Updated and Approved on September 26, 2022

	<i>PICICI</i>								
	PRUDENTIAL TO								
l	MUTUAL FUND								

Common Application Form for Lump sum/Systematic Investments Plan

Investor must read Key Scheme Features and Instructions before completing this form.

All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS.

Application No.

#By mentioning RIA/PMRN code, I/we authorize you to share with the Investment Adviser the detail Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No us as this is an "execution-only" transaction without any interaction or advice by the employee/relatin-appropriateness, if any, provided by the employee/relationship manager/sales person of the distrib SIGNATURE OF SOLE / FIRST APPLICANT TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY [Refer Instruction of the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions che cable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invest directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including 1. APPLICANT(S) DETAILS (Please refer to Instruction No. II (b) & IV) (Name should be as per the SOLE / 1st APPLICANT PAN/PEKRN* KYC Id No.Y Enclosed (Please /)* WILDE PAN/PEKRN* KYC Id No.Y FIRST PAN/PEKRN* KYC Id No.Y KYC Proof Attached (Mandatory) Relationship with Minor applicant: O Natural guar KYC Id No.Y FIRST PAN/PEKRN* KYC Id No.Y KYC Proof Attached (Mandatory) Relationship with Minor applicant: O Natural guar KYC Id No.Y FIRST PAN/PEKRN* KYC Id No.Y KYC Proof Attached (Mandatory) FIRST PAN/PEKRN* KYC Id No.Y KYC Proof Attached (Mandatory) FIRST PAN/PEKRN* KYC Id No.Y KYC Proof Attached (Mandatory) FIRST PAN/PEKRN* KYC Id No.Y KYC Proof Attached (Mandatory) FIRST	D. XIII). — I/We hereby confirmationship manager/sales personator and the distributor has buttor and the distributor has buttor and the distributor has buttor and the distributor has button XIII arges, the same are deductible as sted. • Upfront commission shall be the service rendered by the distributor has button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the service rendered by the distributor has been button and the distributor has been been button and the service rendered by the distributor has been been button and the service rendered by the distributor has been been button and the service rendered by the distributor has been been been button and the service rendered by the distributor has been been been button and the service rendered by the distributor has been been been been been been been bee	the scheme(s) m that the EUI on of the abov not charged a SIGN applii e paid buttor. Date Entity Identifit of INR 50 cross	of ICICI Pru N box has be e distributor ny advisory ATURE OF g Folio No of Birth**	een intentionally le or notwithstandin fees on this transa THIRD APPLICA	nd. oft blank by m g the advice oction.
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mandatory information left blank, the application is liable to be rejected. ¥Individual client who has registered under Centra	LIANO D	D	D M	M Y Y	Y
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. INVESTMENT DETAILS (Refer Instruction No. IV) (For Plans & Sub-options p	•			n scheme name	below:
ICI Prudential r investors investing in Income Distribution cum Capital Withdrawal (IDCW) option of the Scheme n	Plan: nay note that the amounts ca		Option: ed out of inv	estors capital (Eq	ualization
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. PAYMENT DETAILS Mode of Payme	nt Cheque DE		s Transfer	O NEFT) RTGS
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Applications with Third Party Cheques, prefunded instruments etc. and in circumstances as detailed circular. Please read the instruction no. VI(e). Third Party Payment Declaration form is available in v					
	Mandatory Information.	Application N	— — — — — — — — — — — — — — — — — — —		· <u> </u>

5. CORRES Correspondence				-	T APPLICA		erseas Ac	ddress	(Mandatory for NRI / F	II Appli	cants)			
		HOU	SE / FLAT NO).					HOUSE	/ FLAT	NO.			
		STRE	ET ADDRESS	3			STREET ADDRESS							
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•	Spouse	Depender	nt Children or selected th	Deper	ndent Siblings	lered as a defa			Guardian PM		Custodia		POA [Famil
☐ Please tick (\checkmark) if you wish to receive Annual Report or Abridged Summary via Post - (Default communication mode is E-mail) [Refer Instruction No.IX(a)] ☐ Please tick (✓) if you wish to receive Account statement / Other statutory information via Post instead of Email [Refer Instruction No.IX(b)]														
Please ✓ any of the frequencies to receive Account Statement through e-mail [£] : ○ Daily ○ Weekly ○ Monthly ○ Quarterly ○ Half Yearly ○ Annually														
** Mandatory i	n case the Sole C requirements	/First appli s, please re	cant is minor a fer to the instr	and/or if inveruction Nos.		ent For docu	ments to refer to	be sub	ntact Person is Mandatory omitted on behalf of mino ction no. IX					restor.
6. WIODE (DF HOLDIN	Please	tick (🗸)] (Si	ngie O J	Joint O Anyo	one or Survivor (E	Јетаин)							
7. TAX STATUS [Please tick (🗸)] Resident Individual NRI Partnership FIRM Government Body FPI category I NPS Trust Bank On behalf of Minor Company A0P/B0I FPI category II NON Profit Organization/Charities FPI category II Mutual Funds HUF Body Corporate Private Limited Company Public limited company Mutual Funds FOF Schemes Defence Establishment Financial Institution Trust/Society/NGO Limited Partnership (LLP) Sole Proprietorship Others (Please specify)														
8. DEMAT A					efer Instruction lumber (NSDL only)	No. XI)	CDSL: D)eposito	ry Participant (DP) ID (CDSL or	nly)				
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			Place/City of B			Country of Bir			<u> </u>		zenship / N			
First Applican	t / Guardian								☐ Indian ☐ U.S. ☐ Others (Please specify)					
Second Applic	ant								☐ Indian ☐ U.S. ☐ Others (Please specify)					
Third Applicar	ıt					☐ Indian ☐ U.S. ☐ Others				thers (Pl	ease specify,	·		
Are you a tax res If 'YES' please fill							○ No you are a		Please tick (✔)] /Resident / Green Card Hold	ler / Tax	Resident in	the rest	oective cour	ntries.
		Countr	y of Tax Resid	ency		ication Number	or	(7	Identification Type		If TIN is no the reason		able please C (as define	
First Applican	t / Guardian					-					Reason: A		В	С
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10. KYC D														
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Gross Annual Income [Please tick (✓)] Sole/First Applicant												
OR Net worth (Mandatory for Non-Individuals) ₹as on D D M M Y Y Y Y (Not older than 1 year)												
Second Applicant O Below 1 Lac O 1-5 Lacs C				s 0 10-25 Lacs 0) >25 Lacs-1 crore	○ >1 crore OR Net	rore OR Net worth ₹					
Third Applicant O Below 1 Lac O 1-5 Lacs O				s 0 10-25 Lacs 0	worth ₹							
Others [Please tick (✓)]												
For Individuals [Please tick (✓)]: ○ I am Politically Exposed Person (PEP) ○ I am Related to Politically Exposed Person (RPEP) ○ Not applicable												
Sole/First Applicant For Non-Individuals [Please tick ()] (Please attach mandatory Ultimate Beneficial Ownership (UBO) declaration form - Refer instruction no. IV(h)): (i) Foreign Exchange / Money Changer Services - O YES O NO; (ii) Gaming / Gambling / Lottery / Casino Services - O YES O NO; (iii) Money Lending / Pawning - O YES O NO												
Second Applicant O Politically Exposed Person (PEP) Related to Politically Exposed Person (RPEP) Not applicable												
Third Applicant O Politically Exposed Person (PEP) Related to Politically Exposed Person (RPEP) Not applicable												
11. NOMINATION NOMINEE (OPT-IN) Details or OPT-OUT Declaration is Mandatory to process the application. Please tick (/) from below Option A or Option B as appropriate. (Refer instruction VII).												
A) FOR NOMINA	ATION	OPI-IN: I/We	hereby nominat	e the undermentioned		the amount to my/o	our credit in event of my	//our death as follows:				
Name and addre Nominee(s) [Mandatory]) [Guardian PAN to be So		Relationship w Sole / First un holder		Name and address of Guardian* [Mandatory if Nomi- nee is Minor]	Signature of Nominee / Guardian	Guardian's Relation- ship with Nominee* [attach proof]	Allocation % to each nominee [Mandatory] (Aggregate should be 100%]				
				dd/mm/yyyy			Mother Father Legal Guardian					
				dd/mm/yyyy			Mother Father Legal Guardian					
				dd/mm/yyyy			☐ Mother ☐ Father ☐ Legal Guardian					
* Applicable in cas	* Applicable in case the Nominee is a Minor. (Also, please attach a copy of the minor's birth certificate)											
B) FOR NOMINATION OPT-OUT: (Please tick (/) if the unit holder does not wish to nominate anyone)												
involved in non	I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in non appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.											
SIGNATURE OF	UNIT	HOLDER(S) FOR	NOMINATIO	ON: [To be signed by a	all unit holders includin	ng joint holders, irre	spective of mode of ho	olding].				
Sole / 1	Ist Appli	cant / Guardian		2nd Ap	plicant		3rd Applican	t				
INVESTOR(S) DECLARATION & SIGNATURE(S): To the Trustee, ICICI Prudential Mutual Fund, I/We have read, understood and hereby agree to abide by the Scheme Information Document/Key Information Memorandum of the Scheme(s), Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) under FATCA & CRS provision of the Central Board of Direct Taxes notified Rules 114 F to 114H, as part of the Income-tax Rules, 1962. I/We apply for the units of the Fund and agree to abide by the terms, conditions, rules and regulations of the scheme and other statutory requirements of SEBI, AMFI, Prevention of Money Laundering Act, 2002 and such other regulations as may be applicable from time to time. I/We confirm to have understood the investment objectives, investment pattern, and risk factors applicable to Plans/Options under the Scheme(s). I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulations or any other applicable laws enacted by the Government of India or any Statutory Authority. I/We agree that in case my/our investment in the Scheme is equal to or more than 25% of the corpus of the plan, then ICICI Prudential Asset Management Co. Ltd. (the 'AMC'), has full right to refund the excess to me/us to bring my/our investment below 25%. I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs. 50,000 in a year. 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. I/We interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. If you do not wish to receive, please c												
Sole / 1st Applicant				2nd Ap	plicant		3rd Applicant					