



IDBI Asset Management Ltd.

CIN: U65100MH2010PLC199319

Registered Office: IDBI Tower, WTC Complex, Cuffe parade Colaba, Mumbai - 400 005.

Corporate Office: 4th Floor, IDBI Tower, WTC Complex, Cuffe parade Colaba, Mumbai - 400 005.

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FORM FOR FRESH NOMINATION/CHANGE OF EXISTING NOMINATION/CANCELLATION OF NOMINATION

Applicable for Individual Unitholders only - whether holding Units Singly or Jointly with other holders

Please read the instructions carefully before filling up this form

Date

D	D	M	M	Y	Y	Y	Y
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Name of Sole/First Holder Name _____

Name of Second Holder Name _____

Name of Third Holder Name _____

Folio No.

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I/We, the above named Unitholders of **IDBI Mutual Fund**, do hereby: (Please ✓ whichever is applicable)

- ☐ Nominate the person(s) more particularly described hereunder to receive the Units held my/our Folio/s listed below in the event of my/our death and/or;
☐ Cancel the nomination(s) made by me/us previously in respect of the units held by me/us in the Folio/s listed below:

Sr.No.	Scheme Name	Folio No.
1.		
2.		
3.		
4.		

	Name of the 1 st Nominee	Name of the 2 nd Nominee	Name of the 3 rd Nominee
Nominee Name			
% of Allocation			
PAN of the Nominee/ Guardian*			
Date of Birth of Nominee*			
Name of the Guardian*			
Guardian's Relationship with Nominee	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian
Proof of Relationship	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others _____	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others _____	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others _____
Address			
City			
State			
PIN			

**applicable in case the Nominee is a Minor. (Also, please attach a copy of the minor's birth certificate).*

Declaration Form for OPTING OUT of Nomination

☐ I/We **DO NOT** wish to make a nomination. (Please ✓ if the unitholder does not wish to nominate anyone)

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.

I/We have read and understood the instructions on nomination given below/overleaf and I/We hereby undertake to abide by the same. The instructions contained herein supercedes all previous nominations made by me/us in respect of the folio(s) mentioned above.

First/Sole Applicant/Guardian	Second Applicant	Third Applicant
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