

**To be submitted mandatorily:** 1. Your **FATCA** (Foreign Account Tax Compliance Act) Details (if not already submitted) and 2. **Ultimate Beneficial Owner (UBO)** information (for non-individuals only) which can be downloaded from our website. KYC acknowledgement is mandatory for all investors w.e.f. 01/01/2011. However in the case of Micro SIP/Purchase of an individual investor (if the total amount of investment including SIP is upto Rs 50,000 per investor in any rolling 12-month period or in a financial year) instead of PAN/Aadhar proof other approved document can be accepted.

|                          |                 |                  |                                                 |
|--------------------------|-----------------|------------------|-------------------------------------------------|
| Distributor's ARN & Name | Sub-broker Code | Sub-broker's ARN | EUN*<br>(Employee Unique Identification Number) |
|--------------------------|-----------------|------------------|-------------------------------------------------|

\* Declaration for "Execution only" transaction (only where EUN box is left blank) ☐ I/We hereby confirm that the EUN 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.

|                                   |                     |                    |
|-----------------------------------|---------------------|--------------------|
| First/Sole Applicant/<br>Guardian | Second<br>Applicant | Third<br>Applicant |
|-----------------------------------|---------------------|--------------------|

**Name of First/Sole Applicant** (capital Letters)

**Name of Guardian** in case First / Sole Applicant is a Minor (capital Letters)

**First/Sole Applicant**

Permanent Account Number (PAN)

Aadhar Card No.

Central KYC Number

**Second Applicant**

Permanent Account Number (PAN)

Aadhar Card No.

Central KYC Number

**Third Applicant**

Permanent Account Number (PAN)

Aadhar Card No.

Central KYC Number

|               |                  |
|---------------|------------------|
| <b>E-Mail</b> | <b>Mobile No</b> |
|---------------|------------------|

You will receive an account statement by e-mail. If you wish to receive a physical statement please tick ☐

|                                |          |
|--------------------------------|----------|
| Transferring funds from Scheme | Sundaram |
|--------------------------------|----------|

|                                                                                                              |                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct <input type="checkbox"/> Others:..... | Option: <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Re-Investment <input type="checkbox"/> Dividend Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Bonus |
|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                              |          |
|------------------------------|----------|
| Transferring funds to Scheme | Sundaram |
|------------------------------|----------|

|                                                                        |                                                                                                                                                                                                         |                           |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct | Option: <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Re-Investment <input type="checkbox"/> Dividend Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Bonus | <b>Each STP Amount</b> Rs |
|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|

|                      |                                                                                                                                                                                                                                                                                                                                               |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>STP Frequency</b> | <input type="checkbox"/> Daily (Minimum amount Rs 1000 Minimum No of installments 20) <input type="checkbox"/> Weekly (every Wednesday-Minimum amount Rs 1000) <input type="checkbox"/> Monthly (Minimum amount Rs 250 Minimum No of installments 20) <input type="checkbox"/> Quarterly (Minimum amount Rs 750 Minimum No of installments 7) |
|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                     |                                                                                                                                           |                   |                     |                   |    |                                                      |                     |
|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------|-------------------|----|------------------------------------------------------|---------------------|
| <b>STP Date</b> (for monthly and quarterly options) | <input type="checkbox"/> 1 <input type="checkbox"/> 7 <input type="checkbox"/> 14 <input type="checkbox"/> 20 <input type="checkbox"/> 25 | <b>STP Period</b> | <b>STP Starting</b> | <b>STP Ending</b> | OR | <input type="checkbox"/> <b>Till further notice*</b> | <b>Request Date</b> |
|                                                     |                                                                                                                                           |                   | M M Y Y Y Y         | M M Y Y Y Y       |    | 3 1 1 2 2 0 3 1                                      | D D M M Y Y Y Y     |

**Declaration:** I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN/Aadhar exempt category of investors). The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other model, 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:** Please ☒ I/We confirm that I am/We are Non-Resident 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 on a ☐ Repatriation Basis ☐ Non-Repatriation Basis.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

|                                   |
|-----------------------------------|
| <b>Signature</b>                  |
| First / Sole Applicant / Guardian |
| Second Applicant                  |
| Third Applicant                   |
| <b>Request Date</b>               |
| D D M M Y Y Y Y                   |

Please see overleaf for Terms & Conditions

|                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Acknowledgement</b>                                                                                                                                                                                          | <b>Request Date:</b>                                                                                                                                                                                                                                                                   |
| Folio No                                                                                                                                                                                                        | D D M M Y Y Y Y                                                                                                                                                                                                                                                                        |
| <b>From:</b>                                                                                                                                                                                                    | <input type="checkbox"/> Amount:.....                                                                                                                                                                                                                                                  |
| Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct <input type="checkbox"/> Others .....                                                                                                    | <b>To:</b>                                                                                                                                                                                                                                                                             |
| Options: <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Re-Investment <input type="checkbox"/> Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Bonus | Plan: <input type="checkbox"/> Regular <input type="checkbox"/> Direct Options: <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Re-Investment <input type="checkbox"/> Sweep <input type="checkbox"/> Growth <input type="checkbox"/> Bonus |

Time Stamp/Seal

**Contact No. 1860 425 7237 (India)**  
**+91 44 4083 1500 (NRI)**

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**Sundaram Mutual Fund**