



Common Application Form for Lump sum/Systematic Investments Plan

Application No. _____

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.

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|---|---------------------|--|--|
| BROKER CODE (ARN CODE)/ RIA/PMRN CODE# | SUB-BROKER ARN CODE | SUB-BROKER CODE (As allotted by ARN holder) | Employee Unique Identification No. (EUIN) |
| #By mentioning RIA/PMRN code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund. | | | |
| Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. XIII). – 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. | | | |
| SIGNATURE OF SOLE / FIRST APPLICANT | | SIGNATURE OF SECOND APPLICANT | |
| | | | |

TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY (Refer Instruction XII)

* In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invested. • 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.

Existing Folio No. _____

1. APPLICANT(S) DETAILS (Please refer to Instruction No. II (b) & IV) (Name should be as per the PAN)

SOLE / 1ST APPLICANT Mr. Ms. M/s _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* _____ KYC Id No.¥ _____ Enclosed (Please ✓)* KYC Acknowledgement Letter Date of Birth**
 _____ D D M M Y Y Y Y

LEI Number _____ (Legal Entity Identifier Number is Mandatory for Transaction value of INR 50 crore and above. See Instruction No. XVI)

NAME OF GUARDIAN (in case First/Sole applicant is minor)/CONTACT PERSON-DESIGNATION/PoA HOLDER (in case of Non-Individual Investors)
 Mr. Ms. _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* | KYC Proof Attached (Mandatory) | Relationship with Minor applicant: Natural guardian Court appointed guardian Date of Birth
 _____ KYC Id No.¥ _____ D D M M Y Y Y Y

2ND APPLICANT Mr. Ms. M/s _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* _____ KYC Id No.¥ _____ KYC Proof Attached (Mandatory) Date of Birth
 _____ D D M M Y Y Y Y

3RD APPLICANT Mr. Ms. M/s _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* _____ KYC Id No.¥ _____ KYC Proof Attached (Mandatory) Date of Birth
 _____ D D M M Y Y Y Y

If mandatory information left blank, the application is liable to be rejected. ¥ Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14 digit KYC Identification Number (KIN).

2. BANK ACCOUNT (PAY-OUT) DETAILS OF SOLE/FIRST APPLICANT (Please Refer to Instruction No. III)

Mandatory information – If left blank the application is liable to be rejected. (Mandatory to attach proof, in case the pay-out bank account is different from the source bank account.)

For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

MANDATORY Account Number _____ Account Type Savings Current NRE NRO FCNR
 Name & Branch of Bank _____ Branch City _____
 9 Digit MICR Code _____ 11 Digit IFSC _____ Enclosed (Please ✓): Bank Account Details Proof Provided.

3. INVESTMENT DETAILS (Refer Instruction No. IV) (For Plans & Sub-options please see key scheme features). Please mention scheme name below:

ICICI Prudential _____ Plan: _____ Option: _____

For investors investing in Income Distribution cum Capital Withdrawal (IDCW) option of the Scheme may note that the amounts can be distributed out of investors capital (Equalization Reserve), which is part of sale price that represents realized gains.

4. PAYMENT DETAILS

Mode of Payment Cheque DD Funds Transfer NEFT RTGS
 Investment Amount ₹ _____ A DD Charges (if applicable) ₹ _____ B Total Amount ₹ _____ A + B

Cheque / DD Number _____ Date D D M M Y Y Y Y

BANK DETAILS: Same as above [Please tick (✓) if yes] Different from above [Please tick (✓) if it is different from above and fill in the details below]

A/c Number _____ Account Type Savings Current NRE NRO FCNR

Name & Branch of Bank _____

Branch City _____ **Mandatory Enclosures** (Please tick (✓) if the first instalment is not through cheque) Cheque Copy Bank Statement Banker's Attestation _____

Applications with Third Party Cheques, prefunded instruments etc. and in circumstances as detailed in AMFI Circular No.135/BP/16/10-11 shall be processed in accordance with the said circular. Please read the instruction no. VI(e). Third Party Payment Declaration form is available in www.icicipruamc.com or ICICI Prudential Mutual Fund branch offices.



ACKNOWLEDGEMENT SLIP (Please Retain this Slip)

To be filled in by the Investor. Subject to realization of cheque and furnishing of Mandatory Information.

Application No. _____

Name of the Investor: _____

EXISTING FOLIO NO. _____

TOLL FREE NUMBER: 1800 222 999 (MTNL/BSNL) 1800 200 6666 (OTHERS) EMAIL: enquiry@icicipruamc.com WEBSITE: www.icicipruamc.com

Gross Annual Income [Please tick (✓)]

| | | | | | | | | | |
|-----------------------------|--|---|---|---|---|---|---|---|---|
| Sole/First Applicant | <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore OR Net worth (Mandatory for Non-Individuals) ₹ _____ as on <table border="1" style="display: inline-table; vertical-align: middle;"> <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 1 year) | D | D | M | M | Y | Y | Y | Y |
| D | D | M | M | Y | Y | Y | Y | | |
| Second Applicant | <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore OR Net worth ₹ _____ | | | | | | | | |
| Third Applicant | <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore OR Net worth ₹ _____ | | | | | | | | |

Others [Please tick (✓)]

| | |
|-----------------------------|---|
| Sole/First Applicant | For Individuals [Please tick (✓)]: <input type="radio"/> I am Politically Exposed Person (PEP) <input type="radio"/> I am Related to Politically Exposed Person (RPEP) <input type="radio"/> Not applicable 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 – <input type="radio"/> YES <input type="radio"/> NO; (ii) Gaming / Gambling / Lottery / Casino Services – <input type="radio"/> YES <input type="radio"/> NO; (iii) Money Lending / Pawning – <input type="radio"/> YES <input type="radio"/> NO |
| Second Applicant | <input type="radio"/> Politically Exposed Person (PEP) <input type="radio"/> Related to Politically Exposed Person (RPEP) <input type="radio"/> Not applicable |
| Third Applicant | <input type="radio"/> Politically Exposed Person (PEP) <input type="radio"/> Related to Politically Exposed Person (RPEP) <input type="radio"/> 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 NOMINATION OPT-IN: I/We hereby nominate the undermentioned nominee(s) to receive the amount to my/our credit in event of my/our death as follows:

| Name and address of Nominee(s) [Mandatory] | PAN of the Nominee [Guardian PAN to be quoted if Nominee is Minor] [Mandatory] | Relationship with Sole / First unit holder | Date of Birth* [Mandatory] | Name and address of Guardian* [Mandatory if Nominee is Minor] | Signature of Nominee / Guardian* | Guardian's Relationship with Nominee* [attach proof] | Allocation % to each nominee [Mandatory] (Aggregate should be 100%) |
|--|--|--|----------------------------|---|----------------------------------|---|---|
| | | | dd/mm/yyyy | | | <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian | |
| | | | dd/mm/yyyy | | | <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian | |
| | | | dd/mm/yyyy | | | <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian | |

* 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)

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 NOMINATION: [To be signed by all unit holders including joint holders, irrespective of mode of holding].

| | | |
|---------------------------------|---------------|---------------|
| Sole / 1st Applicant / Guardian | 2nd Applicant | 3rd Applicant |
|---------------------------------|---------------|---------------|

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 call on toll free no. **1800 222 999 (MTNL/BSNL)** or **1800 200 6666 (Others)**.

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|----------------------|---------------|---------------|
| Sole / 1st Applicant | 2nd Applicant | 3rd Applicant |
|----------------------|---------------|---------------|