


Continuous Offer of Units at Applicable NAV Application No.
Key Information Memorandum and Application Forms

Distributor ARN	ARN Name	Sub-Distributor ARN	Internal Sub-Broker / Employee Code	EUIN
ARN-0155		16336		EUIN-E031811

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.

(Investors applying under Direct Plan must mention "Direct" in ARN Column)

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 is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of an appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Signature	First / Sole Applicant / Guardian	Second Applicant	Third Applicant	PoA Holder

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Please any one of the below) (Refer Instruction No. 11)

I confirm that I am a First time investor across Mutual Funds. (Rs. 150 deductible as Transaction Charge and payable to the Distributor) OR I confirm that I am an existing investor in Mutual Funds. (Rs. 100 deductible as Transaction Charge and payable to the Distributor)

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.

1. FIRST APPLICANT'S DETAILS The name of the applicant should match with PAN card, Bank Account & Demat Account (if any). Please refer to instruction No. 4

Existing Folio Number [] Existing Investors : Jump to section 6 and then section 9. (New Investors : Please fill in all sections)

Name of the Sole / 1st Applicant / Corporate Investor (In case of Minor, there shall be no joint holders)

Mr. / Ms. / M/s.

PAN** [] Enclosed PAN Proof KYC Compliance Date of Birth []

Name of the Guardian (in case of minor) / Power of Attorney Holder / Contact Person (in case of Corporate Investor)

(Mandatory only in case of minor. Please attach age Proof)

Mr. / Ms. / M/s.

PAN** [] Enclosed PAN Proof KYC Compliance

Tel Office [] Tel Home [] Fax []

Mobile No. [] Email ID []

Email id and Mobile No are essential to enable us to communicate better with you.

Status of the 1st Applicant

Resident Individual NRI-Repatriation NRI-Non Repatriation Partnership Trust
 HUF AOP PIO Company Fils
 Minor through guardian BOI Body Corporate OCI LLP
 Society / Club Foreign National Resident in India QFI
 Others (please specify)

For Individuals

I am Politically Exposed Person
 I am Related to politically Exposed Person Not Applicable

For Non-Individual Investors (Companies, Trust, Partnership etc)

i. Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company. (If no please attach mandatory UBO declaration) Yes No
 ii. Foreign Exchange/ Money Changer Services Yes No
 iii. Gaming / Gambling / Lottery / Casino Services Yes No
 iv. Money Lending / Pawning Yes No

Occupation Details Private Sector Service Public Sector Service Government Service Business

Professional Agriculturist Retired Housewife Student Forex Dealer

Other (Please specify)

Gross Annual Income Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 Crore >1Crore or Net worth ₹

Net-worth in Mandatory for Non-Individuals ₹ as on [] (Not older than 1 year)

2. JOINT APPLICANTS' DETAILS

Name of 2nd Applicant Mr. / Ms. / M/s.

PAN** [] Enclosed PAN Proof KYC Compliance

Occupation Details Private Sector Service Public Sector Service Government Service Business

Professional Agriculturist Retired Housewife Student Forex Dealer Other (Please specify)

Gross Annual Income Below 1 lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 Crore >1 Crore or Net worth ₹

Other Politically Exposed Person (PEP) Related to a Political Exposed Person (PEP) Not Applicable

Name of Third Applicant Mr. / Ms. / M/s.

PAN** [] Enclosed PAN Proof KYC Compliance

Occupation Details Private Sector Service Public Sector Service Government Service Business

Professional Agriculturist Retired Housewife Student Forex Dealer Other (Please specify)

Gross Annual Income Below 1 lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 Crore >1 Crore or Net worth ₹

Other Politically Exposed Person (PEP) Related to a Political Exposed Person (PEP) Not Applicable

3. DEMAT ACCOUNT DETAILS (Mandatory only if you require units in the demat form. Please fill in all details, else the application is liable to be rejected.) (Refer Instruction No. 7)

NSDL OR CDSL

Depository Participant Name

Depository Participant (DP) ID (NSDL only)

Beneficiary Account Number (NSDL only)

Depository Participant (DP) ID (CDSL only)

4. CORRESPONDENCE ADDRESS (P.O.Box Address may not be sufficient.)

''

City _____ State _____ Pin code / Zip []

Overseas Address for NRI / FII - Mandatory (Please fill in Capital Letters. P.O. Box address may not suffice.)

**Please mention PAN no. as it is Mandatory

5. EMAIL COMMUNICATION

If We wish to receive the following document via email in lieu of physical documents. Yes No

Account Statement Newsletter Annual Report Other Statutory Information

ACKNOWLEDGMENT 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 1800-200-6626 (Toll Free)]

Application No. **ARN-49710**

Motilal Oswal Asset Management Company Limited Motilal Oswal Tower, Jn. of Gokhale Road & Sayani Road, Prabhadevi, Mumbai - 25.

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

From

Instrument No.	Dated	Amount (₹)	Scheme

Stamp & Signature

6. INVESTMENT & PAYMENT DETAILS

Payment Type (Please ✓) : Non - Third Party Payment Third Party Payment (please fill the attached Third Party Payment Declaration Form - 4)

Scheme - Motilal Oswal MOST Focused Multicap 35 Fund Motilal Oswal MOST Focused Midcap 30 Fund Motilal Oswal MOST Focused 25 Fund
 Motilal Oswal MOST 10 Year Gilt Fund Motilal Oswal MOST Ultra Short Term Bond Fund

Plan - Direct (Default Plan) Regular Option - Growth (Default Option) Div - Payout Monthly Quarterly
 Div - Reinvest (Default Option) Daily Weekly Fortnightly Monthly Quarterly

LUMP SUM INVESTMENT OR ZERO BALANCE OR SYSTEMATIC INVESTMENT PLAN / MICRO SIP - ECS (please fill ECS Debit Form - 2)

Payment Mode: Cheque DD RTGS NEFT Funds transfer

Amount (₹)(i) _____ First SIP Instalment Amount (₹) _____
 DD charges, (₹)(ii) _____ First SIP Instalment Cheque / DD No. _____ Date DDMMYY _____
 Total Amount (₹) (i) + (ii) _____ Subsequent SIP Instalment Amount (₹) _____ in figures _____
 Instrument No. _____ Date DDMMYY _____ in words _____

Account No. _____
 Bank Name _____
 Branch & City _____

Account Type Current Savings NRO NRE FCNR

Motilal Oswal MOST 10 Year Gilt Fund
 Motilal Oswal MOST Ultra Short Term Bond Fund - SIP Date
 SIP Frequency Monthly Quarterly
 Motilal Oswal MOST Focused 25 Fund
 Motilal Oswal MOST Focused Midcap 30 Fund
 Motilal Oswal MOST Focused Multicap 35 Fund
 SIP Date 1st 7th 14th 21st 28th of the Month
 SIP Frequency Weekly Fortnightly Monthly Quarterly
 SIP Period From MMYY To Perpetual Other MMYY

7. BANK DETAILS (Mandatory) Redemption / Dividend / Refund payouts will be credited into this bank account in case it is in the current list of banks with whom Motilal Oswal Mutual Fund has Direct Credit facility.

Name of the Bank _____ Branch _____
 Account Number _____ City _____
 Account Type Current Savings NRO NRE FCNR Others _____ (please specify)
 MICR Code _____ RTGS/NEFT Code _____

I / We understand that the instructions to the bank for Direct Credit / NEFT / ECS will be given by the Mutual Fund, and such instructions will be adequate discharge of the Mutual Fund towards redemption / dividend / refund proceeds. In case the bank does not credit my / our bank account with / without assigning any reason thereof, or if the transaction is delayed or not effected at all or credited into the wrong account for reasons of incomplete or incorrect information, I / We would not hold Motilal Oswal Mutual Fund responsible. Further the Mutual Fund reserves the right to issue a demand draft / payable at par cheque in case it is not possible to make payment by DC/NEFT/ECS.
 If however the unit holders wish to receive a cheque (instead of a direct credit into their bank account) please tick the box alongside

8. NOMINATION DETAILS (Mandatory information. Please select the desired option.)

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

	Nominee Name	PAN	Date of Birth	Guardian Name (In case of Minor)	% (Percentage)	Nominee Signature
Nominee 1						
Nominee 2						
Nominee 3						
Address					Total = 100%	

9. DECLARATION & SIGNATURES

Having read and understood the contents of the Scheme Information Documents of the Scheme(s), I/We hereby apply for the units of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations governing the Scheme(s). I/We hereby declare that the amount invested in the Scheme(s) 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(s) & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme(s), legally belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the Mutual Fund, I/We hereby authorise the Mutual Fund, to redeem the funds invested in the Scheme(s), in favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such transaction with such funds that may be required by the Law.
 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.
 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.
 I/We confirm that the details provided by me / us are true and correct.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	POA Holder
X			

*Applicable to application under Direct Plan: I/We hereby declare and confirm that I/We have read and understood the Scheme related documents pertaining to the "Direct Plan" and also confirm that the investments in Scheme through "Direct Plan" is/are made at my own discretion. Motilal Oswal Mutual Fund/MOAMC/Trustee shall not be liable for any consequences arising out of such investments.



Motilal Oswal Asset Management Company Limited
 Motilal Oswal Tower, Jn. of Gokhale Road & Sayani Road,
 Prabhadevi, Mumbai - 25,
 Email: mfservice@motilaloswal.com. Toll Free No.: 1800-200-6626