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Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? Yes No

If 'No' please proceed for the signature of declaration

If'YES', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries

	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other, please specify)	If TIN is not available, please tick (\checkmark) the reason A, B, & C (as defired below)
First Applicant				Reason A B C
Second Applicant				Reason A B C
Third Applicant				Reason A B C

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Others (Please specify)

Reason A: The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents. Reason B: No TIN required. (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected). Reason C: Others; please state the reason thereof. [#]Please attach additional sheets if necessary

11 DECLARATION/CONSENT AND SIGNATURE

Having read and understood the contents of the Scheme Information Document of the Scheme(s), I/We hereby apply for the units of the scheme(s) and agree to abide by the terms, conditions, rules and regulation governing the scheme(s). 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 Act, Rules, Regulations, Notifications or Directions of the provisions of the income tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Government of India from time to time. I/We have understood the details of the scheme (s) & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme (s), legally belong to me/us. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the Mutual Fund, I/we hereby authorize the Mutual Fund, to redeem the funds invested in the Scheme(s), in Favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such other action with such funds that may be required by the law.

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 Scheme of various Mutual Funds from amongst which the Scheme is being recommended to me/us. For NRIs only : I/We confirm that I am/we are Non Residents of Indian nationality/origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident Ordinary/FCNR Account. I/We confirm that the details provided by me/us are true and correct. I declare that the information is to the best of my Knowledge, belief, accurate and complete. I agree to notify MOMF/AMC immediately in the event of information changes.

FATCA / CRS Certification:

Declaration for Individual: I hereby confirm that the information provided hereinabove is true, correct, and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required any intermediary or by domestic or overseas regulators/ tax authorities

Declaration for Non-Individual: I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me / us on this Form is true, correct, and complete. I / We also confirm that I /We have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same.

First / Sole Applicant / Guardian/POA	Second Applicant	Third Applicant
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ARN-183038 Assettmine Capital Pvt Ltd ARN- entioning RA code, We authorize you to share with the SEB Registered Investment Advisor the details of my/our transactions in the scheme(s) of Motilal Oswal Mutual Fund. stors applying under Direct Plan must mention "Direct" in ARN Column ont commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distrib ereby confirm that the EUN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice employee/relationship manager/sales person of the above distributor has not charged any advisory fees on this transaction. First Holder Second Holder Third Holder UNIT HOLDER INFORMATION Mr. Ms. Ms. Ms. ting Folio Number Existing UMRN Minor Mr. As s T SYSTEMATIC INVESTMENT PLAN DETAILS Plan Option Dividend SIP Installment SIP Booster SIP Max	Distributor ARN / RIA#		Distributor Name		Sub-Distribute	or ARN	Internal Sub-B Employee C	roker/ ode		EUIN
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Systematic Transfer Plan / Dividend Transfer Plan / Nav Appreciation Facility / Systematic Withdrawal Plan

Application No. Version: 24.12.2019

Distributor ARN / RIA#	Distributor Name	S	ub-Distrib	utor A	KIN		En	plo	yee C	roker/ ode		EU	IN	
ARN/RIA-		ARN-							,					
y mentioning RIA code, I/We authorize you to share with the SEBI Rey vestors applying under Direct Plan must mention " front commission shall be paid directly by the inve "I/We hereby confirm that the EUIN box has been intentionally left blank without any interaction or advice by the employee/relationship manager? ker or notwithstanding the advice of in-appropriateness, if any, p	Direct" in ARN Column stor to the AMFI registered distributor based on by me/us as this transaction is executed First / Sole Appli alse person of the above distributor/sub	the investo	or's assessn		arious	facto			g the s			by the ver of Hold	Attorr	
anager/sales person of the distributor/sub broker."	lame of Sole / First Holder									D	MM	Y	Y	Y
NV/PERN (mandatory)	Enclosed P.	AN/PEKRN P	roof	КҮС	Compli	cane								
SYSTEMATIC TRANSFER PLAN (STP/D	IP AND NAV APPRECIATIONS)		L											
Please arrange for STP with the following or	otions													
From Scheme							Plai	n						
Option 🗌 Growth / 🗌 Dividend-Payou	t / 🗌 Dividend - Reinvest													
To Scheme							Plai	n						
Option 🗌 Growth / 🗌 Dividend-Payou	t / 🗌 Dividend - Reinvest 🛛 Dividend Fr	equency (Ir	n case of Divi	dend opt	ion)									
(Min amount ₹ 500 - (Daily, Weekly (Min amount ₹ 1,500 for Quarterly)		(0)							n (Minim		,	
STP Frequency: Daily Weekly STP Amount : Monthly Quar STP Dates : 1 st 7 th 14 th STP Period: Start: D M *For Daily STP Minimum Instalments 12 For Other Frequency Minimum Instalments 6 End: D M		aily Divide 7 th 14 D D D D	nd ^h 21 st M M 7 M M	28 th Y Y Y Y			TP Date TP Peri	es :	1	st case of Start:	f Growth 14 ¹ D D D D D D D D D D D D D D D D D D		21 st [2 7 7
SYSTEMATIC WITHDRAWAL PLAN (SWP	(Please mention the PAN/PERN with	out which, t	his applicati	on form	will be	cons	sidered	l inco	mplet	e and is	liable to b	e rejec	ted.)	
Please arrange for SWP with the following o														
Rs. (in figures) SWP Frequency: Weekly Frequency: Weekly Frequency: WP Period: Start: M V Y Y	Rs. (in words) portnightly Monthly End: M	Annual	y SWP D	ate: [1 st]7 th		14 th	21 st	□ 28 ^{tt}			
From Scheme														
Plan Dividend Frequency (In case of Dividend option			inimum No	of SWP		Imer	nts 12	`			0	ily)		
Dividend Frequency (in case of Dividend option			inimum No inimum No							ts (quar	terly)			
terms, conditions, rules and regulation governin not designed for the purpose of the contraven Laws or any other applicable laws enacted by by any rebate or gifts, directly or indirectly in m is not completed by me / us to the satisfaction NAV prevailing on the date of such redemption and u The ARN holder has disclosed to me/us all the amongst which the Scheme is being recommended	e Non Residents of Indian nationality / origin and y / FCNR account.	e amount in or Direction e have unde nds invested utual Fund, be required b any other r	vested in the s fo the pro- erstood the o l in the Sch to redeem the by the Law. node), payal	le Schem ovisions of details of eme(s), le ne funds ble to hir	ne(s) is of the the So egally t investe n for th	thro Incon chem pelon d in ne di	ugh lei ne Tax e(s) an g to m the Sch fferent	gitima Act, d I / e / u neme comp	ate so Anti M We ha s. In th (s), in peting	urces on Money La ave not r he event favour of Schemes	ly and do undering received n "Know Yo the appli s of variou	es not Laws, or have ur Cus cant, at us Mute	involv Anti (beer tomer t the a ual Fu	ve a Corru n inc " pro appli inds
First / Sole Applicant / Guardian	Second Applicant		Third	Applica	nt					F	OA Holde	er		
			_	_	_	_			_	_	_	_	_	-
ACKNOWLEDGMENT SLIP	I							 ation						

🗌 Systematic Transfer Plan 📋 Dividend Transfer Plan 🗌 Nav Appreciation Facility 🗌 Systematic Withdrawal Plan