

APPLICATION FORM

(To be Used / Distributed along with Key Information Memorandum)

Investors must read the Key Information Memorandum, Instructions and Product Labeling before completing this Form.

Please read the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required.

Choice
The Joy of Earning

Choice GOLD ETF

(An open-ended scheme replicating/tracking domestic price of Gold)

This product is suitable for investors who are seeking*:

- Long term capital appreciation
- Investment in gold in order to generate returns similar to the performance of domestic price of gold, subject to tracking errors

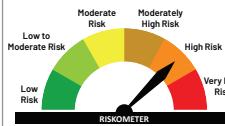
*Investors should consult their financial advisers if in doubt about whether the product is suitable for them.

Choice Gold ETF

AMFI Tier I Benchmark - Domestic Price of Gold



The risk of the scheme is High



The risk of the benchmark is High

NFO Opens : 24th October 2025

NFO Closes : 31st October 2025

Scheme re-opens for continuous sale and re-purchase on or before : 6th November 2025

1. DISTRIBUTOR INFORMATION

ARN code	RIA code	ARN / RIA Name	Sub broker ARN code	Sub broker code **	EUIN*
ARN -	RIA -		ARN -		

*Employee Unique Identification Number **As allotted by ARN holder.

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.

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. By mentioning RIA code, I/We authorize you to share my/our transactions data feed/portfolio holdings/ NAV details under Direct Plan of scheme(s) managed by you with the Investment Adviser.

Signature of 1st Applicant/Guardian/POA

Signature of 2nd Applicant

Signature of 3rd Applicant

2. MODE OF HOLDING AS PER DEMAT ACCOUNT HOLDING SEQUENCE

Single OR Anyone or Survivor OR Joint# #Default option for more than one holder

GO GREEN INITIATIVE

Opt-in – Physical Opt-out – Email Refer instruction no. 8

3. DEMAT ACCOUNT DETAILS (Mandatory)

National Securities Depository Limited		Central Depository Services (India) Limited	
Depository Participant Name		Depository Participant Name	
DP ID	IN	DP ID	Beneficiary A/c No.

4. SOLE / FIRST APPLICANT'S DETAILS (Investor Holding Sequence should exactly match with the Demat Account Holding Sequence) # Mandatory

Mr Ms Mrs M/S (Please ✓)

Name # _____ Gender (Please ✓) Male Female

Date of Birth/Incorporation # D D M M Y Y Y Y Proof of DOB of Minor enclosed (Please ✓) Passport Birth Certificate Other _____ please specify

Father's name _____

Mother's name _____

PAN # _____ NOTE- PAN copy mandatory CKYC / KIN _____

Legal Entity Identification (Applicable for Non-Individuals only) _____

Guardian Name (in case of Minor) / POA (Contact Person For Non Individuals / POA Holder Name) (Name as per PAN) Refer instruction no. 3

Father's name _____

Mother's name _____

PAN # _____ NOTE- PAN copy mandatory DOB # _____ CKYC / KIN _____

Natural Guardian Legal Guardian\$ \$ Enclose supporting documents

Mailing Address (as per KYC records) _____

City _____

Pincode _____ State _____ Country _____

I/ we confirm, below contact details are of (Please select (✓) any) Primary holder ^ Family _____ Specify relationship _____

Mobile No. _____ Email ID _____

^ "Family" for this purpose shall mean self, spouse, dependent children and dependent parents.

Phone (Off) _____ Fax No. _____ Phone (Res) _____

Overseas Address (Mandatory in case of NRI/ FII applicant, in addition to mailing address)

City _____

Pincode _____ State _____ Country _____

ADDITIONAL KYC DETAILS

Tax Status: (Please ✓)

Resident Individual NRI-Repatriation NRI-Non Repatriation Partnership Trust HUF AOP Minor through guardian Company
 FII's PIO Body Corporate Society/Club Sole Proprietorship Non Profit Organisation Financial Institution NBFC Others _____ please specify

ACKNOWLEDGMENT SLIP (To be filled in by the investor)

Name _____

PAN _____

An Application for scheme **Choice Gold ETF**

Along with Cheque / DD No. / UTR No. _____ Dated D D M M Y Y Y Y

Drawn on (Bank) _____ Amount ₹ _____

Choice
The Joy of Earning

Signature, Stamp & Date

Non-Profit Organization (NPO):

We are falling under "**Non-Profit Organization**" [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013)

Yes No

If yes, please quote Registration No. of Darpan portal of Niti Aayog

Enclosed relevant documentary proof evidencing the above definition.

If not, please register immediately and confirm with the above information. Failure to get above confirmation or registration with the portal as mandated, wherever applicable will force MF / AMC to register your entity name in the above portal and may report to the relevant authorities as applicable. We are aware that we may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable.

FATCA DETAILS

Are you a Tax Resident of any Country other than India ? Yes No

FATCA & CRS Details: For Individuals (Mandatory).

The below information is required for all applicant(s)/ guardian. 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 a resident for tax purpose, associated Taxpayer Identification Number and Identification type e.g. TIN etc.

Country of tax resident	1.	2.	3.
Tax Payer Ref ID No.	1.	2.	3.
Identification Type	1.	2.	3.

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. In case Tax Identification Number is not available, kindly provide its functional equivalent.

Country of Birth: _____ City of Birth: _____ Country of Nationality: _____

If TIN is not available, Please the reason A, B or C : Reason A B C

Refer: "Instructions for Application Form" down below for details.

SECOND APPLICANT'S DETAILS (Investor Holding Sequence should exactly match with the Demat Account Holding Sequence)

Mr Ms Mrs (Please)

Name # _____ Gender (Please) Male Female

Father's name _____

Mother's name _____

PAN # _____ NOTE- PAN copy mandatory DOB # _____ CKYC / KIN _____

I/ we confirm, below contact details are of (Please select () any) Primary holder ^ Family _____ Specify relationship _____

Mobile No. _____ Email ID _____

^ "Family" for this purpose shall mean self, spouse, dependent children and dependent parents.

Phone (Off) _____ Phone (Res) _____

ADDITIONAL KYC DETAILS

Tax Status: (Please)

Resident Individual NRI-Repatriation NRI-Non Repatriation Partnership HUF AOP Minor through guardian FII PIO Others _____ please specify

FATCA DETAILS

Are you a Tax Resident of any Country other than India ? Yes No

FATCA & CRS Details: For Individuals (Mandatory).

The below information is required for all applicant(s)/ guardian. 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 a resident for tax purpose, associated Taxpayer Identification Number and Identification type e.g. TIN etc.

Country of tax resident	1.	2.	3.
Tax Payer Ref ID No.	1.	2.	3.
Identification Type	1.	2.	3.

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. In case Tax Identification Number is not available, kindly provide its functional equivalent.

Country of Birth: _____ City of Birth: _____ Country of Nationality: _____

If TIN is not available, Please the reason A, B or C : Reason A B C

Refer: "Instructions for Application Form" down below for details.

THIRD APPLICANT'S DETAILS (Investor Holding Sequence should exactly match with the Demat Account Holding Sequence)

Mr Ms Mrs (Please)

Name # _____ Gender (Please) Male Female

Father's name _____

Mother's name _____

PAN # _____ NOTE- PAN copy mandatory DOB # _____ CKYC / KIN _____

I/ we confirm, below contact details are of (Please select () any) Primary holder ^ Family _____ Specify relationship _____

Mobile No. _____ Email ID _____

^ "Family" for this purpose shall mean self, spouse, dependent children and dependent parents.

Phone (Off) _____ Phone (Res) _____

ADDITIONAL KYC DETAILS

Tax Status: (Please)

Resident Individual NRI-Repatriation NRI-Non Repatriation Partnership HUF AOP Minor through guardian FII PIO Others _____ please specify

Are you a Tax Resident of any Country other than India ? <input type="checkbox"/> Yes <input type="checkbox"/> No		FATCA & CRS Details: For Individuals (Mandatory).	
The below information is required for all applicant(s)/ guardian. Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide the following information [mandatory].			
* Please indicate all countries in which you are a resident for tax purpose, associated Taxpayer Identification Number and Identification type e.g. TIN etc.			
Country of tax resident	1.	2.	3.
Tax Payer Ref ID No.	1.	2.	3.
Identification Type	1.	2.	3.

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. In case Tax Identification Number is not available, kindly provide its functional equivalent.
Country of Birth: _____ City of Birth: _____ Country of Nationality: _____
If TIN is not available, Please the reason A, B or C : Reason A B C Refer: "Instructions for Application Form" down below for details.

Investment Amount	A	DD Charges (if applicable)	B	Total Amount	A+B
Mode of Payment <input type="checkbox"/> Cheque <input type="checkbox"/> Demand Draft <input type="checkbox"/> Electronic Fund Transfer					
Cheque/DD Number _____ Date D D M M Y Y Y Y					
Drawn on Bank / Branch _____					
Bank a/c no. _____ IFSC Code _____					
UTR _____ dated D D M M Y Y Y Y					

I/We hereby confirm and declare as under: I/We have read and understood the contents of the Statement of Additional Information of Choice Mutual Fund ("Mutual Fund") and the Scheme Information Document/Key Information Memorandum of Choice Gold ETF ("Scheme") and the instructions. I/We, hereby apply to the Trustee of the Mutual Fund for allotment of units of the Scheme of the Choice Mutual Fund, as indicated above, agree to abide by the terms, conditions, rules and regulations of the Scheme. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/We declare that I am/We are authorised to make this investment and the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any act, regulation, rule, notification, directions or any other applicable laws enacted by the Government of India or any statutory authority. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/her/it for the different competing schemes of various mutual funds from amongst which the Scheme is being recommended to me/us. I/We declare that the information given in this application form is correct, complete and truly stated. In the event of my/our not fulfilling the KYC process to the satisfaction of the **AMC/Mutual Fund**, I/We hereby authorize the **AMC/Mutual Fund** to refund the units against the funds invested by me/us at the applicable NAV as on the date of such redemption. I/We agree to notify the AMC immediately in the event of any information in the self-certification changes. I/We hereby authorize the **Mutual Fund**, the AMC and its agents to disclose my/our details including investments details to my/our bank(s)/the Mutual Fund's Bank(s) and/or Distributor/Broker/Investment Advisor and to verify my/our bank details provided by me/us, or to disclose to such other service providers as deemed necessary for conduct of business. If the transaction is delayed or not affected at all for reasons of incomplete or incorrect information, I/We would not hold the Mutual Fund, the AMC, its service providers or representatives responsible. I/We will also inform the AMC about any changes in my/our bank account. The AMC can rely on the KYC/FATCA related details provided by me to the Depository Participant. Applicable to NRIs: I/We confirm that I am/We are Non-Resident(s) 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(s).

SIGNATURE(S)

1 st Applicant / Guardian / POA Signature	2 nd Applicant / POA Signature	3 rd Applicant / POA Signature
--	---	---

Date D D M M Y Y Y Y Place _____

GENERAL GUIDELINES FOR APPLICATION FORM

- a. Please read the Scheme Information Document/Key Information Memorandum of the Scheme carefully before investing.
- b. Please furnish all information marked as 'MANDATORY'. In the absence of any mandatory information, the application would be rejected.
- c. The application form should be completed in ENGLISH.
- d. All cheques, demand drafts and pay orders should be crossed "Account Payee only" and made in favour of "Scheme Name".
- e. If the Scheme name on the NFO form and on the payment instrument are different, the application may be processed and units allotted at applicable NAV of the scheme mentioned in the application / transaction slip duly signed by investor(s).
- f. Any over-writing / changes made while filling the form must be authenticated by cancelling the original entry, re-entering correct details and ensuring that all applicants counter-sign against each correction.
- g. Investors must write the application form number / folio number on the reverse of the cheque / demand draft.
- h. FATCA Declaration: Individual investors, please fill in FATCA / CRS annexure and attach along with Application form. Non-Individual investors, please fill in UBO form along with FATCA / CRS annexure and attach along with Application form.
- i. Please strike off sections that are not applicable.

INSTRUCTIONS FOR APPLICATION FORM

1. DISTRIBUTOR INFORMATION

- a. 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.
- b. Please mention 'DIRECT' in case the application is not routed through any distributor.
- c. Pursuant to SEBI circular dated September 13, 2012, mutual funds have created a unique identity number of the employee/ relationship manager/ sales person of the distributor interacting with the investor for the sale of mutual fund products, in addition to the AMFI Registration Number (ARN) of the distributor. This Employee Unique Identification Number is referred as "EUIN". EUIN aims to assist in tackling the problem of mis-selling even if the employee/relationship manager/sales person leaves the employment of the distributor or his/her sub broker. Quoting of EUIN is mandatory in case of advisory transactions.
- d. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided, in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIN of the Sales Person (if any) in the "EUIN" column.
- e. Distributors are advised to ensure that they fill in the RIA code, in case they are a Registered Investment Advisor.
- f. Investors are requested to note that EUIN is largely applicable to sales persons of non individual ARN holders only (whether acting in the capacity of the main distributor or sub broker). Further, EUIN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ARN/14/12-13 dated July 13, 2012.

2. UNITS HELD IN DEMATERIALISED FORM

- 1) Unit holders must provide their demat account details in the specified section of the application form. The unit holder are required to have a beneficiary account with the Depository Participant(DP) and will be required to indicate in the application the DP's name, DP ID number and the beneficiary account number of the applicant with the DP. Applicant's must ensure that the sequence of names and other details like Client ID, Address and PAN details as mentioned in the application form matches that of the account held with the Depository Participant. Only those applications where the details are matched with the depository data will be treated as valid applications. If the details mentioned in the application are incomplete/incorrect not matched with the depository data, then the application will be rejected and money refunded to the investor.

3. APPLICANT'S INFORMATION

- a. Please furnish names of all applicants. The name of the Sole /First Applicant should be mentioned in the same manner in which it appears in the Demat Account. Please note the following:
 - In case the applicant is a Non-Individual investor, the Contact Person's name should be stated in the space provided (Name of Guardian / Contact Person)
 - In case the applicant is a minor, the Guardian's name should be stated in the space provided (Name of Guardian / Contact Person). It is mandatory to provide the minor's date of birth in the space provided.
 - In case the application is being made on behalf of a minor, he / she shall be the Sole Holder/ Beneficiary. There shall be no joint account with a minor unitholder.
- b. As per recent guidelines, Primary holders are required to provide their Email Address and Mobile number for ease of communications and to prevent fraudulent transactions.
- c. Please indicate the tax status of the sole/1st applicant at the time of investment. The abbreviations used in this section are :
NRI: Non Resident Indian, PIO: Person of Indian Origin, FII: Foreign Institutional Investor, NGO: Non Government Organization, AOP: Association of Persons, BOI: Body of Individuals, HUF : Hindu Undivided Family.
- d. Where the investment is on behalf of a Minor by the Guardian:
 - The Minor shall be the first and sole holder in the account.
 - No Joint holders are allowed. In case an investor provides joint holder details, these shall be ignored.
 - Guardian should be either a natural guardian (i.e. father or mother) or a court appointed legal guardian.
 - Guardian should mention the relationship with Minor and date of birth of the Minor on the application form.
 - A document evidencing the relationship and date of birth of the Minor should be submitted along with the application form. Photocopy of any one of the following

documents can be submitted a) Birth certificate of the minor or b) school leaving certificate / mark sheet of Higher Secondary board of respective states, ICSE, CBSE etc. c) Passport of the minor d) Any other suitable proof evidencing the relationship.

- Where the guardian is not a natural guardian (father or mother) and is a court appointed legal guardian, suitable supporting documentary evidence should be provided.
- If the mandatory details and/or documents are not provided, the application is liable to be rejected without any information to the applicant.
- The bank a/c to be in name of minor or guardian with minor as joint.
- f. Choice Mutual Fund has decided to restrict subscriptions from United States persons (U.S. person) as defined under the extant laws of the United States of America and Residents of Canada in the schemes of Choice Mutual Fund. Any individual who is a foreign national or any entity that is not an Indian Resident under the Foreign Exchange Management Act, 1999, except where registered with SEBI as an FPI, Non-Resident Indians residing in the Financial Action Task Force (FATF) Non Compliant Countries and Territories (NCTTs) & Overseas Corporate Bodies.

9. KYC Requirements And Details:

Please furnish PAN & KYC details for each applicant/unit holder, including the Guardian and/or Power Of Attorney (POA) holders as explained in the below points.

• PAN

It is mandatory for all investors (including guardians, joint holders, NRIs and power of attorney holders) to provide their Income Tax Permanent Account Number (PAN) and also submit a photocopy of the PAN card at the time of purchase of Units except for investors who are exempted from PAN requirement, please refer to KYC Form for exemption of PAN requirement.

• KNOW YOUR CUSTOMER (KYC)

Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14 digit KYC Identification Number (KIN) in application form as per AMFI circular 135/BP/68/2016-17. To download Common KYC Application Form, please visit our website www.choicemf.com.

• Operationalisation of Central KYC Records Registry (CKYCR)

Central Registry of Securitisation and Asset Reconstruction and Security interest of India 'CERSAI' has been authorised by Government of India to act as Central KYC Records Registry under Prevention of Money-Laundering (Maintenance of Records) Rules, 2005 ('PMLA Rules').

SEBI vide its circular ref. no. CIR/MIRSD/66/2016 dated July 21, 2016 and circular ref. no. CIR/MIRSD/120/2016 dated November 10, 2016 has prescribed that the Mutual Fund/ AMC should capture KYC information for sharing with CKYCR as per the KYC template prescribed by CERSAI.

In accordance with the aforesaid SEBI circulars and AMFI best practice guidelines for implementation of CKYC norms with effect from February 1, 2017:

- a) Individual investors who have never done KYC process under KRA regime i.e. a new investor who is new to KRA system and whose KYC is not registered or verified in the KRA system shall be required to provide KYC details in the CKYC Form to **the Mutual Fund/ AMC**.
- b) Individual investor who fills old KRA KYC Form, should provide additional / missing information using Supplementary KYC Form or fill CKYC Form.
- c) Details of investors shall be uploaded on the system of CKYCR and a 14 digit unique KYC identifier ('KIN') will be generated for such customer.
- d) New investors, who have completed CKYC process & have obtained KIN may quote their KIN in the application form instead of submitting CKYC Form/ Supplementary KYC Form.
- e) AMC/ Mutual Fund shall use the KIN of the investor to download the KYC information from CKYCR system and update its records.
- f) If the PAN of investor is not updated on CKYCR system, the investor should submit selfcertified copy of PAN card to the Mutual Fund/ AMC.

The CKYC Form and Supplementary KYC Form are available at Investor Service Centre (ISC) of Choice Mutual Fund and on website www.choicemf.com.

The AMC reserves the right to reject transaction application in case the investor(s) fails to submit information and/or documentation as mentioned above. In the event of non compliance of KYC requirements, the Trustee / AMC reserves the right to freeze the folio of the investor(s).



www.choicemf.com



support@choicemf.com



1800-266-3866

(Mon-Fri 10.00 a.m. to 5.00 p.m.
1st & 3rd Saturday - 10.00 a.m. to 3 p.m.,
2nd & 4th Saturday Holiday
All Sunday & Non Business day holiday)

h. Contact Information

- a. Please furnish the full postal address of the Sole/ First Applicant with PIN/Postal Code and complete contact details. (P.O. Box address is not sufficient).
- b. Please note that all communication i.e. Annual Report, News Letters will be sent via e-mail, if the e-mail id of the investor is provided in the application form.
- c. Overseas address is mandatory for NRI/FII investors.

i. Instructions for LEI

As per the RBI circular no RBI/2020-21/82, obtaining the Legal Entity Identifier is mandatory for all non-individuals and it should be quoted in any financial transactions of Rs.50 Crores and above routed through RTGS/NEFT w.e.f 1st April 2021. It is applicable for all purchases (inward remittance), redemption / IDCW / brokerage payouts (outward remittance).

4. INVESTMENT/PAYMENT DETAILS

- Third Party Payment" shall mean payment made through an instrument issued from an account other than that of the beneficiary investor. In case of payment instruments issued from a joint bank account, the first named applicant/investor must be one of the joint holders of the bank account from which the payment instrument is issued.'Related person/s' means such persons as may be specified by the AMC from time to time. The investors making an application under the exceptional cases are required to comply with the following, without which their applications for subscriptions for units will be rejected / not processed.
- Mandatory KYC compliance of the investor and the person making the payment, in order to determine the identity of the investor and the person issuing the payment instrument.
- Submit a separate, prescribed, 'Third Party Payment Declaration Form' and the person making the payment i.e., the Third Party, giving details of the bank account from which the payment is made and the relationship of the Third Party with the beneficiary. (The declaration form is available at www.choicemf.com)
- Submit a cancelled cheque leaf or copy of bank statement / pass book page mentioning bank account number, account holders' name and address or such other document as the AMC may require for verifying the source of funds to ascertain that funds have been remitted from the drawer's account only.

For identifying Third Party Payments, investors are required to comply with the requirements specified below:

- a. Payment by Cheque: An investor at the time of his/her purchase must provide the details of pay-in bank account (i.e. account from which a subscription payment is made). Identification of third party cheques by the AMC / Registrars will be on the basis of either matching of pay-in bank account details with registered/pay-out bank account details or by matching the bank account number/name/signature of the first named investor with the name/account number/signature available on the cheque. If the name/bank account number is not pre-printed on the cheque and signature on the cheque does not match with signature on the application, then the first named applicant/investor should submit any one of the following documents:
 - (i) a copy# of the bank passbook or a statement of bank account having the name and address of the account holder and account number;
 - (ii) a letter* (in original) from the bank on the bank's letterhead certifying that the investor maintains an account with the bank, alongwith information like bank account number, bank branch, account type, the MICR code of the branch & IFSC Code (where available).

*In respect of (ii) above, it should be certified by the bank manager with his/her full signature, name, employee code, bank seal and contact number. Investors should note that where the bank account numbers have changed on account of the implementation of core banking system at their banks, any related communication from the bank towards a change in bank account number should accompany the application form for subscription of units.

b. Payment by Prefunded Instrument:

- If the subscription is settled with pre-funded instruments such as Pay Order, Demand Draft, Banker's cheque, etc., a certificate (in original) from the Issuing banker must accompany the purchase application, stating the Account holder's name and the Account number which has been debited for issue of the instrument. The account number mentioned in the Certificate should be a registered bank account or the first named unitholder should be one of the account holders to the bank account debited for issue of such instruments.

c. Payment by RTGS, NEFT, ECS, Bank transfer, etc:

A copy of the instruction to the bank stating the account number debited must accompany the purchase application. The account number mentioned on the transfer Instruction copy should be a registered bank account or the first named unitholder should be one of the account holders to the bank account.

The above broadly covers the various modes of payment for mutual fund subscriptions. The above list is only indicative not exhaustive list and any other mode of payment as introduced from time to time will also be covered accordingly. In case the application for subscription does not comply with the above provisions, the AMC / Registrars retains the Sole and absolute discretion to reject/not process such application and refund the subscription money and shall not be liable for any such rejection.

I. LUMPSUM INVESTMENT

If you are from a city where there is no designated Investor Service Centre of Choice MF, you may make a payment by a Demand Draft for the investment amount. Please enter the cheque or DD amount, DD Charges (if applicable) and the investment amount. The AMC shall bear the DD Charges incurred by an applicant as per demand draft charges prescribed by State Bank of India. The AMC shall, however, not refund any DD charges to the investor under any circumstances.

NRI investors

NRIs and PIOs may purchase units of the scheme(s) on a repatriation and non-repatriation basis, while FIIs may purchase units only on a repatriation basis. They shall attach a copy of the cheque used for payment or a Foreign Inward Remittance Certificate (FIRC) or an Account Debit Certificate from the bankers along with the application form to enable the AMC to ascertain the repatriation status of the amount invested. The account type shall be clearly ticked as NRE or NRO or FCNR, to enable the AMC determine the repatriation status of the investment amount. The AMC and the Registrar may rely on the repatriation status of the investment purely based on the details provided in the application form.

Repatriation basis

- NRIs and PIOs may pay their subscription amounts by way of Indian Rupee drafts purchased abroad, cheques drawn on Non-Resident External (NRE) Accounts or Indian Rupee drafts payable at par at any of the centres where the AMC has a designated ISC and purchased out of funds held in NRE Accounts / FCNR Accounts. FIIs may pay their subscription amounts either by way of inward remittance through normal banking channels or out of funds held in Foreign Currency Accounts or Non Resident Rupee Accounts maintained with a designated branch of an authorised dealer with the approval of RBI.
- In case Indian Rupee drafts are purchased abroad or from FCNR/NRE accounts, an account debit certificate from the bank issuing the draft confirming the debit shall also be submitted with the application form. NRIs shall also be required to furnish such other documents as may be necessary and as requested by the AMC/Mutual Fund/Registrar, in connection with the investment in the schemes.

Non-Repatriation basis

NRIs and PIOs may pay their subscription amounts by cheques/demand drafts drawn out of Non-Resident Ordinary (NRO) accounts/ Non-Resident Special Rupee (NRSR) accounts and Non Resident Non-Repatriable (NRNR) accounts payable at the city where the application form is accepted.

5. FOREIGN ACCOUNT TAX COMPLIANCE (FATCA)

FATCA & CRS TERMS & CONDITIONS: Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

Please note that you may receive more than one request for information if you have multiple relationships with Choice Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

FATCA & CRS INSTRUCTIONS:

*In case Tax Identification Number is not available, kindly provide its functional equivalent.

Reason A: The country where the Account holder is liable to pay tax does not issue Tax Identification Number to its residents.

Reason B: No TIN required. (Section this reason only if the authorities of the respective country of tax residence do not require the TIN to be collected)

Reason C: Other, please state the reason therefore

For Non-Individual investors, please fill in UBO form along with FATCA / CRS annexure and attach along with Application form available on our website www.choicemf.com.

If you have any questions about your tax residency, please contact your tax advisor.

\$It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

- With effect from November 1, 2015 all investors will have to mandatorily provide the information and declarations pertaining to FATCA/CRS for all new accounts opened, failing which the application / transaction request shall be liable to be rejected.
- Investors are requested to provide all the necessary information / declarations to facilitate compliance, considering India's commitment to implement CRS and FATCA under the relevant international treaties.

Please consult your professional tax advisor for further guidance on your tax residency, if required.

In case customer has the following Indicia pertaining to a foreign country and yet declares self to be non-tax resident in the respective country, customer to provide relevant Curing Documents as mentioned below:

FATCA & CRS Indicia observed (ticked)	Documentation required for Cure of FATCA/ CRS Indicia
U.S. place of birth	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a resident for tax purposes; 2. Non-US passport or any non-US government issued document evidencing nationality or citizenship; AND 3. Any one of the following documents: Certified Copy of "Certificate of Loss of Nationality" or Reasonable explanation of why the customer does not have such a certificate despite renouncing US citizenship; or Reason the customer did not obtain U.S. citizenship at birth
Residence/ mailing address in a country other than India	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence
Telephone number in a country other than India	<p>If no Indian telephone number is provided</p> <ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence <p>If Indian telephone number is provided along with a foreign country telephone number</p> <ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident for tax purposes of any country other than India; OR 2. Documentary evidence
Telephone number in a country other than India	<ol style="list-style-type: none"> 1. Self-certification that the account holder is neither a citizen of United States of America nor a tax resident of any country other than India; and 2. Documentary evidence

6. ONLINE DISPUTE REDRESSAL MECHANISM

In accordance with SEBI circular no. SEBI/HO/OIAE/OIAE-IAD-1/P/CIR/2023/145 dated July 31, 2023 (updated on August 24, 2023) ("the circular") all disputes between institutional or corporate clients and AMC can be resolved at the option of the institutional or corporate clients.

- a. In accordance with the circular and by harnessing online conciliation and/or by online arbitration as specified in the circular OR

- b. by harnessing any independent institutional mediation, conciliation and/or online arbitration institution in India.

7. DECLARATION AND SIGNATURES

- Please tick the box provided for EUIN declaration in this section in case the ARN is mentioned in the distributor section and the EUIN is left blank.
- All signatures should be hand written in English or any Indian language. Thumb impressions should be from the left hand for males and the right hand for females and in both cases must be attested by a Judicial Magistrate or a Notary Public.
- If the application form is signed by a Power of Attorney (PoA) holder, the form should be accompanied by a notarised photocopy of the PoA. Alternatively, the original PoA may be submitted, which will be returned after verification. If the PoA is not submitted with the application, the Application Form will be rejected. The POA should contain the signature of the investor (POA Donor) and the POA holder.
- In case of corporates or any non-individual investors, a list of authorised signatories should be submitted along with Application form or in case of any change in the authorised signatory list, the AMC / Registrar must be notified within 7 days.
- In case of application under POA or by a Non-Individual (i.e. Company, trust, society, partnership firm etc.) the relevant POA or the resolution should specifically provide for/ authorize the POA holder/ authorized signatory to make application/ invest moneys on behalf of the investor.

8. GO GREEN INITIATIVE IN MUTUAL FUNDS

- With respect to the directives issued by SEBI via Gazette Notification SEBI/LAD-NRO/GN/2018/14 & Circular SEBI / HO / IMD / DF2 / CIR / P/2018/92 regarding Go Green Initiative in Mutual Funds regarding disclosing and providing information to investors through digital platform as a green initiative measure.
- In line with above initiative, Choice Mutual Fund has adopted 'Go Green Initiative for Mutual Funds' and accordingly, the scheme Annual Reports /Abridged Summary will be hosted on our website www.choicemf.com in a downloadable format. Further, wherever email ids are registered in our records, the scheme Annual Reports / Abridged Summary will be sent via email.
- If you do not opt-in to receive a physical copy of the scheme Annual Report/ Abridged Summary, you can view the same on our website or alternatively contact our registered office to get a physical copy of the Annual Report/Abridged Summary.

9. IMPLEMENTATION OF AMENDMENTS IN INDIAN STAMP ACT, 1899

Investors / Unit Holders of all the Scheme(s) of the Mutual Fund pursuant to Notification No. S.O. 4419(E) dated December 10, 2019 issued by Department of Revenue, Ministry of Finance, Government of India, read with Part I of Chapter IV of Notification dated February 21, 2019 and Notification dated March 30, 2020 issued by Legislative Department, Ministry of Law and Justice, Government of India on the Finance Act, 2019, a stamp duty @ 0.005% of the transaction value would be levied on mutual fund transactions with effect from July 1, 2020. Accordingly, pursuant to levy of stamp duty, the number of units allotted on purchase) to the unitholders would be reduced to that extent.



www.choicemf.com



support@choicemf.com



1800-266-3866

(Mon-Fri 10.00 a.m. to 5.00 p.m.
1st & 3rd Saturday - 10.00 a.m. to 3 p.m.,
2nd & 4th Saturday Holiday
All Sunday & Non Business day holiday)

APPLICATIONS SUPPORTED BY BLOCKED AMOUNT (ASBA)

Application Form (to be used by investors adopting the ASBA route)

Choice
The Joy of Earning

KEY PARTNER/AGENT INFORMATION (Investors Applying under direct plan should mention "DIRECT" in ARN Column)

Distributor/ RIA Code	Sub Agent ARN	Sub Agent Code/Bank Branch Code/Internal Code	*Employee Unique Identification Number (EUIN)

* EUIN Declaration (Only where EUIN box is left blank) - EUIN Declaration: 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 and the distributor has not charged any advisory fees on this transaction.

Signature of Sole/First Applicant

Signature of Second Applicant

Signature of Third Applicant

1. INVESTOR'S DETAILS (Names should be in the same sequence as appearing in your Demat Account. In case of discrepancies, the Application is liable to get rejected.)

Sole/First Applicant

KYC Identification Number (KIN) PAN Proof to be enclosed (✓) PAN card copy
Guardian's Name (If Sole / First Applicant is a Minor) OR Contact Person's (In case of Non-Individual Investors only)

Name

KYC Identification Number (KIN) PAN Proof to be enclosed (✓) PAN card copy
Are you a resident of USA/Canada? (✓) Yes No Default if not ticked.

Email Address Contact No.

Legal Entity Identification [*Applicable for Non-Individuals only]

Bank Name IFSC Code
A/c No. Account Type (Please ✓) Savings Current NRE NRO Others (please specify)

2nd holder Name

KYC Identification Number (KIN) PAN Proof to be enclosed (✓) PAN card copy
Email Address Contact No.

3rd holder Name

KYC Identification Number (KIN) PAN Proof to be enclosed (✓) PAN card copy
Email Address Contact No.

2. INVESTMENT DETAILS

Scheme Name Plan (✓) Regular Direct Growth ISIN
Total amount to be blocked in figures ₹ (in words)

3. SCSB ACCOUNT DETAILS (please refer websites of NSE, BSE and SEBI for list of SCSBs)

Bank Name
Branch Address
Bank A/c. No. A/c. Type: Savings Current NRO NRE* * For NRI Investors

4. DEMAT ACCOUNT INFORMATION (Mandatory for crediting units in demat account)

Please furnish the below details and enclose a copy of the Client Master/Transaction Cum Holding Statement/ Cancelled delivery instruction slip.

NSDL DP Name DP ID | I | N | Beneficiary A/c No.
CDSL DP Name Beneficiary A/c No.

5. UNDERTAKING BY ASBA INVESTOR / ACCOUNT HOLDER

- I/We hereby undertake that I/We am/are an ASBA investor(s) as per the applicable provisions of the SEBI (Issue of Capital and Disclosure Requirements) Regulations, 2009.
- In accordance with ASBA process provided in the SEBI (Issue of Capital and Disclosure Requirements) Regulations, 2009, I/We authorize (a) the Self Certified Syndicate Bank (SCSB) to do all acts as are necessary to make an application for purchase of units in the NFO blocking the amount to the extent mentioned above in the "SCSB details" or unblocking of funds in the bank account maintained with the SCSB specified in the ASBA Form, transfer of funds to the Issuer's account designated for this purpose on receipt of instruction from the Registrar after finalisation of the basis of allotment entitling me/us to receive Units on such transfer of funds, etc. (b) Registrar to Choice Mutual Fund to issue instructions to the SCSB to remove the block on the funds in the bank account specified in the ASBA Form, upon finalisation of the basis of allotment and to transfer the requisite money to the Issuer's account designated for this purpose.
- In case the amount available in the bank account specified in the ASBA Form is insufficient for blocking the amount equivalent to the application money, the SCSB shall reject the application.
- If the DP ID, Client ID or PAN furnished in the ASBA Form is incorrect or incomplete, the ASBA Application shall be rejected and the AMC, R&TA and SCSB shall not be liable for losses, if any.
- I/We hereby authorise the SCSB to make relevant revisions as may be required to be done during the NFO, in the event of price revision.

Having read and understood the contents of the SID and SAI, I / We hereby apply under Direct / AMFI Certified empanelled distributors to the Trustees of Choice Mutual Fund for units of the Scheme / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We have understood the details of the Scheme and I / We have not received or been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We hereby authorise Choice Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my / our bank(s) / Choice Mutual Fund's Bank(s) and / or Distributor / Broker / Investment Advisor and to verify my / our bank details provided by me / us. I / We hereby declare that the particulars given above are correct and express my / our willingness to make payments referred above through participation in ECS / Direct Debit Facility. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I / We would not hold Choice Mutual Fund, their appointed service providers or representatives responsible. I / We will also inform Choice Mutual Fund, about any changes in my / our bank account. We have understood that the present scheme does not offer any guarantee or assured return and that the scheme is subject to credit risk or default risk including possible loss of principal, any losses in case of a default will be borne by me/us.

*I / We confirm that I am / We are Non-Residents of Indian Nationality / Origin and that the funds are remitted from abroad through approved banking channels or from my / our NRE / NRO / FCNR Account. I / We confirm that the details provided by me / us are true and correct. I / We hereby declare that the amount being invested by me / us in the Scheme of Choice Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time. *Applicable to NRI I / We confirm 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. I / We acknowledge that the AMC has not considered my/our tax position in particular and that I/we should seek tax advice on the specific tax implications arising out of my/our participation in the scheme. I / We confirm that I am/We are not United States person(s) under the laws of United States or resident(s) of Canada. Incase 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).

Signature of the Applicant(s)	1. Sole / First Applicant / Guardian / POA	2. Second applicant / POA	3. Third Applicant / POA	Attn: NRI investors; payment must be made through NRE/ FCNR Accounts)
Signature of the Bank Account Holder(s)	1. Sole / First Applicant / Guardian / POA	2. Second applicant / POA	3. Third Applicant / POA	

ACKNOWLEDGEMENT SLIP - APPLICATIONS SUPPORTED BY BLOCKED AMOUNT (ASBA)

Scheme Name Plan Option

Received from Mr./Ms.

SCSB Account details: Account No.

Bank Name Branch

Total Amount to be blocked :

Choice
The Joy of Earning

Application No.

Folio No.

PAN No.

Instructions for filling up the Application Form

Background:

In its continuing endeavor to make the existing New Fund Offer process more efficient, SEBI introduced a supplementary process of applying in New Fund Offer, viz: the "Applications Supported by Blocked Amount (ASBA)" process. Accordingly, Securities and Exchange Board of India (Issue of Capital and Disclosure Requirements) Regulations, 2009, as amended have been amended for ASBA process. The salient features of circular no. SEBI/CFD/DIL/ASBA/1/2009/30/12 dated December 30, 2009 available on SEBI website for "Additional mode of payment through Applications Supported by Blocked Amount (hereinafter referred to as "ASBA") are mentioned below for understanding the ASBA process:

1. **Meaning of ASBA:** ASBA is an application for subscribing to a New Fund Offer (NFO), containing an authorisation to block the application money in a bank account.
2. **Self Certified Syndicate Bank (SCSB):** SCSB is a banker to an issue registered with the SEBI which offers the facility of applying through the ASBA process. The list of SCSBs will be displayed by SEBI on its website at www.sebi.gov.in from time to time. ASBAs can be accepted only by SCSBs, whose names appear in the list of SCSBs displayed on SEBI's website. Investors maintaining their accounts in any of these Banks may approach one of the designated branches of these SCSBs for availing this facility. Further it may be noted that from time to time new banks register themselves as SCSBs who become eligible to provide these services and also the existing SCSBs designate additional branches that also provide this facility. An updated list of all the registered SCSBs, their controlling branches, contact details and details of their contact persons, a list of their designated branches which are providing such services is available on the website of SEBI at the address <http://www.sebi.gov.in>. Further these details are also available on the websites of the Stock Exchanges at <http://www.bseindia.com> and <http://www.nseindia.com>. Alternatively, investors may also contact the AMC, R&TA for information about the SCSBs or the ASBA process. These SCSBs are deemed to have entered into an arrangement with the Issuer and shall be required to offer the ASBA facility to all its account holders for all issues to which ASBA process is applicable. An SCSB shall identify its Designated Branches (DBs) at which an ASBA Applicant shall submit ASBA and shall also identify the Controlling Branch (CB), which shall act as a coordinating branch for the Registrar to the Issue, Stock Exchanges and Merchant Bankers. The SCSB, its DBs and CB shall continue to act as such, for all issues to which ASBA process is applicable. The SCSB may identify new DBs for the purpose of ASBA process and intimate details of the same to SEBI, after which SEBI will add the DB to the list of SCSBs maintained by it. The SCSB shall communicate the following details to Stock Exchanges for making it available on their respective websites. These details shall also be made available by the SCSB on its website:
 - (i) Name and address of the SCSB (ii) Addresses of DBs and CB and other details such as telephone number, fax number and email ids.
 - (iii) Name and contact details of a nodal officer at a senior level from the CB.
3. **Eligibility of Investors:** An Investor shall be eligible to apply through ASBA process, if he/she:
 - (i) is a Resident Retail Individual Investor, Non Institutional Investor, QIBs, Eligible NRIs applying on non-repatriation basis, Eligible NRIs applying on repatriation basis i.e. any investor,
 - (ii) is applying through blocking of funds in a bank account with the SCSB; Such investors are hereinafter referred as „ASBA Investors”.
4. **ASBA Facility in Brief:** Investor shall submit his / her Application through an ASBA Application Form, either in physical or electronic mode, to the SCSB with whom the bank account of the ASBA Investor or bank account utilised by the ASBA Investor (ASBA Account) is maintained. The SCSB shall block an amount equal to the NFO application Amount in the bank account specified in the ASBA Application Form, physical or electronic, on the basis of an authorisation to this effect given by the account holder at the time of submitting the Application. The Application Amount shall remain blocked in the aforesaid ASBA Account until the Allotment in the New Fund Offer and consequent transfer of the Application Amount against the allocated Units to the Issuers account designated for this purpose, or until withdrawal/failure of the Offer or until withdrawal / rejection of the ASBA Application, as the case may be. The ASBA data shall thereafter be uploaded by the SCSB in the electronic IPO system of the Stock Exchanges. Once the Allotment is finalised, the R&TA shall send an appropriate request to the Controlling Branch of the SCSB for unblocking the relevant bank accounts and for transferring the amount allocable to the successful ASBA Applicants to the AMC account designated for this purpose. In case of withdrawal/

Rejection of the Offer, the R&TA shall notify the SCSBs to unblock the blocked amount of the ASBA Applicants within one day from the day of receipt of such notification.

5. **Obligations of the AMC:** AMC shall ensure that adequate arrangements are made by the R&TA to obtain information about all ASBAs and to treat these applications similar to non-ASBA applications while allotment of Units, as per the procedure specified in the Securities and Exchange Board of India (Issue of Capital and Disclosure Requirements) Regulations, 2009.

Investors are requested to check with their respective banks about the availability of the ASBA facility.

6. Other Information for ASBA Investors:

1. On the closure date of the NFO, the ASBA form should be submitted to the SCSBs before the 3.00 p.m. or such other time as may be decided by respective SCSBs.
2. The Applicant intending to invest in the Scheme through ASBA Process will be required to have a beneficiary account with a Depository Participant (DP) of NSDL/ CDSL and will be required to mention in the application form DP ID No. and Beneficiary Account No. with the DP at the time of purchasing Units during the NFO.
3. Signatures as available with depository will be taken for all purpose after the allotment of units incase of demat holding.
4. All static details in our records would be taken from the demat account (DP ID) provided by you.
5. Bank account details provided in the ASBA Application form will be used for refunding reject applications where DP ID is not matching
6. Bank Mandate for redemptions/dividend will be as per your DP ID incase of demat holding.
7. SCSB shall give ASBA investors an acknowledgement for the receipt of ASBAs.
8. SCSB shall not upload any ASBA in the electronic system of the Stock Exchange(s) unless (i) it has received the ASBA in a physical or electronic form; and (ii) it has blocked the application money in the bank account specified in the ASBA or has systems to ensure that Electronic ASBAs are accepted in the system only after blocking of application money in the relevant bank account opened with it.
9. SCSB shall ensure that complaints of ASBA investors arising out of errors or delay in capturing of data, blocking or unblocking of bank accounts, etc. are satisfactorily redressed.
10. SCSB shall be liable for all its omissions and commissions in discharging responsibilities in the ASBA process.
11. R&TA shall act as a nodal agency for redressing complaints of ASBA and non-ASBA investors, including providing guidance to ASBA investors regarding approaching the SCSB concerned.
12. ASBA facility is currently available only to those investors who wish to hold the units in dematerialized form.

Grounds for rejection of ASBA applications

ASBA application forms can be rejected by the AMC/Registrar/ SCSBs, on the following technical grounds:

1. Applications by persons not competent to contract under the Indian Contract Act, 1872, including but not limited to minors, insane persons etc.
2. Mode of ASBA i.e. either Physical ASBA or Electronic ASBA, not selected or ticked.
3. ASBA Application Form without the stamp of the SCSB.
4. Application by any person outside India if not in compliance with applicable Foreign and Indian laws.
5. Bank account details not given/incorrect details given.
6. Duly certified Power of Attorney, if applicable, not submitted along with the ASBA Application Form.
7. No corresponding records available with the Depositories matching the parameters namely (a) Names of the ASBA applicants (including the order of names of joint holders) (b) DP ID (c) Beneficiary account number or any other relevant details pertaining to the Depository Account.
8. Insufficient funds in the investor's account.
9. Application accepted by SCSB and not uploaded on/with the Exchange / Registrar

ACKNOWLEDGEMENT SLIP - APPLICATIONS SUPPORTED BY BLOCKED AMOUNT (ASBA)

Scheme Name _____ Plan _____ Option _____

Received from Mr./Ms. _____

SCSB Account details: Account No. _____

Bank Name _____ Branch _____

Total Amount to be blocked : _____

Choice
The Joy of Earning

Application No. _____

Folio No. _____

PAN No. _____

 Website: www.choicemf.com	 Email: support@choicemf.com	 Contact number -1800-266-3866 <small>(Mon-Fri 10.00 a.m. to 5.00 p.m., 1st & 3rd Saturday - 10.00 a.m. to 3 p.m., 2nd & 4th Saturday Holiday All Sunday & Non Business day holiday)</small>
---	---	---

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

ADDITIONAL KYC INFORMATION AND FATCA & CRS ANNEXURE FOR INDIVIDUAL ACCOUNTS

(Including Sole Proprietor) (Refer to instructions)

Choice
The Joy of Earning

FIRST / SOLE APPLICANT / GUARDIAN

Name		PAN																			
						OR PAN Exempt KYC Ref No. (PEKRN)															
Place of Birth:		Country of Birth:																			
Nationality:		Tax Residence Address (for KYC address):																			
<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____		<input type="checkbox"/> Residential <input type="checkbox"/> Office <input type="checkbox"/> Registered Office <input type="checkbox"/> Business																			
Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? <input type="checkbox"/> Yes <input type="checkbox"/> No																					
If 'No', please proceed with the signature of declaration																					
If 'Yes', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries																					
Sr. No.	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other, please specify)	If TIN is not available, please tick the reason A, B or C (as defined below)																	
1				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*																	
2				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*																	
* Please specify reason																					
Reason A : The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.																					
Reason B : No TIN required. (Select this reason only if the authorities of the respective country of tax residence do not require the TIN to be collected)																					
Reason C : others; please state the reason thereof.																					
Occupation Details : <table> <tr> <td><input type="checkbox"/> Service</td> <td><input type="checkbox"/> Private Sector</td> <td><input type="checkbox"/> Public Sector</td> <td><input type="checkbox"/> Government Service</td> <td><input type="checkbox"/> Student</td> <td><input type="checkbox"/> Professional</td> <td><input type="checkbox"/> Housewife</td> </tr> <tr> <td><input type="checkbox"/> Business</td> <td></td> <td><input type="checkbox"/> Retired</td> <td><input type="checkbox"/> Agriculture</td> <td><input type="checkbox"/> Proprietorship</td> <td><input type="checkbox"/> Others (please specify) _____</td> <td></td> </tr> </table>								<input type="checkbox"/> Service	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional	<input type="checkbox"/> Housewife	<input type="checkbox"/> Business		<input type="checkbox"/> Retired	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Others (please specify) _____	
<input type="checkbox"/> Service	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional	<input type="checkbox"/> Housewife															
<input type="checkbox"/> Business		<input type="checkbox"/> Retired	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Others (please specify) _____																
Gross Annual Income <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																					
Politically Exposed Person (PEP) Status* <input type="checkbox"/> PEP <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable																					
*PEP are defined as individuals who are or have been entrusted with prominent publications in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.																					

SECOND APPLICANT

Name		PAN																			
						OR PAN Exempt KYC Ref No. (PEKRN)															
Place of Birth:		Country of Birth:																			
Nationality:		Tax Residence Address (for KYC address):																			
<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____		<input type="checkbox"/> Residential <input type="checkbox"/> Office <input type="checkbox"/> Registered Office <input type="checkbox"/> Business																			
Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? <input type="checkbox"/> Yes <input type="checkbox"/> No																					
If 'No', please proceed with the signature of declaration																					
If 'Yes', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries																					
Sr. No.	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other, please specify)	If TIN is not available, please tick the reason A, B or C (as defined below)																	
				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*																	
				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*																	
* Please specify reason																					
Reason A : The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.																					
Reason B : No TIN required. (Select this reason only if the authorities of the respective country of tax residence do not require the TIN to be collected)																					
Reason C : others; please state the reason thereof.																					
Occupation Details : <table> <tr> <td><input type="checkbox"/> Service</td> <td><input type="checkbox"/> Private Sector</td> <td><input type="checkbox"/> Public Sector</td> <td><input type="checkbox"/> Government Service</td> <td><input type="checkbox"/> Student</td> <td><input type="checkbox"/> Professional</td> <td><input type="checkbox"/> Housewife</td> </tr> <tr> <td><input type="checkbox"/> Business</td> <td></td> <td><input type="checkbox"/> Retired</td> <td><input type="checkbox"/> Agriculture</td> <td><input type="checkbox"/> Proprietorship</td> <td><input type="checkbox"/> Others (please specify) _____</td> <td></td> </tr> </table>								<input type="checkbox"/> Service	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional	<input type="checkbox"/> Housewife	<input type="checkbox"/> Business		<input type="checkbox"/> Retired	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Others (please specify) _____	
<input type="checkbox"/> Service	<input type="checkbox"/> Private Sector	<input type="checkbox"/> Public Sector	<input type="checkbox"/> Government Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional	<input type="checkbox"/> Housewife															
<input type="checkbox"/> Business		<input type="checkbox"/> Retired	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	<input type="checkbox"/> Others (please specify) _____																
Gross Annual Income <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																					
Politically Exposed Person (PEP) Status* <input type="checkbox"/> PEP <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable																					
*PEP are defined as individuals who are or have been entrusted with prominent publications in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.																					

■ THIRD APPLICANT

Name _____		PAN _____	OR PAN Exempt KYC Ref No. (PEKRN)				
Place of Birth: _____		Country of Birth: _____					
Nationality: _____		Tax Residence Address (for KYC address): _____					
<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____		<input type="checkbox"/> Residential <input type="checkbox"/> Office <input type="checkbox"/> Registered Office <input type="checkbox"/> Business					
Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? <input type="checkbox"/> Yes <input type="checkbox"/> No							
If 'No', please proceed with the signature of declaration							
If 'Yes', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries							
Sr. No.	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other, please specify)	If TIN is not available, please tick the reason A, B or C (as defined below)			
1				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*			
2				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*			
* Please specify reason							
Reason A : The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.							
Reason B : No TIN required. (Select this reason only if the authorities of the respective country of tax residence do not require the TIN to be collected)							
Reason C : others; please state the reason thereof.							
Occupation Details : <input type="checkbox"/> Service Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (please specify) _____							
Gross Annual Income <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							
Politically Exposed Person (PEP) Status* <input type="checkbox"/> PEP <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable							
*PEP are defined as individuals who are or have been entrusted with prominent publications in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.							

■ POWER OF ATTORNEY (POA) HOLDER

Name _____		PAN _____	OR PAN Exempt KYC Ref No. (PEKRN)				
Place of Birth: _____		Country of Birth: _____					
Nationality: _____		Tax Residence Address (for KYC address): _____					
<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____		<input type="checkbox"/> Residential <input type="checkbox"/> Office <input type="checkbox"/> Registered Office <input type="checkbox"/> Business					
Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? <input type="checkbox"/> Yes <input type="checkbox"/> No							
If 'No', please proceed with the signature of declaration							
If 'Yes', please fill for ALL countries (other than India) in which you are a Resident for tax purposes i.e., where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries							
Sr. No.	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other, please specify)	If TIN is not available, please tick the reason A, B or C (as defined below)			
1				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*			
2				Reason <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C*			
* Please specify reason							
Reason A : The country where the Account Holder is liable to pay tax does not issue Tax Identification Number to its residents.							
Reason B : No TIN required. (Select this reason only if the authorities of the respective country of tax residence do not require the TIN to be collected)							
Reason C : others; please state the reason thereof.							
Occupation Details : <input type="checkbox"/> Service Private Sector <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Proprietorship <input type="checkbox"/> Others (please specify) _____							
Gross Annual Income <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							
Politically Exposed Person (PEP) Status* <input type="checkbox"/> PEP <input type="checkbox"/> Related to PEP <input type="checkbox"/> Not Applicable							
*PEP are defined as individuals who are or have been entrusted with prominent publications in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.							

■ CERTIFICATION

I hereby confirm that the information provided hereinabove is true, correct, and complete to the best of my knowledge and belief. I shall be solely liable and responsible for the information submitted above. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions and hereby accept the same. I also undertake to keep you informed in writing about any changes / modification to the above information in future within 30 days of the same being effective and also undertake to provide any other additional information as may be required by any intermediary or by domestic or overseas regulators / Tax authorities.

SIGNATURES

First / Sole Applicant / Guardian	Second Applicant	Third Applicant
Date <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	Place _____	

Details of Additional FATCA & CRS Information

(Only for Non Individuals)

Choice

The Joy of Earning

Name of the entity : _____

Type of address given at KRA Residential or Business Residential Business Registered Office

“Address of tax residence would be taken as available in KRA database. In case of any change, please approach KRA & notify the changes”

PAN

Date of incorporation

City of incorporation _____

Country of incorporation _____

Please tick the applicable tax resident declaration:

1. Is “Entity” a tax resident of any country other than India Yes No

(If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.)

Country	Tax Identification Number %	Identification Type (TIN or Other, please specify)

% In case Tax Identification Number is not available, kindly provide its functional equivalent\$.

In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc.

In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here

FATCA & CRS Declaration (Please consult your professional tax advisor for further guidance on FATCA & CRS classification)

PART A (to be filled by Financial Institutions or Direct Reporting NFEs)

We are a, Financial institution ⁵ <input type="checkbox"/>	GIIN <input type="text"/>
OR	Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below
Direct reporting NFE ⁶ <input type="checkbox"/> (please tick as appropriate)	Name of sponsoring entity <input type="text"/>
GIIN not available (please tick as applicable)	<input type="checkbox"/> Applied for <input type="checkbox"/> Not required to apply for - please specify 2 digits sub-category ⁷ <input type="text"/>
If the entity is a financial institution,	<input type="checkbox"/> Not obtained - Non-participating FI

PART B (please fill any one as appropriate “to be filled by NFEs other than Direct Reporting NFEs”)

1	Is the Entity a publicly traded company ¹ (that is, a company whose shares are regularly traded on an established securities market)	<input type="checkbox"/> No	Yes <input type="checkbox"/> (If yes, please specify any one stock exchange on which the stock is regularly traded)
			Name of stock exchange _____
2	Is the Entity a related entity ² of a publicly traded company (a company whose shares are regularly traded on an established securities market)	<input type="checkbox"/> No	Yes <input type="checkbox"/> (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded)
			Name of listed company _____
			Nature of relation: <input type="checkbox"/> Subsidiary of the Listed Company or <input type="checkbox"/> Controlled by a Listed Company
			Name of stock exchange _____
3	Is the Entity an active ³ NFE	<input type="checkbox"/> No	Yes <input type="checkbox"/>
			Nature of Business _____
			Please specify the sub-category of Active NFE <input type="checkbox"/> <input type="checkbox"/> (Mention code-refer 2c of Part C)
4	Is the Entity a passive ⁴ NFE	<input type="checkbox"/> No	Yes <input type="checkbox"/>
			Nature of Business _____