Fund Name & Benchmark

COMMON APPLICATION FORM FOR AXIS EQUITY ETFs FOF

Application No.

Benchmark Riskometer

Product Riskometer

(An open ended fund of fund scheme predominantly investing in units of domestic equity ETFs)

NFO OPENS: FEBRAURY 04, 2022 AND NFO CLOSES: FEBRUARY 18, 2022

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

Product Labelling

AXIS FOUITY FTFs FOF This product is suitable for investors who are seeking* (An open ended fund of fund scheme Capital appreciation over long term. predominantly investing in units of Investments predominantly in units of domestic Equity Exchange domestic equity ETFs) Traded Funds *Investors should consult their financial advisers if in doubt about whether the product is suitable for them. Benchmark: NIFTY 500 TRI NIFTY 500 TRI (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) Sub-Distributor Internal Sub-Broker/ Distributor ARN ARN Sol ID **Employee** RIA CODE^ **EUIN** Code PMR (Portfolio Manager's Registration) Number ^ ^ Serial No., Date & Time Stamp Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor. ^I/We, have invested in the scheme(s) of Axis Mutual Fund under Direct Plan. I/We hereby give my/our consent to share/provide the transactions data feed/portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all schemes of Axis Mutual Fund, to the above mentioned SEBI Registered Investment Adviser. ^ 1/We, have invested in the scheme(s) of Axis Mutual Fund under Direct Plan. I/We hereby give my/our consent to share/provide the transactions data feed/portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all schemes of Axis Mutual Fund, to the above mentioned SEBI Registered Portfolio Manager. 1/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. Third Applicant Power of Attorney Holder You/ Sole Applicant /Guardian Second Applicant TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Instruction No. 20) I confirm that I am an existing investor across Mutual Funds. I confirm that I am a first time investor across Mutual Funds. OR In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/subscription amount and payable to the Distributor. Units will be issued against the balance amount invested. **EXISTING INVESTOR'S FOLIO NUMBER** (If you have an existing folio with KYC validated, please mention here and skip to section 4) MODE OF HOLDING (in case of Demat Purchase **Unit Holding Option** Mode of Holding should be same as in Demat Account Single Joint (Default) Physical Mode Demat Mode Folio number (in case of Demat, please fill sec 6) Anyone or Survivor I/ We want to create new Folio (Instruction No. 26) 1. YOUR PERSONAL DETAILS (MANDATORY) (In case of investment "On behalf of minor", Please refer instruction No. 11) First Applicant Mr. Ms. M/s FIRST APPLICANT Gender PAN (Mandatory) CKYC No. DOB Μ Address City State Pincode Email ID³ Mohile **Public Sector Service** Govt. Service **Business Professional** Agriculturist Pvt. Sector Service Occupation Details Retired Forex Dealer Student Others Specify > 1 Crore Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs 25 Lacs - 1 Crore Gross Annual Income (₹) Net worth (Mandatory for Non - Individuals) ₹ D Μ Μ as on (Note: If Email pertains to Family Email ID provided pertains to Family Member Self Spouse **Dependent Parents** Dependent Children Member please select any one) (Refer Instruction No. 25) I / we hereby prefer to 'OPT-IN' to receive physical copies of scheme Annual Report or Abridged summary BANK ACCOUNT DETAILS FOR PAYOUT (Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details. Refer Instruction No. 6) Name of the bank **Branch Address** City State Pincode Account No. Account type Savings Current NRE NRO FCNR Others Specify IFSC Code (11 digit) MICR Code (9 digit) Note: Legal Entity Identifier Number is Mandatory for Transaction value of INR 50 crore and above f Non-Individual investors. refer Instruction No. 27 Valid up to LEI Code

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		Place / Ci	ity of Birth	Country	of Birth	Co	ountry of Cit	tizenship /	Nationality
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Drawn on bank / branch name & address

6. DEM	AT ACCOUNT DETAILS (OPT	IONAL)								
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CDSL:	Beneficiary A/c No.									
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You	Sole Applicant /Guardian	Second Applicant	Third Applicant			Power	of Atton	ney Holo	ler	

Date D D M

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Place

nship proof between guardian and Declaration	d minor (if application is in th			
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