fill in your Folio No. & Name and then proceed to Section 8) Applicable details and mode of holding will be as per the existing Folio.

Folio No. _____

2. UNIT HOLDER / NEW APPLICANT INFORMATION (Refer Instruction Page) Fresh / New investors to fill in all the Sections 2 to 12

NAME OF FIRST / SOLE APPLICANT

Mr. Ms. M/s. _____

DATE OF BIRTH (DOB)

D	D	M	M	Y	Y	Y	Y
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 (Mandatory in case of minor)

NAME OF THE GUARDIAN (For minor applicant) / Name of the POA Holder / Name of the Contact Person (For Non Individual Applicant)

Mr. Ms. M/s. _____

Guardian named above is: Father Mother Court Appointed* Designation of Contact Person _____

For Investments "On behalf of Minor": (*Refer Instruction 3 for mandatory documents to be attached)

Proof of DOB & Relationship attached Birth Certificate School Certificate / Marksheet Passport Any other.....

NAME OF SECOND APPLICANT

Mr. Ms. _____

NAME OF THIRD APPLICANT

Mr. Ms. _____

3. FIRST/SOLE APPLICANT - MAILING ADDRESS & CONTACT DETAILS

City _____ State _____ Pin Code _____

STD Code _____ Telephone Off. _____ Res. _____ Mob. _____

E-Mail** _____

OVERSEAS ADDRESS (Mandatory for NRI / FII application)

State _____ Pin Code _____ City _____ Country _____

4. PAN AND KYC COMPLIANCE STATUS DETAILS (MANDATORY) (Refer Instruction 2, 16 & 17)

	PAN No.	KYC Compliance Status (Mandatory)		PAN No.	KYC Compliance Status (Mandatory)
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First / Sole Applicant		<input type="checkbox"/> KYC Acknowledgement Attached	Third Applicant		<input type="checkbox"/> KYC Acknowledgement Attached
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Second Applicant		<input type="checkbox"/> KYC Acknowledgement Attached	Guardian / POA Holder		<input type="checkbox"/> KYC Acknowledgement Attached
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5. Other KYC details (Mandatory) Individual Non-Individual

5a. Status of First/Sole Applicant [Please (✓)]

<input type="checkbox"/> Partnership	<input type="checkbox"/> Society/Club	<input type="checkbox"/> Listed Company	<input type="checkbox"/> Unlisted Company	<input type="checkbox"/> Individual	<input type="checkbox"/> Minor through guardian	<input type="checkbox"/> HUF
<input type="checkbox"/> NRI-Repatriable	<input type="checkbox"/> NRI-Non-Repatriable	<input type="checkbox"/> Company	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Trust	<input type="checkbox"/> Mutual Fund	<input type="checkbox"/> FPI
		<input type="checkbox"/> FII/Sub account of FII	<input type="checkbox"/> Fund of Funds in India	<input type="checkbox"/> QFI	<input type="checkbox"/> Others	(please specify)

5b. Occupation Details [Please (✓)] (To be filled only if the applicant is an individual)

First Applicant	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist
	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others	(please specify)

Second Applicant	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist
	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others	(please specify)

Third Applicant	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist
	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others	(please specify)

5c. Gross Annual Income (in ₹) [Please (✓)]

First Applicant	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore (or)								
	<input type="checkbox"/> Net-worth (Mandatory for non-individuals) ₹ _____ as on					<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> (Not older than one year)	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y							

Second Applicant	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore (or) Net-worth _____
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Third Applicant	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore (or) Net-worth _____
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5d. First Applicant

For Individuals [Please (✓)] Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors) I am PEP I am related to PEP Not Applicable

For Non-Individuals providing any of the below mentioned services [Please (✓)]

Foreign Exchange/Money Changer Services/Gambling/Lottery/Casino Services/Money Lending/Pawning None of the above

Second Applicant: (To be filled only if the applicant is an individual) I am PEP I am related to PEP Not Applicable

Third Applicant: (To be filled only if the applicant is an individual) I am PEP I am related to PEP Not Applicable

ACKNOWLEDGEMENT SLIP - Common Application Form

TAURUS MUTUAL FUND

APPLICATION NO. _____