

Aditya Birla Sun Life Mutual Fund



ADITYA BIRLA CAPITAL

APPLICATION FORM - Aditya Birla Sun Life CRISIL AAA Jun 2023 Index Fund

(An open ended Target Maturity Index Fund tracking the CRISIL IBX AAA Index - June 2023. A moderate interest rate risk and relatively low credit risk.)

Offer of units of ₹ 10/- each during the New Fund Offer and Continuous Offer for Units at NAV based prices.

New Fund Offer Opens: Monday, February 14, 2022 | **New Fund Offer Closes:** Monday, February 21, 2022
Scheme Re-opens for Continuous Sale And Repurchase: Within 5 business days from date of allotment

This Product is suitable for investors who are seeking*:	Scheme Riskometer	Benchmark Riskometer CRISIL IBX AAA Index - June 2023	Potential Risk Class			
			Credit Risk of Scheme →	Interest Rate Risk of the Scheme ↓	Relatively Low (Class A)	Moderate (Class B)
• Income over the target maturity period • Open ended Target Maturity Index Fund that seeks to track CRISIL IBX AAA Index - June 2023 *Investors should consult their financial advisers if in doubt whether the product is suitable for them			Relatively Low (Class I)			
			Moderate (Class II)	A-II		
			Relatively High (Class III)			

The product labelling assigned during the NFO is based on internal assessment of the Scheme characteristics or model portfolio and the same may vary post NFO when the actual investments are made.

(Please read the instructions before filling up the form. All sections to be completed in english in black / blue coloured ink and in block letters.)

Distributor Name & ARN/ RIA No.	Sub Broker Name & ARN/ RIA No.	Sub Broker Code	Employee Unique ID. No. (EUN)	Application No.
			E	
Distributor Mobile No.		Distributor Email Id		

Applicable only for Regular Schemes. Please note the Distributor Mobile & Email Id will not be updated in the Broker Master and will be restricted to this transaction only.

EUN is mandatory for Advisory transactions. Ref. Instruction No. 9

I/we hereby confirm that the EUN box has been intentionally left blank my 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.

First Applicant / Authorised Signatory	Second Applicant	Third Applicant
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Transaction Charges for Applications routed through Distributors/agents only (Refer Instruction 1 (viii))

In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

Existing Unitholder please fill in your Folio No., Name & Email ID and then proceed to Section 5 (Applicable details and Mode of holding will be as per the existing Folio No.)

Existing Folio No.	GSTIN
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1. FIRST / SOLE APPLICANT INFORMATION (MANDATORY) (Refer Instruction No. 2,3,4) Fresh / New Investors fill in all the blocks. (1 to 8) In case of investment "On behalf of Minor", Please Refer Instruction no. 2(ii)

Name of First/Sole Applicant (as per PAN Card)#	Mr. Ms. M/s.																											
PAN / PEKRN (Mandatory)																		Date of Birth**	D	D	M	M	Y	Y	Y	Y	** Mandatory in case the First /Sole Applicant is Minor	
CKYC Number	(Prefix if any)																	14 digit CKYC Number									#The application is liable to get rejected if it does not match with PAN card	
Name of the Second Applicant (as per PAN Card)#	Mr. Ms. M/s.																											
PAN / PEKRN (Mandatory)																			Date of Birth**	D	D	M	M	Y	Y	Y	Y	** Mandatory in case the First /Sole Applicant is Minor
CKYC Number	(Prefix if any)																		14 digit CKYC Number									#The application is liable to get rejected if it does not match with PAN card
Name of the Third Applicant (as per PAN Card)#	Mr. Ms. M/s.																											
PAN / PEKRN (Mandatory)																			Date of Birth**	D	D	M	M	Y	Y	Y	Y	** Mandatory in case the First /Sole Applicant is Minor
CKYC Number	(Prefix if any)																		14 digit CKYC Number									#The application is liable to get rejected if it does not match with PAN card
Name of the Guardian (as per PAN Card)# (In case First / Sole Applicant is minor) / Contact Person - Designation - Poa Holder (In case of Non-individual Investors)	Mr. Ms. M/s.																											
PAN / PEKRN (Mandatory)																			Date of Birth**	D	D	M	M	Y	Y	Y	Y	** Mandatory in case the First /Sole Applicant is Minor
CKYC Number	(Prefix if any)																		14 digit CKYC Number									#The application is liable to get rejected if it does not match with PAN card

Acknowledgement Slip (To be filled in by the Investor)

Aditya Birla Sun Life CRISIL AAA Jun 2023 Index Fund

Application No.	Collection Centre / ABSLAMC Stamp & Signature
Received from Mr. / Ms. _____ Date : ____/____/____	
<input type="checkbox"/> Enclosed <input type="checkbox"/> PAN/PEKRN Proof <input type="checkbox"/> KYC Complied	



1. FIRST / SOLE APPLICANT INFORMATION (MANDATORY) (Contd...)

Relationship of Guardian (Refer Instruction No. 2(ii))

ISD CODE

TEL: OFF.

TEL: RESI

Proof of the Relationship with Minor**

** Mandatory in case the First / Sole Applicant is Minor

Tax Status [Please tick (✓)] (Applicable for First / Sole Applicant)

- Resident Individual FPIs NRI - NRO HUF Club / Society PIO Body Corporate Minor Government Body
 Trust NRI - NRE Bank and FI Sole Proprietor Partnership Firm Provident Fund Others _____ (Please Specify)

MODE OF HOLDING [Please tick (✓)] (Please Refer Instruction No. 2(v))

- Joint Single Anyone or Survivor (Default option is Anyone or survivor)

MAILING ADDRESS OF FIRST / SOLE APPLICANT (P. O. Box Address is not sufficient. Please provide full address.)

CITY											PINCODE			
STATE														

OVERSEAS ADDRESS (Mandatory for NRI/FPI Applicant.)

CITY											COUNTRY				ZIP CODE			
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2. GO GREEN [Please tick (✓)] (Refer Instruction No. 10)

- SMS Transact Online Access

Mobile No.

+91

I/ We would like to register for my/our SMS Transact and/ or Online Access

Email Id _____
 Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: [Please tick (✓)] Account Statement Annual Report Other Statutory Information
 Facebook Id _____ Twitter Id _____

3. BANK ACCOUNT DETAILS (In case of Minor investment, bank details should be of Minor or from a joint account of Minor with the guardian only) Refer Instruction No. 3(A)

Name of the Bank _____
 Branch Address _____
 Pin Code _____ City _____
 Account No. _____
 Account Type [Please tick (✓)] SAVINGS CURRENT NRE NRO FCNR OTHERS _____ (Please Specify)
 11 Digit IFSC Code _____ 9 Digit MICR Code _____

4. INVESTMENT DETAILS [Please tick (✓)] (Refer Instruction No. 5, 9 & 14) (If this section is left blank, only folio will be created)

Aditya Birla Sun Life CRISIL AAA Jun 2023 Index Fund	Plan	<input type="checkbox"/> Regular	<input type="checkbox"/> Direct
	Options / Sub Options	<input type="checkbox"/> Growth Option	<input type="checkbox"/> Payout of Income Distribution cum capital withdrawal (IDCW) Option^

Default Plan: Refer KIM for Details. Default Options/ Sub Options: Growth Option

^The amounts can be distributed out of investors capital (Equalization Reserve), which is part of sale price that represents realized gains.

KYC DETAILS (Mandatory)

OCCUPATION [Please tick (✓)]

FIRST APPLICANT	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife
	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others (please specify)					
SECOND APPLICANT	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife
	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others (please specify)					
THIRD APPLICANT	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service	<input type="checkbox"/> Government Service	<input type="checkbox"/> Business	<input type="checkbox"/> Professional	<input type="checkbox"/> Agriculturist	<input type="checkbox"/> Retired	<input type="checkbox"/> Housewife
	<input type="checkbox"/> Student	<input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Others (please specify)					

GROSS ANNUAL INCOME [Please tick (✓)]

FIRST APPLICANT	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore
	Net worth (Mandatory for Non - Individuals) Rs. _____ as on					DDMMYY [Not older than 1 year]
SECOND APPLICANT	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore OR Net Worth _____					
THIRD APPLICANT	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> > 25 Lacs - 1 Crore <input type="checkbox"/> > 1 Crore OR Net Worth _____					

Aditya Birla Sun Life CRISIL AAA Jun 2023 Index Fund	Plan	<input type="checkbox"/> Regular	<input type="checkbox"/> Direct
	Options / Sub Options	<input type="checkbox"/> Growth Option	<input type="checkbox"/> Payout of Income Distribution cum capital withdrawal (IDCW) Option^

Default Plan: Refer KIM for Details. Default Options/ Sub Options: Growth Option

^The amounts can be distributed out of investors capital (Equalization Reserve), which is part of sale price that represents realized gains.

Investment Amount (₹) _____ DD Charges (₹) _____

Net Amount (₹) _____ Cheque / DD No. _____ Dated ____/____/____

Drawn on Bank _____

For Individuals			
	I am Politically Exposed Person	I am Related to Politically Exposed Person	Not Applicable
Sole/First Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Second Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Third Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For Non-Individual Investors (Companies, Trust, Partnership etc.)	
Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (If No, please attach mandatory UBO Declaration)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Foreign Exchange / Money Charger Services	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gaming / Gambling / Lottery / Casino Services	<input type="checkbox"/> Yes <input type="checkbox"/> No
Money Lending / Pawning	<input type="checkbox"/> Yes <input type="checkbox"/> No

5. PAYMENT DETAILS Refer Instruction No. 5. (Please mention the application Serial number and the first applicant's name on the reverse of the Cheque /DD. Please ensure there is only one Cheque / DD submitted per application form).

Mode of Payment	[Please tick (✓)] <input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> RTGS / NEFT / Fund Transfer Letter <input type="checkbox"/> Other (please specify) _____		Cheque / DD should be drawn favouring "Aditya Birla Sun Life CRISIL AAA Jun 2023 Index Fund"	
Investment Amount (₹)*		DD Charges (₹)*		Net Amount (₹)
Cheque/DD No.		Dated	D D M M Y Y	Bank Name & Branch
Account No.		UTR No.		(In case of RTGS/NEFT)

*To be filled in by investors residing at the location, where the AMC Branches /Collection Bank centres are not located.
 *Minimum of ₹ 500/- and in multiples of ₹ 1/- thereafter during the New Fund Offer period.

6. DEMAT ACCOUNT DETAILS (OPTIONAL) (If Demat details are provided, units will be compulsorily given in Demat form only) (Please ensure that the sequence of names as mentioned in the application form matches with that of the A/c. held with the depository participant.) Refer Instruction No. 3(B)

NSDL: Depository Participant Name: _____	DPID No.: I N	Beneficiary A/c No. _____
CDSL: Depository Participant Name: _____		Beneficiary A/c No. _____

Enclosed: Client Master Transaction/ Statement Copy/ DIS Copy

7. REDEMPTION / IDCW REMITTANCE (Please attach a copy of cancelled cheque Refer Instruction No. 8 & 13)

<input type="checkbox"/> Electronic Payment	<input type="checkbox"/> Cheque Payment
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It is the responsibility of the Investor to ensure the correctness of the IFSC code/ MICR code for Electronic Payout at recipient/destination branch corresponding to the Bank details mentioned in Section 3.

If MICR and IFSC code for Redemption/Payout of IDCW Option is available all payouts will be automatically processed as Electronic Payout-RTGS/NEFT/Direct Credit.

8. NOMINATION DETAILS (Mandatory) (Refer Instruction No. 7)

I/We wish to nominate I/We DO NOT wish to nominate and sign here 1st Applicant Signature (Mandatory)

	Nominee Name and Address	Applicant's Relationship with the Nominee	Guardian Name (in case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1					
Nominee 2					
Nominee 3					

9. FATCA & CRS INFORMATION [Please tick (✓)] For Individual Investors including Sole Proprietor (Non Individual Investors should mandatorily fill separate FATCA detail form)

The below information is required for all applicant(s)/ guardian

Address Type: Residential or Business Residential Business Registered Office (for address mentioned in form/existing address appearing in Folio)

Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? Yes No

If Yes, please provide the following information [mandatory]

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

Category	First Applicant (including Minor)	Second Applicant/ Guardian	Third Applicant
Name of Applicant			
Place/ City of Birth			
Country of Birth			
Country of Tax Residency#			
Tax Payer Ref. ID No^			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 3			
Tax Payer Ref. ID No. 3			
Identification Type [TIN or other, please specify]			

#To also include USA, where the individual is a citizen/green card holder of USA. ^In case Tax Identification Number is not available, kindly provide its functional equivalent.

10. DECLARATION(S) & SIGNATURE(S) (Refer Instruction No. 1)

To,
The Trustee,
Aditya Birla Sun Life Trustee Private Limited.

Date	D	D	M	M	Y	Y	Y	Y
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Having read and understood the contents of the Statement of Additional Information / Scheme Information Document of the Scheme, I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. 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 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 & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.

For Non-Individual Investors: I/We hereby confirm that the object clause of the constitution document of the entity (viz. MOA / AOA / Trust Deed, etc.), allows us to apply for investment in this scheme of Aditya Birla Sun Life AMC Limited and the application is being made within the limits for the same. I/We are complying with all requirements / conditions of the entity while applying for the investments and I/We, including the entity, if the case may arise so, hereby agree to indemnify ABSLAMC / ABSLMF in case of any dispute regarding the eligibility, validity and authorization of the entity and/or the applicants who have applied on behalf of the entity.

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. (Refer Inst. No. 6)

I/We confirm that details provided by me/us are true and correct.**

** I have voluntarily subscribed to the on-line access for transacting through the internet facility provided by Aditya Birla Sun Life AMC Limited (Investment Manager of Aditya Birla Sun Life Mutual Fund) and confirm of having read, understood and agree to abide the terms and conditions for availing of the internet facility more particularly mentioned on the website www.adityabirlasunlifemf.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.

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.

"I / We acknowledge that the RIA has entered into an agreement with the AMC / MF for accepting transaction feeds under the code. I / We hereby indemnify, defend and hold harmless the AMC / MF against any regulatory action, damage or liability that they may suffer, incur or become subject to in connection therewith or arising from sharing, disclosing and transferring of the aforesaid information."

FATCA & CRS Declaration: I/ We have understood the information requirements of this Form (read along with 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. (Refer Inst.No.13)

Signature of First Applicant / Authorised Signatory	Signature of Second Applicant	Signature of Third Applicant
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