

alongwith Cheque / DD / Payment Instrument as detailed overleaf.

Application Form (Except for HDFC Gold Exchange Traded Fund and HDFC Children's Gift Fund)

Investors must read the Key Information Memorandum, the instructions and Product Labeling on cover page before completing this Form. The Application Form should be completed in English and in BLOCK LETTERS only. www.hdfcfund.com KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.) (Refer Instruction 1) FOR OFFICE USE ONLY (TIME STAMP) Internal Code for Sub-Agent Employee Unique Sub Agent's ARN/ Bank Branch Code ARN ARN Name cation Number (EUIN) Employee ARN-0155 16336 EUIN Declaration (only where EUIN box is left blank) (Refer Instruction 1) 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 no twithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker. First/ Sole Applicant/ Guardian Second Applicant Third Applicant TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Instruction 2) In case the purchase/ subscription amount is Rs. 10,000 or more and your Distributor has opted in 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. Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder. 1. EXISTING UNIT HOLDER INFORMATION (If you have existing folio, please fill in section 1 and proceed to section 4. Refer instruction 3). The details in our records under the folio number mentioned alongside will apply for this application. Folio No. 2. MODE OF HOLDING [Please tick (</) Single Anyone or Survivor Joint 3. UNIT HOLDER INFORMATION (Refer instruction 4) Proof of date of birth@ Please (/) DATE OF BIRTHO NAME OF FIRST / SOLE APPLICANT (In case of Minor, there shall be no joint holders) Attached Mr. Ms. M/s. KYC# [Please tick (</)] Proof Attached (Mandatory) Nationality PAN#/ PEKRN# NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON - DESIGNATION (in case of non-individual Investors) Mr Ms. Contact No. Nationality Designation KYC# [Please tick (</)]
(Mandatory) Proof Attached PAN#/PFKRN# Relationship with Minor@ Please (V) Father Mother Court appointed Legal Guardian Proof of relationship with minor@ Please (<) Attached @ Mandatory MAILING ADDRESS OF FIRST / SOLE APPLICANT (Mandatory) (Refer Instruction 4a) STATE PIN CODE CONTACT DETAILS OF FIRST / SOLE APPLICANT STD Code Telephone: Off. Res. ¿Docs Email ↑ «Alerts Mobile V We would like to register for my/our HDFCMF Personal Identification Number (HPIN) to transact ordine as per the terms & conditions displayed on website: www.hdfcfund.com (Email id mandatory). On providing email-id investors shall receive scheme wise annual report or an abridged summary thereof/ account statements/ statutory and other documents by email. (Refer Instruction 10 & 12) 4. FIRST/ SOLE APPLICANT OTHER DETAILS (Mandatory) (Refer instruction 4) 4a. Status of First/ Sole Applicant [Please tick (🗸)] 🔲 Individual 💹 Non - Individual [Please attach mandatory Ultimate Beneficial Ownership (UBO) Declaration Form] (Refer Instruction 19) Resident Individual NRI-Repatriation NRI-Non Repatriation Partnership Trust HUF AOP PIO Company Fils Minor through guardian BOI OCI Body Corporate LLP Society / Club Foreign National Resident in India QR PI Sole Proprietorship Non Profit Organisation Others (please specify) 4b. Occupation Details [Please tick (✓)] ☐ Service Private Sector Public Sector Government Service Student Professional Housewife Business (please specify) Retired Agriculture Proprietorship Others 4c. Gross Annual Income (Rs.) [Please tick (</)] 10 - 25 Lacs Below 1 Lac 1 - 5 Lacs 5 - 10 Lacs >25 Lacs - 1 Crore >1 Crore c. Net-worth (Mandatory for Non-Individuals) Rs. as on (Not older than 1 year) ww DD 4d. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) | I am PEP | I am Related to PEP | Not Applicable 4e. Non-Individual Investors involved/providing any of the mentioned services Foreign Exchange / Money Changer Services Gaming / Gambling / Lottery / Casino Services Money Lending / Pawning None of the above 5. JOINT APPLICANT DETAILS, If any (Refer instruction 4) 1. NAME OF SECOND APPLICANT Mr. Ms. M/s. KYC# [Please tick (</)] Proof Attached (Mandatory) Nationality PAN#/ PEKRN# a. Occupation Details [Please tick (<)] Service Private Sector Government Service Student Public Sector Professional Business Housewife Agriculture Proprietorship Others (please specify) b. Gross Annual Income (Rs.) Below 1 Lac 1 - 5 Lacs 5 - 10 Lacs 10 - 25 Lacs > 25 Lacs - 1 Crore 7 Net worth Rs. c. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors) | I am PEP | I am Related to PEP | Not Applicable # Please attach Proof. Refer instruction No 16 for PAN/PEKRN and No 18 for KYC. ACKNOWLED GEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)] HDEC MUTUAL FUND Date: Received from Mr. / Ms. / M/s. an application for Purchase of Units of the Scheme(s)

... continued overleaf

ISC Stamp & Signature

ARN-49710

EUIN-

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Mr.	Ms. M/s.																							
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any change in the information fur rished from time to time. (4) I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediarie my/our transactions.					o inform the AMC / Fund/Registrars and Transfer Agent (RTA) in writing about is in case of any dispute regarding the eligibility, validity and authorization of						ut .f	First/ Sole Applicant/ Guardian Second Applicant												
to him/them for the different competing Schemes of various Mutual Funds f (6) I/WE HEREBY CONFIRM THAT I/WE HAVE NOT BEEN OFFERED/ COT YIELD BY THE FUND/AMC/ATS DISTRIBUTOR FOR THIS INVESTMENT. Applicable to Foreign Nationals Resident in India only:					MMUNICATED ANY INDICATIVE PORTFOLIO AND/ OR ANY INDICATIVE						GNATURE													
we will reoeen my our entire investments before twe change my our including taxation jarsing out of the failure to redeem on account of change i Applicable to NRIs/ PIO/OCIs only: We am/are not prohibited from accessing capital markets under any order, my application is incompliance with applicable Indian and foreign laws. Please (<) Yes No If Yes, (<) Repatriation basis															5	Thi Appli								
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