



**6. FATCA AND CRS DETAILS (Non-Individual investors please fill separate UBO & FATCA/CRS Form)**

First Applicant/Guardian			2nd Applicant			3rd Applicant    POA		
Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY
Nationality <input type="radio"/> Indian <input type="radio"/> U.S. <input type="radio"/> Other			Nationality <input type="radio"/> Indian <input type="radio"/> U.S. <input type="radio"/> Other			Nationality <input type="radio"/> Indian <input type="radio"/> U.S. <input type="radio"/> Other		

Are you a tax resident (i.e. are you assessed for Tax) in any other country outside India? ☐ Yes ☐ NO (If yes please provide information below.)

Country#	Tax Identification Number	Identification Type/Reason*	Country#	Tax Identification Number	Identification Type/Reason*	Country#	Tax Identification Number	Identification Type/Reason*
1			1			1		
2			2			2		
3			3			3		

# Please indicate all Countries, other than India, in which you are a resident for tax purpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.

• 11 TIN is not available or mentioned, please mention reason as: 'A' if the country does not issue TINs to its residents; 'B' &amp; mention why you are unable to obtain a TIN; 'C' if the authorities of the country of tax residence entered above do not require the TIN to be disclosed.

**7. BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)**

Bank Name		Bank A/c No.	
LEI		A/C Type <input type="radio"/> Savings <input type="radio"/> Current <input type="radio"/> NRE <input type="radio"/> NRO <input type="radio"/> FCNR <input type="radio"/> Others	
Branch		IFSC code: (11 digit)	

**8. INVESTMENT & PAYMENT DETAILS    ☐ Zero Balance    ☐ Lumpsum    (Please fill details below)    ☐ SIP (Fill separate SIP form)**

Scheme Name	Baroda BNP Paribas	Plan : <input type="radio"/> Regular <input type="radio"/> Direct    Option: <input type="radio"/> Growth <input type="radio"/> IDCW Reinvestment <input type="radio"/> IDCW Payout
Amount (₹)		IDCW Frequency
Bank		Cheque No./ UMRN:
		Account No.
		Payment Mode: <input type="radio"/> Cheque <input type="radio"/> NEFT <input type="radio"/> RTGS <input type="radio"/> OTM

Please use below details for initiating RTGS/NEFT:

Bank Name: HDFC BANK • Bank Account Number: 00600350106284 • IFSC Code: HDFC0000060 • Account Name: Baroda BNP Paribas Mutual Fund Collection Account

**9. DEMAT ACCOUNT DETAILS**

<input type="radio"/> National Securities Depository Ltd.	Depository Participant Name	DP ID No.	Beneficiary Account No.
<input type="radio"/> Central Depository Services (India) Ltd.			

Investor willing to invest in Demat option, may provide a copy of the DP Statement enabling us to match the Demat details as stated in the Application Form. In case the form is not filled, the default option will be physical mode.

**10. NOMINATION - MANDATORY, Minor & PoA holder cannot nominate and should not fill this section**☐ I/We wish to nominate: I / We hereby nominate the following person(s) who shall receive all the assets held in my / our account / folio in the event of my / our demise, as trustee and on behalf of my / our legal heir(s).

I/ We want the details of my/ our nominee to be printed in the statement of account, provided to me/us by the AMC as follows: (Mandatory in case Nomination is provided)

☐ Name of Nominee(s)    ☐ Nomination Status^ (Yes/No)

Mandatory Details						Additional Details^ ****																
Number	Nominee Name	Share of Nominee (%) **	Relationship & Identity Number ***	Mobile Number & Email ID	Postal Address	DOB of Nominee and Guardian Name																
1	Nominee 1		Relationship Identity Number	Email ID Mobile		<table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="8">Guardian Name</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Guardian Name							
D	D	M	M	Y	Y	Y	Y															
Guardian Name																						
2	Nominee 2		Relationship Identity Number	Email ID Mobile		<table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="8">Guardian Name</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Guardian Name							
D	D	M	M	Y	Y	Y	Y															
Guardian Name																						
3	Nominee 3		Relationship Identity Number	Email ID Mobile		<table><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="8">Guardian Name</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Guardian Name							
D	D	M	M	Y	Y	Y	Y															
Guardian Name																						

\*\* If % is not specified, then the assets shall be distributed equally amongst all the nominees.

\*\*\* Provide only number: PAN or Driving Licence or Aadhaar (last 4 digits). Copy of the document is not required. However, in case of NRI / OCI / PIO, Passport number is acceptable.

\*\*\*\* DOB to be furnished only if nominee is minor. Guardian name is optional to be provided in case Nominee is Minor

^ Default

☐ B. I/We do not wish to nominate: I/ We hereby confirm that I/ We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in non appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

Sole / First Applicant / Guardian	Second Applicant	Third Applicant	POA holder, if any
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**11. DECLARATION & SIGNATURES**

Having read and understood the contents of the Scheme Information Document (SID) and Statement of Additional Information (SAI), Key Information Memorandum (KIM), Instructions and addenda issued by Baroda BNP Paribas Mutual Fund (MF), I / We, hereby apply to the Trustee of MF for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I / We declare that 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. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. 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. Applicable to NRIs only: I/We confirm that I am/We are Non-Resident(s) of Indian Nationality.

☐ To receive physical annual statements and scheme wise abridged report please tick here (✓)

Sole / First Applicant / Guardian	Second Applicant	Third Applicant	POA holder, if any
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Email Id : service@barodabnp-paribas-mf.in	www.barodabnp-paribas-mf.in	Board Line No.: 022 69209600 • Toll Free No.: 1800 2670 189	
<b>Quick Checklist</b> 	<input type="radio"/> Name/s mentioned are as per PAN only <input type="radio"/> Address, Email ID/Mobile are correctly mentioned <input type="radio"/> KYC information provided for each applicant <input type="radio"/> FATCA/CRS details provided for each applicant	<input type="radio"/> Full scheme name, plan, option is mentioned <input type="radio"/> Pay-In bank details and supportings are attached <input type="radio"/> Nomination facility opted <input type="radio"/> Form is signed by all applicants	<input type="radio"/> Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used. <input type="radio"/> Non Individual investors should attach <input type="radio"/> FATCA Details and Declaration Form <input type="radio"/> UBO Declaration Form