

6. SERVICES OPTIONS (SAVE PAPER, SAVE TREES) [Please tick (✓)] (refer instruction 10)

- HDFCFMOnline & HDFCFMMobile** - I / We would like to register for my/our HDFCFM Personal Identification Number (HPIN) to transact online
- i) Mandatory information to be provided:**
a) Email address:
 (if the address given herein is different from the email address under section 3(a), the email address under section 6(i) will be considered during registration for HPIN).
b) Mother's maiden name:
 I / We have read and understood the terms and conditions and confirm that I / we shall be bound by them (Terms & Conditions available in the eServices booklet as well as on our website)
- ii) Docs:** I / We wish to receive account statements, newsletters, annual reports and other statutory information documents by email in lieu of physical documents (Email address is mandatory).
- iii) Alerts:** I / We would like to receive SMS updates (Mobile number in section 3(a) is mandatory).

7. INVESTMENT AND PAYMENT DETAILS (refer instruction 2, 6 & 7) (Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.) Please attach a separate Cheque/ Demand Draft for each Scheme.

		SCHEME 1	SCHEME 2	SCHEME 3
Name of the Scheme	} Refer Instruction No. 2			
Plan/ Option				
Payout Option				
Cheque / DD No.				
Cheque / DD Date				
Amount of Cheque/DD/RTGS in figures (Rs.) (i)				
DD charges, if any, in figures (Rs.) (ii)				
Total Amount (i) + (ii)	in figures (Rs.)			
	in words			
Bank Account No. (For Cheque Only)				
Drawn on Bank/Branch Name				
Account Type [Please (✓)]		<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> OTHERS _____ (please specify)	<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> OTHERS _____ (please specify)	<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> OTHERS _____ (please specify)

8. NOMINATION (refer instruction 12)

I/We _____ (Unit holder 1) _____, _____ (Unit holder 2) _____ and _____ (Unit holder 3) _____ *do hereby nominate the person(s) more particularly described hereunder/ and*/ cancel the nomination made by me/ us on the _____ day of _____ in respect of the Units under Folio No. _____ (* strike out which is not applicable)

Name and Address of Nominee(s)	Date of Birth	Name and Address of Guardian (to be furnished in case the Nominee is a minor)	Signature of Guardian	Proportion* (%) by which the units will be shared by each Nominee (should aggregate to 100%)
Nominee 1				
Nominee 2				
Nominee 3				

9. DOCUMENTS ENCLOSED (Please ✓)

- Memorandum & Articles of Association Trust Deed Bye-Laws Partnership Deed
 Resolution / Authorisation to invest PAN Proof KYC Compliance Status Proof
 Power of Attorney Certificate of Incorporation LLP Agreement
 List of Authorised Signatories with Specimen Signature(s)

APPLICATIONS ENCLOSED (Please ✓)

- SIP Enrolment Form (For Investments through Post Dated Cheques)
 SIP Enrolment Form (For Investments through Auto Debit/ECS/ Standing Instruction)
 STP Enrolment Form

10. DECLARATION & SIGNATURE/S (refer instruction 11)

I / We have read and understood the terms and contents of the Document(s) of the respective Scheme(s) and Statement of Additional Information of HDFC Mutual Fund. I / We hereby apply to the Trustee of HDFC Mutual Fund for allotment of Units of the Scheme(s) of HDFC Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I / We have understood the details of the Scheme(s) and I / we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. **The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.** I/We hereby declare that I/We am/are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We declare that the information given in this application form is correct, complete and truly stated.

Applicable to 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 have been remitted from abroad through normal banking channels or from funds in my / our Non-Resident External / Ordinary Account / FCNR Account.

- Please (✓) Yes No
 If Yes, (✓) Repatriation basis
 Non-repatriation basis

DD	MM	YYYY

SIGNATURE(S)	First/Sole Applicant / Guardian	Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.
	Second Applicant	
	Third Applicant	

Particulars	SCHEME 1	SCHEME 2	SCHEME 3
Scheme Name / Plan / Option / Sub-option / Payout Option			
Cheque / DD No. / Date			
Drawn on (Name of Bank and Branch)			
Amount in figures (Rs.)			