

To be submitted mandatorily: 1. Your **FATCA** (Foreign Account Tax Compliance Act) Details (if not already submitted) and 2. **Ultimate Beneficial Owner (UBO)** information (for non-individuals only) using the attached forms.

Serial No: EQ

Channel Partner / Agent Information

Agent's Name and ARN ARN-0906	Sub Broker ARN code	Sub Agent Code	EUIIN* <small>(Employee Unique Identification Number)</small> E 0 3 1 0 8 7
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Transaction charges For Rs. 10,000 and above: <input type="checkbox"/> Existing Investor-Rs.100 <input type="checkbox"/> New Investor-Rs.150
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*** Declaration for "Execution only" transaction (only where EUIIN box is left blank)** I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Upfront commission shall be paid directly by the investor to the AMFI-registered distributors based on the investors' assessment of various factors including services rendered by the distributor.

First/Sole Applicant/ Guardian	Second Applicant	Third Applicant
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1. Existing Investor Information (Please fill in your Folio No. and then proceed to Section 3)
Please note that applicant details and mode of holding will be as per existing Folio Number. Folio No

2. New Investor Information (refer instruction 2)

Name of First/Sole Applicant	Permanent Account Number (PAN)	<input type="checkbox"/> KYC Proof attached (Mandatory)								
Name of Guardian (in case of First / Sole Applicant is a Minor/Contact Person-Designation (in case of non-individual Investors) / POA Holder Name)	Permanent Account Number (PAN)	Date of Birth <table border="1" style="width: 100%; text-align: center;"><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>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			
		<input type="checkbox"/> KYC Proof attached (Mandatory)								
		Relationship								

Go Green Services (Save The Future): Please provide Contact Details of First / Sole Applicant

E-Mail	STD Code	Telephone	Mobile
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I/We would like to receive Account Statements, Annual Reports and other information by email and SMS updates on mobile Yes No

Note: Where the investor has not opted for any option or has opted for both options the application will be processed as per the default option, i.e., receive the account statement, annual report and other correspondence by email and receive SMS updates on mobile.

Mode of Holding [Please (✓)] Single Joint Anyone or Survivor

Address of First / Sole Applicant

TOWN	CITY/DISTRICT	STATE	PIN CODE
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Overseas Address (in case of NRIs/FIIs) (Mandatory)

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Name of Second Applicant	Permanent Account Number (PAN)	<input type="checkbox"/> KYC Proof attached (Mandatory)								
Name of Third Applicant	Permanent Account Number (PAN)	Date of Birth <table border="1" style="width: 100%; text-align: center;"><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>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			
		<input type="checkbox"/> KYC Proof attached (Mandatory)								
		Date of Birth <table border="1" style="width: 100%; text-align: center;"><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>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			

3. KYC details (Mandatory) (refer instruction 3) Individual Non-Individual (Please attach mandatory Ultimate Beneficial Ownership (UBO) declaration form)

3a. Status of First/Sole Applicant [Please (✓)] Listed Company Unlisted Company Individual Minor through guardian HUF
 Partnership Society/Club Company Body Corporate Trust Mutual Fund FPI
 NRI-Repatriable NRI-Non-Repatriable FII/Sub account of FII Fund of Funds in India QFI Others_____ (please specify)

3b. Occupation Details [Please (✓)] (To be filled only if the applicant is an individual)
First Applicant Private Sector Service Public Sector Service Government Service Business Professional Agriculturist
 Retired Housewife Student Forex Dealer Others_____ (please specify)
Second Applicant Private Sector Service Public Sector Service Government Service Business Professional Agriculturist
 Retired Housewife Student Forex Dealer Others_____ (please specify)
Third Applicant Private Sector Service Public Sector Service Government Service Business Professional Agriculturist
 Retired Housewife Student Forex Dealer Others_____ (please specify)

3c. Gross Annual Income (in ₹) [Please (✓)]
First Applicant Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs > 25 Lacs - 1 Crore > 1 Crore (or) Net-worth (Mandatory for non-individuals) ₹ _____ as on

D	D	M	M	Y	Y	Y	Y
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 (Not older than one year)
Second Applicant Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs > 25 Lacs - 1 Crore > 1 Crore (or) Net-worth _____
Third Applicant Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs > 25 Lacs - 1 Crore > 1 Crore (or) Net-worth _____

3d. 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 Gaming/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
 Sundaram Asset Management Company Limited, II Floor, 46 Whites Road, Chennai - 600 014. Toll Free 1800 103 7237 (India) +91 44 49057300 (NRI)

Serial No: EQ
 ISC's Signature & Stamp
 Please Note: All Purchases are subject to realisation of cheques / demand drafts.

Received From Mr./Mrs./Ms.
 Communication in connection with the application should be addressed to the Registrar **Sundaram BNP Paribas Fund Services Limited**, Registrar and Transfer Agents, Unit: Sundaram Mutual Fund, Central Processing Center, RR Towers, II III Floor, Thiru Vi Ka Industrial Estate, Guindy, Chennai 600 032. Toll Free 1800 103 7237 (India) +91 44 49057300 (NRI).

4. Bank Account Details of First/Sole Applicant (as per SEBI Regulations it is mandatory) (refer instruction 4)

Account No													
Name of the Bank							Branch						
Branch Address							Bank City (redemption will be payable at this location)						
Cheque MICR No							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.....					
RTGS / NEFT / IFSC Code							*If the payment is by DD or source of fund is not clear on the Cheque leaf, please provide a copy of FIRC.						

5. Mode of payment of redemption/dividend proceeds via Direct credit/NEFT (refer instruction 5). Please tick (✓)

I/We wish to receive redemption/dividend proceeds directly into my/our bank account via Direct Credit/NEFT facility

I/We wish to receive the redemption/dividend proceeds (if any) by way of a cheque/demand draft/ Warrant

Direct Credit is now available with: Axis Bank, BNP Paribas Bank, Citibank, Deutsche Bank, HDFC Bank, HSBC Bank, ICICI Bank, IDBI Bank, IndusInd Bank, ING Vysya, Kotak Mahindra Bank, Royal Bank of Scotland, SBI, Standard Chartered Bank, YES Bank. If your bank falls in this list your Redemption/Dividend proceeds will be directly credited to your account irrespective of the option ticked.

6. Payment Details: Please issue a separate cheque/Demand Draft favouring the scheme you wish to invest (refer instruction 6)

Scheme Name	Plan	Option	Amount Invested (less DD charges)	Net Amount Paid	Payment Details	
					Cheque/DD Number	Bank/Branch
	<input type="checkbox"/> Regular <input type="checkbox"/> Direct					
	<input type="checkbox"/> Regular <input type="checkbox"/> Direct					
	<input type="checkbox"/> Regular <input type="checkbox"/> Direct					

Incase of third party payment (refer instruction 6): Please download (www.sundarammutual.com) and attach the third party declaration form

DEMAT Account Details (refer instruction 6)

National Securities Depository Ltd. Depository Participant Name

Central Depository Services (India) Ltd. DP ID Number _____ Beneficiary Account Number _____

Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the application form.

7. Please indicate details of your SIP (skip this section if you wish to make a one-time investment) Mode of SIP Auto Debit (also submit SIP Auto Debit form) Post-dated cheques

If you opt for SIP through post dated cheques, please indicate

First SIP Cheque No _____ Last SIP Cheque No _____

Each SIP Amount Rs _____ SIP Period

SIP Frequency Weekly (Minimum amount Rs 1000 Every Wednesday, Minimum No of installments 5)
 Monthly (Minimum amount Rs 250 Minimum No of installments 20)
 Quarterly (Minimum amount Rs 750 Minimum No of installments 7)

SIP Starting _____ SIP Ending _____ OR Till further notice*

SIP Date for Monthly/Quarterly frequency only 1 7 14 20 25

(*The date may be taken as 31/12/2031 in case the bank needs to input a specific date in their system) (refer Guide to investing through SIP)

8. Nominee (available only for individuals) (refer instruction 8) I wish to nominate the following person(s)

1st Nominee Name:..... Address:..... Proportion (%)* in which units will be shared by first nominee.....% If nominee is a minor: Date of birth:..... Relationship:..... Name of Guardian:..... Address of Guardian:.....	2nd Nominee Name:..... Address:..... Proportion (%)* in which units will be shared by second nominee.....% If nominee is a minor: Date of birth:..... Relationship:..... Name of Guardian:..... Address of Guardian:.....	3rd Nominee Name:..... Address:..... Proportion (%)* in which units will be shared by third nominee.....% If nominee is a minor: Date of birth:..... Relationship:..... Name of Guardian:..... Address of Guardian:.....
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* Proportion (%) in which units will be shared by each nominee should aggregate to 100%

I do not wish to choose a nominee. Signature of investor(s)

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

9. Signature (refer instruction 9)

Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN exempt category of investors). 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.

Applicable to NRIs only: Please (✓) 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 on a Repatriation Basis Non-Repatriation Basis.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities, other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

First / Sole Applicant / Guardian
Second Applicant
Third Applicant

Particulars			
Scheme Name / Plan / Option / Sub-option	Cheque/DD/Payment Instrument Number/Date	Drawn on (Name of Bank & Branch)	Amount in figures (₹) & Amount in words

FATCA declaration Form for Individual Applicants / Investors

Annexure to Common Application Form No.:.....for:

First/Sole Applicant Second Applicant Third Applicant Guardian Power of Attorney Holder

*The below information is required for all applicant(s), guardian(s), Power of Attorney .Please tick above box as applicable and submit a separate form(s) for each category

Details under FATCA / Foreign tax laws (see instructions)

1. Country of birth.....
2. Country of Citizenship / Nationality.....
3. Are you a resident of any country other than India for tax purposes?

If no, please tick here.

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

Country of Tax Residency	Tax Reference Number

I hereby declare that all the particulars given herein are true, correct and complete to the best of my knowledge and belief. I further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my not intimating/delay in intimating any changes to the above particulars. I hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me / us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities, other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application. I/We agree to notify Sundaram Asset Management Company Limited within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify Sundaram Asset Management Company Limited in respect of any false, misleading, inaccurate and incomplete information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

Name	Signature	Date								
		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			

Instructions

Details under FATCA/Foreign Tax Laws: Tax Regulations require us to collect information about each investor’s tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in information provided, please ensure you advise us promptly, i.e., within 30 days.

If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

Applicants are required to mandatorily fill/sign off "FATCA declaration form". Applications without this information / declaration being filled/signed off will be deemed as incomplete and are liable to be rejected. Investors are requested to note that the contents of the information to be provided / declaration in the application form may undergo a change on receipt of communication / guidelines from AMFI/SEBI.

FATCA declaration Form for Non-Individual Applicants/ Investors

Annexure to Common Application Form No.:.....

Details under FATCA / Foreign tax laws (see instructions)

Please indicate all countries in which the entity/organization is a resident for tax purposes and the associated Tax ID Number below.

Country	Tax ID Number

AND

Please tick the relevant box below, even if Country of Tax Residency is India

Form W8 BEN-E / specified declaration (Enclosed)

OR

Unable to confirm FATCA status *[We will contact you shortly to confirm your FATCA Status and obtain required supporting documents]*

^Where no box is ticked, the second statement will be taken as the default implying that the applicant/ investor currently is unable to confirm FATCA status and will confirm the same in future.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my knowledge and belief. I/We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities, other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

I/We agree to notify Sundaram Asset Management Company Limited within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify Sundaram Asset Management Company Limited in respect of any false, misleading, inaccurate and incomplete information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

Name & PAN of the Organization	Name of the Authorized Signatory
Signature	Date

Instructions

Details under FATCA/Foreign Tax Laws: Tax Regulations require us to collect information about each investor's tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any **change in information provided, please ensure you advise us** promptly. Form W8 BEN-E / Specified declaration (enclosed) would be required to comply with requirements of Foreign Account Tax Compliance provisions (commonly known as FATCA) as contained in the US Hire Act 2010. If you are classified as a passive Non-Financial Foreign Entity (NFFE) for FATCA purposes, while completing the "Declaration for Ultimate beneficial Ownership (UBO)" form please provide details of all the person(s) (excluding those having tax residency in India) having controlling interest in your entity in the "foreign country information" column along with Country of birth, Country of citizenship/Nationality, Country of Tax Residency and Foreign Tax Reference Number for FATCA purposes. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

Applicants are required to mandatorily fill/sign off "FATCA declaration form". Applications without this information / declaration being filled/signed off will be deemed as incomplete and are liable to be rejected. Investors are requested to note that the contents of the information to be provided / declaration in the application form may undergo a change on receipt of communication / guidelines from AMFI/SEBI.

Declaration for Ultimate Beneficial Ownership [UBO] (Mandatory for Non-individual Applicant/Investor)

To be filled in BLOCK LETTERS (Please strike off section(s) that is/are not applicable)

Part I: Applicant/Investor details:

Investor Name:

Permanent Account Number (PAN)

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Part II: Listed Company / its subsidiary company [Part III Details not applicable if Part II is completed]

- (i) I/ We hereby declare that -
 - the applicant company is listed on a recognized stock exchange in India
 - the applicant company is a majority-owned subsidiary of a Listed Company
 - the applicant company is controlled by a Listed Company
 - the applicant company is controlled by a majority-owned subsidiary of a listed company

(ii) Details of Listed Company

Stock Exchange on which listed.....Security ISIN.....

Note: The details of immediate listed holding company to be provided in case the applicant/investor is an unlisted subsidiary company or is controlled by a majority-owned subsidiary of a listed company.

Part III: Non-individuals other than Listed Company / its subsidiary company (Not to be filled if Part II is applicable)

- (i) Category [✓ applicable category]:

<input type="checkbox"/> Unlisted Company	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Limited Liability Partnership
<input type="checkbox"/> Unincorporated association / body of individuals	<input type="checkbox"/> Public Charitable Trust	<input type="checkbox"/> Religious Trust
<input type="checkbox"/> Private Trust	<input type="checkbox"/> Trust created by a Will	<input type="checkbox"/> Others.....[please specify]
- (ii) Details of Ultimate Beneficial Owners:
(In case the space provided is insufficient, please provide the information by attaching separate declaration forms)

Sr. No	Name and address of UBO (Mandatory)	PAN or any other valid ID proof for those where PAN is not applicable# [Mandatory]	UBO Code [Mandatory] [Refer instruction 2]	Position / Designation [to be provided wherever applicable] [Refer instruction 3]	Applicable Period [Refer instruction 4]	KYC (Yes/No) [Please attach KYC acknowledgement copy] [Refer instruction 5]	Foreign Country Information (only for persons with tax residency in a Country other than India) [Refer instruction 6]
							Country of birth:..... Country of Nationality / Citizenship:..... Country of Tax residency:..... Foreign TRN*:.....
							Country of birth:..... Country of Nationality / Citizenship:..... Country of Tax residency:..... Foreign TRN*:.....
							Country of birth:..... Country of Nationality / Citizenship:..... Country of Tax residency:..... Foreign TRN*:.....

#Attached documents should be self-certified by the UBO and certified by the Applicant/Investor Authorized Signatory/ies. *Tax Reference Number

Part IV: Declaration

I/We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief. I/We understand that Sundaram Asset Management Company Limited believing this statement to be true, will rely on it and act on it. In the event any of the above information is/are found to be false/incorrect and/or the declaration is not provided, then the AMC/Trustee/Mutual Fund shall reserve the right to reverse the allotment of units and/or reject the application and/or terminate the folio and the AMC/Mutual Fund/Trustee shall not be liable for the consequences arising out of such reversal or rejection or termination, as the case may be. I/We also undertake to keep AMC/Mutual Fund informed in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required by the Mutual AMC/Fund. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities, other investigation agencies or to any SEBI registered Intermediaries without any obligation of advising me/us of the same. I/We agree to notify Sundaram Asset Management Company Limited within 30 days of any change in my/our status as a U.S. person for the purposes of U.S. federal income tax. I/We agree to indemnify Sundaram Asset Management Company Limited in respect of any false, misleading, inaccurate and incomplete information regarding my/our "U.S. person" status for U.S. federal income tax purposes.

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Date

D	D	M	M	Y	Y	Y	Y
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Place

Channel Partner / Agent Information

Agent's Name and ARN ARN-0906	Sub Broker ARN code	Sub Agent Code	EUIN* <small>(Employee Unique Identification Number)</small> E 0 3 1 0 8 7
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Serial No: EQ

Transaction charges For Rs. 10,000 and above: <input type="checkbox"/> Existing Investor-Rs.100 <input type="checkbox"/> New Investor-Rs.150
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* Declaration for "Execution only" transaction (only where EUIN box is left blank) I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

First/Sole Applicant/ Guardian	Second Applicant	Third Applicant
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Upfront commission shall be paid directly by the investor to the AMFI-registered distributors based on the investors' assessment of various factors including services rendered by the distributor.

Existing Investor Information (Please fill in your Folio No.) Please note that applicant details and mode of holding will be as per existing Folio Number. If you want to change your bank details for your ongoing SIP, all you have to do is (1) tick the box (2) fill in the folio number (3) fill the SIP Auto Debit details and (4) sign; highlighted by the symbol ▲

▲ Folio No																			
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Name of First/Sole Applicant

Name of First/Sole Applicant															Permanent Account Number (PAN)				KYC completed <input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Birth	
																			D D M M Y Y Y Y			

Name of Guardian (in case of First / Sole Applicant is a Minor) / Contact Person – Designation (in case of non-individual Investors)

Name of Guardian															Permanent Account Number (PAN)		KYC completed <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name of Second Applicant

Name of Second Applicant															Permanent Account Number (PAN)		KYC completed <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name of Third Applicant

Name of Third Applicant															Permanent Account Number (PAN)		KYC completed <input type="checkbox"/> Yes <input type="checkbox"/> No	

DEMAT Account Details (Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the application form)

National Securities Depository Ltd.
 Central Depository Services (India) Ltd.
Depository Participant Name:

DP ID Number

Beneficiary Account Number

▲ SIP Auto Debit details

Fund Name

Plan Regular Direct **Option** Dividend Payout Dividend Re-Investment
 Dividend Sweep Growth

Each SIP Amount Rs. _____

SIP Frequency Weekly every Wednesday (For Minimum amount of Rs.1000, Minimum No. of installments is 5)
 Monthly (For Minimum amount of Rs.250, minimum No. of installments is 20)
 Quarterly (For Minimum amount of Rs.750, minimum No. of installments is 7)

SIP Period **SIP Starting** **SIP Ending** OR Till further notice*
D D M M Y Y D D M M Y Y 3 1 1 2 0 3 1

(*The date may be taken as 31/12/2031 in case the bank needs to input a specific date in their system) (refer Guide to investing through SIP)

SIP Date for Monthly/Quarterly frequency only 1 7 14 20 25

SIP SIP Top-up (Optional) (please ✓ to avail this facility)

Top-up Top-up amount Rs. _____ (The amount should be in multiples of Rs. 500 only).

Feature SIP Top-up Frequency: Half-yearly Yearly (Quarterly SIP offers top-up frequency at yearly intervals only)

If Micro SIP, please tick Yes (Micro SIP: Upto Rs 50,000 per person in any rolling 12-month period)

If Micro SIP, supporting document/identification number: _____

Bank Account Details

Account Number

Name of Account Holder (as in bank account)

Name of the Bank

Branch & City

Branch Address

Cheque MICR No

Account Type [Please (✓)] Savings Current NRE NRO FCNR

Others.....

Authorisation & Signature of the Bank Account Holder

To, The Branch Manager,.....(Name of Bank) Bank Account Number

This is to inform that I/We have registered for the RBI's Electronic Clearing Service (Debit Clearing) / Direct Credit / Standing Instruction and that my payment towards my investment in Sundaram Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorise the representative carrying this ECS (Debit Clearing) / Direct Debit / Standing Instruction mandate Form to get it verified & executed.

I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in ECS (Debit Clearing) / Direct Debit / Standing Instruction. If the transaction is delayed or not effected at all of reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform Sundaram Mutual Fund / Sundaram Asset Management Company Limited, about any changes in my bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant
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Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN exempt category of investors). 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.

Applicable to NRIs only: Please (✓) 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 on a Repatriation Basis Non-Repatriation Basis.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

▲ Signature

First / Sole Applicant / Guardian

Second Applicant

Third Applicant

For change of bank to ongoing SIP please fill in the SIP Auto Debit details

PIN Agreement & Email ID To Transact Online & Receive E-Mail Account Statement

Please read the terms & conditions of PIN on this page before signing the application form. PIN will be sent to all new investors along with account statement

Existing investors: As a one-time exercise, please fill this form and call Toll Free 1800 103 7237 to enable our service team pick up the form

A Personal Identification Number – PIN – is a must for effective and speedy transacting online in a mutual fund's products. Do you have one? If you wish to receive a PIN, you can read the PIN agreement attached to this communication and sign at the designated place. On receipt of the same, a PIN will be sent to you at the postal address noted in our records. The PIN will help an investor use the Invest Online facility at www.sundarammutual.com to buy, sell and switch units, to name a few services. The PIN is a vital requirement to do online investment transactions in a safe, secure and convenient way.

We also offer the facility of sending Account Statements by email. In case you wish to do so, please furnish your Email ID and sign at the appropriate place in the attached document.

We do encourage you to use a PIN to execute your transactions online and sign up for sending the Account Statements by email as by increasing the share of paperless transactions in the economy you will be making a vital contribution to a cleaner and healthier environment.

Investor Information	Agreement Date
Name	
Folio No	Mobile Number
E-Mail Address	Date D D M M Y Y Y Y

Agreement for Personal Identification Number – PIN For detailed PIN Agreement, visit: www.sundarammutual.com

This Agreement between Sundaram Mutual Fund having its office at 46 Whites Road, II Floor, Chennai - 600014 (hereinafter referred to as "the Fund") and the investor (whose details are available in this agreement form hereinafter referred to as "the unit holder") (hereinafter referred to as the Agreement). The date of this agreement is indicated in the panel on Investor Information in this form. WITNESSTH:

WHEREAS: The Fund and the Unit holder have entered into a Unit Purchase Agreement, whereby the Unit holder has agreed to purchase units in the Fund;

AND WHEREAS: The Fund, through its Registrar and Transfer Agent (hereinafter referred to as "Registrar") offers the facility of a Personal Identification Number (hereinafter referred to as "PIN") for convenience of unit holders

AND WHEREAS: The unit holder has indicated to the Fund that he/she/it wishes to avail of the PIN facility offered by the Fund, subject to the terms and conditions stated in the application form and has for this purpose, indicated to Fund the name of his/her/its Bank and Branch Account Number;

AND WHEREAS: The Fund is willing to extend the PIN facility to the Unit holder on the terms and conditions as set out herein;

Now THEREFORE, in consideration of the mutual understanding as set forth in this Agreement, the parties hereto have agreed to the following terms and conditions:

The PIN granted to the Unit holder pursuant to this Agreement shall be communicated to the Unit holder by a reliable courier and entirely at the risk of the Unit holder.

The following shall be the mode of operation of the PIN facility:

- a If the unit holder is a company, an institution/ trust or body corporate, the authorised signatories may designate any individual as designated person and his personal details should be submitted to the Registrar
- b If the mode of payment is the first holder only, PIN facility will be made available to the first holder
- c If the mode of operation is joint, all the unit holders may designate only one of them to operate this facility. In such case, the personal details of the such a person shall be submitted to the registrar
- d If the Unit holder is a minor, then the Natural Guardian or the Guardian appointed by the Court alone shall be eligible to operate the PIN facility. In such a case the personal details of the Guardian shall be submitted to the Registrar.

The Unit holder may access the following services through the Internet, using the PIN facility: (a) purchase including switch in (b) redemption including switchout (c) Access to NAV Information (d) Access to balance Information (e) Ability to print Account Statements in a client-independent standard format (f) Links to the other Internet / web-sites of the Fund (g) Ability to email service requests to the Transfer Agent.

The Fund will take best efforts to keep the Fund's web-site updated on a daily basis so as to provide most current information to unit holders. However, the Unit holder agrees that because of communications issues, it is possible that the site may not be current on occasions. The Unit holder also agrees that the look and feel of the Web screen and outputs therefrom may differ based on the nature of the software used by the Unit holder to browse the site. The Fund agrees to take best efforts to protect security of the data placed on the Internet and has for this purpose, required the web service provider engaged by the Registrar to sign a confidentiality agreement with the Registrar specifying confidentiality of the data and to restrict external access to the database on the Internet. The Registrar shall ask the Unit holder for his / her / its name and Folio Number, address or such particulars to ensure the authenticity before accepting instructions on behalf of Fund.

The Registrar may, in the interest of the Unit holder, request a fax confirmation on the instructions received and shall not act until the said fax confirmation and additional confirmation is received

from the Unit holder. The Unit holder shall be responsible for safekeeping of the PIN and shall not disclose his / her / its PIN to any person and shall take all possible care to prevent discovery of the PIN by any person. The Unit holder shall not use his / her / its PIN after the disclosure of the same to any third party.

In the event of accidental disclosure of the PIN to any third party or if the unit holder forgets his password, the Fund may at the request of the unit holder and at its absolute discretion issue to the Unit holder a new PIN on these terms and conditions or under such terms and conditions, as the Fund may deem fit. The Unit holder shall be fully liable to the Fund for every transaction entered into using the PIN facility, whether with or without the knowledge of the Unit holder. The Unit holder hereby releases the Fund and the Registrar from any liability whatsoever against misuse of the PIN. Further, neither the Fund nor the Registrar shall be liable at all for any misuse if any, of any data placed on the Internet, by third parties "hacking" or unauthorisedly accessing the server. The Unit holder shall at all times indemnify the Fund, its officers, employees, successors and assigns from and against all actions, proceedings, claims and demands whatsoever for or on account of or in relation to any unauthorised use of the PIN and from and against all damages, costs, charges and expenses in respect thereof, unless the same is caused by gross negligence, bad faith or wilful default on the part of the Fund.

The Unit holder acknowledges and agrees that Sundaram Investment Manager/Fund and or its Registrars or the Service Providers does not guarantee or warrant that Unit holder will not experience any downtime or disruptions in its use of the Service. In the event of any such downtime or disruption, the Investment Manager/Fund or its Registrar or its service providers shall use commercially reasonable efforts to reinstate accessibility and operability. Investment Manager/Fund or its Registrar or its service providers may restrict, suspend, or terminate investor's access to and use of the Service at any time, without notice or liability. The Unit holder agrees that its right to use the Service is non-exclusive, revocable, non-transferable, and non-sublicense able.

The Unit holder agrees to be bound by any terms of use, disclosures, or disclaimers displayed by the Investment Manager/Fund/ Registrar and its service providers and any that Unit holder may affirmatively click through to accept. The investor's use of the Services shall be subject to the terms and conditions of any applicable agreements between Registrar, Service Providers and the Investment Manager/Fund and/or investor.

Unit holder shall not: (A) access or use the Service for any purpose inconsistent with the substance and terms of this Agreement; (B) introduce into the Service any code, virus, or mechanism that would impair the Service or Investment Manager's/Fund system, computers or software; (C) use the Service to gain unauthorized access to any system or database; (D) sublicense or otherwise transfer or make available Investor's access to the Service to any third party that is not an Authorized Person (E) disclose to any third party non-public information relating to the content or operation of the Service, which information is confidential and proprietary to the Investment Manager/Fund; or (F) remove or obscure any of Investment Manager's/Fund or Registrars or any Service Provider's trademarks, service marks, or markings of copyright or patent rights contained in the Service. In the case of any disputes, the matter will be referred to arbitration at the first instance and settled through arbitration proceedings as per the rules of the Indian Arbitration and Conciliation Act, 1996. The Place of Arbitration will be at Chennai. The Courts in Chennai shall have jurisdiction over all disputes arising out of or in respect of this Agreement.

In Witness Whereof, the parties to this Agreement have caused these presents to be executed as of the day and year first above written.

Signature			Signed for and on behalf of Fund
First Applicant	Second applicant	Third Applicant	