





## 2. FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor. Refer Instruction No. 23)

FOR RESIDENT INDIANS

The below information is required for all applicants/guardian.

	Place / City of Birth	Country of Birth	Country of Citizenship / Nationality
First Applicant / Guardian			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____
Second Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____
Third Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____

FOR NON-RESIDENT INDIANS

**Are you a tax resident (i.e., are you assessed for tax) in any other country outside India?**

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

Yes  No

	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other please specify)	Address Type
First Applicant / Guardian				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business
Second Applicant				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business
Third Applicant				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business

### Overseas Address

		City		
State		Country		Zipcode

For Non Individual investors Annexure I and Annexure II are available on the website of AMC i.e. [www.axismf.com](http://www.axismf.com) or at the Investor Service Centres (ISCs) of Axis Mutual Fund.



## 3. NOMINATION DETAILS (Mandatory) (Refer Instruction No. 18)

Sr. No.	Nominee Name	PAN	Allocation (%)	Relationship with Investor	Nominee date of birth	Guardian Name (in case of Minor)	Guardian Signature
1					D D M M Y Y		
2					D D M M Y Y		
3					D D M M Y Y		

I/We DO NOT wish to nominate and sign here

You/ Sole Applicant	Second Applicant	Third Applicant
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## 4. INVESTMENT DETAILS (Investors applying under Direct Plan must select "DIRECT" against scheme name, Refer Instruction No. 2.)

Sr. No.	Scheme	Plan	Option	Amount
1		<input type="checkbox"/> Regular <input type="checkbox"/> Direct		

## 5. PAYMENT DETAILS



Non-Third Party Payment  Third Party Payment (Please attach 'Third Party Payment Declaration Form')

Mode  Cheque  DD  Axis Bank Debit Mandate (Please fill section 9.) Date           Cheque / DD No.

Amount (in figures)  (in words)

Pay-in A/c No.

Account type  Savings  Current  NRE  NRO  FCNR  Others  Specify

IFSC code (11 digit)             MICR Code (9 digit)

Drawn on bank / branch name & address



## 8. QUICK CHECKLIST

- KYC acknowledgement letter (Compulsory for MICRO Investments)
- Self attested PAN card copy
- Plan / Option / Sub Option name mentioned in addition to scheme name
- Multiple Bank Accounts Registration form (if you want to register multiple bank accounts so that future payments can be made from any of the accounts)
- Email id and mobile number provided for online transaction facility
- SIP Registration Form for SIP investments
- Relationship proof between guardian and minor (if application is in the name of a minor)
- FATCA Declaration
- Additional documents attached for Third Party payments. Refer instruction No. 7.



<https://ifaconnect.axismf.com/#/home>



Transact by sending an SMS  
SMS HELP To 9212010033



Transact through a  
simple phone call on  
8108622211

## 9. DEBIT MANDATE (Only for Axis Bank Account holders. Now you don't have to issue a cheque if you hold an Axis Bank Account). To be processed in CMS software under client code "AXISMF"

I/ We  **Application No.**

authorise you to debit my/our account no.

Account type  Savings  NRO  NRE  Current  FCNR  Others  to pay for the purchase of

AXIS CRISIL SDL 2027 DEBT INDEX FUND

Amount (in words)  (in Figures)

Signature of First Account Holder	Signature of Second Account Holder	Signature of Third Holder
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Date

## WE ACKNOWLEDGE YOUR APPLICATION Received subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form.

From

Cheque No.	Date	Amount	Scheme	Stamp & Signature

Application No.