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**Corporate Office:** 6th Floor, Sea Breeze Building, Appasaheb Marathe Marg, Prabhadevi, Mumbai - 400 025. | Tel: +91 22 6295 5000
Whatsapp message: +91 9920 21 22 23 | E-mail: help.investor@quant.in | help.distributor@quant.in | www.quantmutual.com

# COMMON APPLICATION FORM

(Use this form if One Time Bank Mandate Form is registered in the folio) To be filled in capital letters and in blue / black ink only. **APP No.**

| Name & Broker Code / ARN / RIA Code | Sub Broker / Agent ARN Code | Sub Agent Code | EUIN* | Internal Code for AMC | ISC Date Time Stamp Reference No. |
|---|---|---|---|---|---|
| ARN-95070 | | | E-101834 | | |

**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.**

◯ 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 in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

| Signature of 1st Applicant / Guardian / Authorised Signatory /PoA/Karta | Signature of 2nd Applicant / Guardian / Authorised Signatory /PoA | Signature of 3rd Applicant / Guardian / Authorised Signatory /PoA |
|---|---|---|
| | | |

Please ✓ Lumpsum Investment ◯ Micro Application ◯ SIP Application ◯

## 1. EXISTING UNIT HOLDER INFORMATION [Please fill in your Folio Number, KIN, Section 2 & proceed to Section 7 - Investment Details]

**Folio No.** | **Optional CKYC Identification No. (KIN)**

**1st SOLE APPLICANT** Mr. / Ms. /M/s. **PAN**
(Please write the name as per PAN Card)

**(LEI Code for entities**

**CKYC ID No. (KIN)**

Pls indicate if US Person or a resident for tax purpose / Resident of Canada
◯ Yes ◯ No$ ($Default if not ✓)

**GUARDIAN** (In case 1st Applicant is a Minor) Mr. / Ms. / M/s.

**Relationship with Minor (Please ✓)**
◯ Mother ◯ Father ◯ Legal Guardian

**GUARDIAN CKYC ID No. (KIN)** | KYC (Please ✓) ◯ Proof Attached | **GUARDIAN PAN**

**GUARDIAN AADHAAR No.** | Aadhaar Copy (Please ✓) ◯ Enclosed

**POA / Custodian Name:** | KYC (Please ✓) ◯ Proof Attached

**POA / Custodian CKYC ID No. (KIN)** | **POA / Custodian PAN**

**Contact Person for Corporate Investor:** Name | Designation:

## 3 FIRST APPLICANT AND KYC DETAILS

**1st SOLE APPLICANT** ◯ **Individual or** ◯ **Non-Individual** [Non Individual Investors should mandatorily fill separate FATCA, CRS & UBO details form]

***Date of Birth** (Individual) / **Incorporation** (Non-individual) D D M M Y Y Y Y
(Please write the Date of birth as per Aadhaar Card)

Proof of Date of Birth(Please ✓) (For minor applicant) ◯ Birth Certificate ◯ School Leaving Certificate / Mark Sheet ◯ Passport of the Minor ◯ Others (Please specify)

**Place of Birth / Incorporation:** (Please write the Date of birth as per Aadhaar Card) | **Country of Birth / Incorporation:** ◯ India ◯ Others | **Nationality:** ◯ Indian ◯ | **Gender** ◯ Male ◯ Female ◯ Other

**Type:** ◯ Resident Individual ◯ Sole Prop ◯ NRI - NRE ◯ Trust ◯ Bank / FIs ◯ FIIs ◯ PIO ◯ Society/AOP/BOI ◯ Minor through Guardian ◯ NRI - NRO

◯ HUF ◯ LLP ◯ Listed Company ◯ Private Company ◯ Public Ltd. Company ◯ Artificial Juridicial Person ◯ Partnership Firm ◯ FOF - MF Schemes ◯ Others

**a*. Occupation Details [Please tick (✓)]** ◯ Private Sector ◯ Public Sector ◯ Government Service ◯ Student ◯ Professional ◯ Housewife ◯ Business ◯ Retired ◯ Agriculture ◯ Proprietorship ◯ Others

**c*. 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

**b*. Gross Annual Income (₹) [Please tick (✓)]** ◯ Below 1 Lakh ◯ 1-5 Lakh ◯ 5-10 Lakh ◯ 10-25 Lakh ◯ >25 Lakh ◯ > 1 Crore

**d*. Net-worth (Mandatory for Non-Individuals)** ₹_____ as on _____ (Not older than 1 year)

**e*. Non-Individual Investors involved/providing any of the mentioned services** ◯ Foreign Exchange / Money Changer Services ◯ Gaming/Gambling/Lottery/Casino Services ◯ Money Lending / Pawning ◯ None of the above

## 4. BANK ACCOUNT DETAILS - Mandatory [Refer Instruction Nos. 3 & 4]

**Name of the Bank:**

**Core Banking A/c No.** | A/c. Type Pls. (✓) ◯ NRE ◯ CURRENT ◯ SAVINGS ◯ NRO

**Branch Name: Bank ~** | **Address:**

**Branch City:** | **State:** | **Pin Code**

**MICR Code** | Please attach a cancelled cheque OR a clear photo copy of a cheque | **IFSC Code** (Mandatory for Credit via NEFT/RTGS)

Please Read All Instructions as given in KIM, to help you complete the Application Form Correctly.

* mandatory fields

## 5. JOINT APPLICANTS, IF ANY AND THEIR KYC DETAILS

**Mode of Holding:** ○ Anyone or Survivor ○ Single ○ Joint (Please note that the Default option is Anyone or Survivor)

**2nd APPLICANT** Mr. / Ms. / M/s. (Not Applicable in case of Minor Applicant) **Gender** ○ Male ○ Female ○ Other

(Please write the name as per PAN Card)

**PAN Details** Pls indicate if US Person or a resident for tax purpose / Resident of Canada ○ Yes ○ No* (*Default if not ✓)

**CKYC ID No. (KIN)** KYC Pls ✓ ○ Proof Attached **Date of Birth** (Mandatory) (As per PAN Card)

**Place of Birth / Incorporation:** (Please write the Date of birth as per Aadhaar Card) **Country of Birth / Incorporation:** ○ India ○ Others **Nationality:** ○ Indian ○ ______ **Gender** ○ Male ○ Female ○ Other

**a*. Occupation Details [Please tick (✓)]** ○ Private Sector ○ Public Sector ○ Government ○ Student ○ Professional ○ Housewife ○ Business ○ Retired ○ Service Agriculture ○ Proprietorship ○ Others______

**b*. Gross Annual Income (₹) [Please tick (✓)]** ○ Below 1 Lakh ○ 1-5 Lakh ○ 5-10 Lakh ○ 10-25 Lakh ○ >25 Lakh ○ >1 Crore

**c*. Politically Exposed Person (PEP) Status** I am PEP I am Related to PEP Not Applicable

**Net-worth** ₹______ as on ______ (Not older than 1 year)

**3rd APPLICANT** Mr. / Ms. / M/s. (Not Applicable in case of Minor Applicant) **Gender** ○ Male ○ Female ○ Other

(Please write the name as per PAN Card)

**PAN Details** Pls indicate if US Person or a resident for tax purpose / Resident of Canada ○ Yes ○ No* (*Default if not ✓)

**CKYC ID No. (KIN)** KYC Pls ✓ ○ Proof Attached **Date of Birth** (Mandatory) (As per PAN Card)

**Place of Birth / Incorporation:** (Please write the Date of birth as per Aadhaar Card) **Country of Birth / Incorporation:** ○ India ○ Others **Nationality:** ○ Indian ○ ______ **Gender** ○ Male ○ Female ○ Other

**a*. Occupation Details [Please tick (✓)]** ○ Private Sector ○ Public Sector ○ Government ○ Student ○ Professional ○ Housewife ○ Business ○ Retired ○ Service Agriculture ○ Proprietorship ○ Others______

**b*. Gross Annual Income (₹) [Please tick (✓)]** ○ Below 1 Lakh ○ 1-5 Lakh ○ 5-10 Lakh ○ 10-25 Lakh ○ >25 Lakh ○ >1 Crore

**c*. Politically Exposed Person (PEP) Status** I am PEP I am Related to PEP Not Applicable

**d. Net-worth** ₹______ as on ______ (Not older than 1 year)

## 6a. MAILING ADDRESS [Please provide your E-mail ID and Mobile Number to help us serve you better Refer Instructions 6 ]

**Local Address of 1st Applicant**

**City** **State** **Pin Code**

**Tel. Off.** **Resi.** **Mobile**

Mobile No specified above belongs to ☐ Self or Family, due to Investor being(Please tick any one option from below.)
☐ Spouse ☐ Guardian(for Minor Investment) ☐ Dependent Children ☐ Dependent Parents ☐ Dependent Siblings

**E - Mail^^**

^^Please Use Block Letters. Investors providing email ID would mandatorily receive all Communications, Statement of Accounts and Abridged Annual Report through e-mail only.Incase if physical copies are required kindly refer instruction no. 16.

Email address specified above belongs to ☐ Self or Family, due to Investor being(Please tick any one option from below.)
☐ Spouse ☐ Guardian(for Minor Investment) ☐ Dependent Children ☐ Dependent Parents ☐ Dependent Siblings

* mandatory fields

## 6b. Mandatory for NRI / FII Applicant [Please provide Full Address. P. O. Box No. may not be sufficient. For Overseas Investors, Indian Address is preferred]

**Overseas Correspondence Address** ______

## 7. INVESTMENT AND PAYMENT DETAILS ( For complete information on Investment Details please refer to Instructions No. 6. )

**Scheme :** ○ Regular Plan ○ Direct Plan | ○ Growth (Default) | ○ Payout of Income Distribution cum capital withdrawal option ○ Reinvestment of Income Distribution cum capital withdrawal option

**Payment Type [Please (✓)]** **Self (Non-Third Party Payment)** ○ **Third Party Payment** (Please attach 'Third Party Payment Declaration Form')

| Cheque / DD / UTR No. & Date | Amount of Cheque / DD / RTGS / NEFT in figures (Rs.) | DD Charges, if any | Net Purchase Amount | Drawn on Bank / Branch | Pay-In Bank A/c No. (For Cheque Only) |
|---|---|---|---|---|---|
| | | | | | |

## 8. DEMAT ACCOUNT DETAILS - Mandatory for units in Demat Mode - Please ensure that the sequence of names as mentioned under section 3 matches as per the Depository Details.

| National Securities Depository Limited (NSDL) | Central Depository Services (India) Limited (CDSL) |
|---|---|
| DP Name | DP Name |
| DP ID I N Benef. A/C No. | 16 Digit A/C No. |

Enclosures - [Please (✓) ○ Client Masters List (CML) ○ Transaction cum Holding Statement ○ Delivery Instruction Slip (DIS)

**9. NOMINATION DETAILS* [Minor / HUF / POA Holder / Non Individuals cannot Nominate - Refer Instruction No. 8]**

In respect of the Units bearing Folio No.

First Holder

Second Holder

Third Holder

PAN 1 2 3

I/We wish to make a nomination and do here by nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our death.

**NOMINATION DETAILS**

**Nominee 1**

Name of the Nominee* Nomination (%)*

Relationship with applicant* Mobile Number*

Email ID* Residential Address*

Pincode*

Proof of Identity* ☐ Pan ☐ Driving Licence ☐ Aadhar ☐ Passport number in case of NRI/ OCI/ PIO Identification No*

Nominee / Guardian (In Case of Minor) DOB D D M M Y Y Y Y

**Nominee 2**

Name of the Nominee* Nomination (%)*

Relationship with applicant* Mobile Number*

Email ID* Residential Address*

Pincode*

Proof of Identity* ☐ Pan ☐ Driving Licence ☐ Aadhar ☐ Passport number in case of NRI/ OCI/ PIO Identification No*

Nominee / Guardian (In Case of Minor) DOB D D M M Y Y Y Y

**Nominee 3**

Name of the Nominee* Nomination (%)*

Relationship with applicant* Mobile Number*

Email ID* Residential Address*

Pincode*

Proof of Identity* ☐ Pan ☐ Driving Licence ☐ Aadhar ☐ Passport number in case of NRI/ OCI/ PIO Identification No*

Nominee / Guardian (In Case of Minor) DOB D D M M Y Y Y Y

* mandatory fields

**DECLARATION FOR OPTING-OUT OF NOMINATION**

☐ I / We hereby confirm that I / We do not wish to appoint any nominee(s) in my / our MF 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 / information for claiming of assets held in my / our MF Folio, which may also include documents issued by Court or other such competent authority, based on the value of assets held in the MF Folio.

**This nomination shall supersede any prior nomination made by me / us, if any.**

| Name and Signature of Holder | Signature(s) of holder/ Thumb impression | Witness Name and Address** | Witness Signature** |
|---|---|---|---|
| Sole / First Holder (Mr./Ms.) | | | |
| Second Holder (Mr./Ms.) | | | |
| Third Holder (Mr./Ms.) | | | |

** Signature of two witness(es), along with name and address are required, if the account holder affixes thumb impression, instead of wet signature.

## 10. FATCA and CRS DETAILS For Individuals (Mandatory) Non Individual Investors should mandatorily fill separate FATCA, CRS & UBO details form

**FOR INDIVIDUALS:** Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

(If Yes, please provide country/ies in which the entity is a resident for tax purpose and the associated Tax Identification No. below

| 1st Applicant (Sole / Guardian / Non-Individual) | | 2nd Applicant | | 3rd Applicant | |
|---|---|---|---|---|---|
| Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency | ◯ Yes ◯ No | Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency | ◯ Yes ◯ No | Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency | ◯ Yes ◯ No |
| Country of Birth / Incorporation | | Country of Birth | | Country of Birth | |
| Country Citizenship / Nationality | | Country Citizenship / Nationality | | Country Citizenship / Nationality | |
| Are you a US specified person? | ◯ Yes ◯ No | Are you a US specified person? | ◯ Yes ◯ No | Are you a US specified person? | ◯ Yes ◯ No |
| Tax Identification Number (TIN) or Functional Equivalent | | Tax Identification Number (TIN) or Functional Equivalent | | Tax Identification Number (TIN) or Functional Equivalent | |

| Individual or Non-Individual investors fill this section if ticked Yes above. | | Individual investor have to fill in below details in case of joint applicants | | | |
|---|---|---|---|---|---|
| Tax Residency Status: 1 | Country: | Tax Residency Status: 1 | Country: | Tax Residency Status: 1 | Country: |
| | No.: | | No.: | | No.: |
| | Type: | | Type: | | Type: |
| Tax Residency Status: 2 | Country: | Tax Residency Status: 2 | Country: | Tax Residency Status: 2 | Country: |
| | No.: | | No.: | | No.: |
| | Type: | | Type: | | Type: |
| Tax Residency Status: 3 | Country: | Tax Residency Status: 3 | Country: | Tax Residency Status: 3 | Country: |
| | No.: | | No.: | | No.: |
| | Type: | | Type: | | Type: |
| Address Type _____ | | Address Type _____ | | Address Type _____ | |

**(Address Type: Residential or Business (default) / Residential / Business / Registered Office) (For address mentioned in form / existing address appearing in folio)**

In case of applications with POA, the POA holder should fill separate form to provide the above details mandatorily.

* mandatory fields

## 11. DECLARATION AND SIGNATURES / THUMB IMPRESSION OF APPLICANT(s) [Refer Instructions 2]

**To The Trustees, quant Mutual Fund (The Fund) –** (A) Having read and understood the contents of the SID of the Scheme applied for (Including the scheme(s) available during the New Fund Offer period); I/We hereby apply for units of the said such scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. (B) I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any provisions of the Income Tax Act, Anti Money Laundering Laws or any other applicable laws enacted by the Government of India from time to time. (C) Signature of the nominee acknowledging receipts of my/our credit will constitute full discharge of liabilities of quant Mutual Fund. (D) The information given in / with this application form is true and correct and further agrees to furnish additional information sought by quant Money Managers Ltd./ Fund and undertake to update the information/details with the AMC / Fund/Registrars and Transfer Agent (RTA) from time to time. I/We hereby confirm that the AMC/Fund shall have the right to share my information and other details with the regulatory and government authorities as and when needed. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. (E) I/We further declare that **"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. (F) I/We hereby confirm that I/We have not been offered/ communicated any indicative portfolio and/ or any indicative yield by the Fund/AMC/its distributor for this investment.** I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. **(G) Applicable to Investors availing the online facility:** I/ We have read, understood and shall be bound by the terms & conditions of the PIN agreement available on the AMC website for transacting online. **(H) RIA:** I/We hereby agree to consent the AMC to share my transaction details to the registered investment advisor (RIA) through the registrar or otherwise. **(I) Applicable to Foreign Resident's Residing in India:-** I/ We confirm that I/We satisfy the Residency test as prescribed under FEMA provisions. I/We further declare that I/We am/are "Person Resident in India" and are allowed to invest into the Scheme as per the said FEMA regulations and other applicable laws and regulations. **(J) I / We confirm that I am / We are not United States person(s) under the laws of United States or resident(s) of Canada. In case of change to this status, I / We shall notify the AMC, in which event the AMC reserves the right to redeem my / our investments in the Scheme(s). (K) FATCA /CRS Certification:** 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. In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit. In such case, the concerned SEBI registered intermediary reserves the right to reject the application or reverse the allotment of units, if subsequently it is found that applicant has concealed the facts of beneficial ownership. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future & also undertake to provide any other additional information as may be required at your end. **(L) Aadhaar:** I/We hereby voluntarily submit Aadhar card to the Fund/AMC for updating the same in my folio.

**I/we have read the point number 16 and we will participant Go Green initiative**

| | | |
|---|---|---|
| × Signature of 1st Applicant / Guardian / Authorised Signatory /PoA/Karta | × Signature of 2nd Applicant / Guardian / Authorised Signatory /PoA | Signature of 3rd Applicant / Guardian / Authorised Signatory /PoA |

ACKNOWLEDGMENT SLIP

For ◯ Lumpsum 'OR' ◯ SIP

**Received Application from Mr. / Ms. / M/s. _____ as per details below:**

| Scheme Name and Plan | Payment Details | Date & Stamp of Collection Centre / ISC |
|---|---|---|
| | Amount (Rs.) _____<br>Cheque / DD No.: _____<br>Dated _____<br>Bank & Branch _____ | |

Cheque / DD is subject to realisation