



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

My Bank Name																			
Bank A/C No.											A/C Type	<input type="checkbox"/> Savings	<input type="checkbox"/> Current	<input type="checkbox"/> NRE	<input type="checkbox"/> NRO	<input type="checkbox"/> FCNR	<input type="checkbox"/> Others		
Branch Address																			
											City						Pin		
IFSC code: (11 digit)											MICR code (9 digit)						(This is a 9 digit number next to your cheque number)		

**ADDITIONAL INFORMATION**

Applicant	Aadhaar No.*	KIN No. (If KYC done via CKYC)	Date of Birth*	Gender
1st			D D / M M / Y Y	<input type="checkbox"/> M <input type="checkbox"/> F
2nd			D D / M M / Y Y	<input type="checkbox"/> M <input type="checkbox"/> F
3rd			D D / M M / Y Y	<input type="checkbox"/> M <input type="checkbox"/> F
G or POA^			D D / M M / Y Y	<input type="checkbox"/> M <input type="checkbox"/> F

#Date of Birth - Mandatory if CKYC ID mentioned. \*G: Guardian; ^POA: Power Of Attorney \*If Aadhaar number is not assigned Aadhaar enrollment number and proof to be provided.

Details	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	G or POA
Mobile No.			
Email Id.			

**NOMINATION DETAILS** (In case of more than one nominee, please submit a separate nomination form available with any of our ISCs or on our website). Refer instructions.

Nominee Name and Address	For Minor Nominee (Mandatory to attach DOB Proof)		Allocation	Nominee/ Guardian Signature
	DOB	Guardian Name & Address		
			100 %	X

I/We DO NOT wish to nominate and sign here  
(To be signed by all the joint holders irrespective of the mode of holdings.)

**DEPOSITORY ACCOUNT DETAILS** (Optional. To be filled if investor wishes to hold the units in Demat mode). Refer instructions.

<input type="checkbox"/> NSDL: DP Name		DP ID	I   N		Beneficiary Ac No.	
<input type="checkbox"/> CDSL: DP Name					Beneficiary Ac No.	

Please ensure that the sequence of names as mentioned in this Application Form matches with the sequence of names in the Demat account. Enclosed (Mandatory)  Client Master List OR  DP statement

**KNOW YOUR CUSTOMER (KYC) DETAILS** (Mandatory. Please Tick/ Specify. The application is liable to get rejected if details not filled.)

Status details for	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	Guardian	Occupation details for	1 <sup>st</sup> Applicant	2 <sup>nd</sup> Applicant	3 <sup>rd</sup> Applicant	Guardian
Resident Individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Private Sector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NRI/PIO/OCI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Public Sector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sole Proprietorship	<input type="checkbox"/>	-	-	-	Government Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor through Guardian	<input type="checkbox"/>	-	-	-	Business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non Individual	<input type="checkbox"/> Company/Body	<input type="checkbox"/> Corporate	<input type="checkbox"/> Partnership		Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Trust	<input type="checkbox"/> Society	<input type="checkbox"/> HUF		Agriculturist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Bank	<input type="checkbox"/> AOP	<input type="checkbox"/> FI/FII/FPI		Retired	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others (Please specify)					Housewife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					Student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					Others (Please specify)				
<b>Gross Annual Income Range (in Rs.)</b>					<b>Politically Exposed Person (PEP) details:</b>				
Below 1 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is a PEP	<input type="checkbox"/>	Related to PEP	<input type="checkbox"/>	Not Applicable
1-5 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 <sup>st</sup> Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-10 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2 <sup>nd</sup> Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10-25 lac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3 <sup>rd</sup> Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 lac- 1 cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Guardian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 -5 cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authorised Signatories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 - 10 cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Promoters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
> 10 cr	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>OR Networth in Rs.</b> (Mandatory for Non Individual) (not older than 1 year)	as on [D][D][M][M][Y][Y]	as on [D][D][M][M][Y][Y]	as on [D][D][M][M][Y][Y]	as on [D][D][M][M][Y][Y]	Karta	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					Whole-time Directors/Turstees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**FATCA/CRS/UBO DETAILS:** For Individuals (Mandatory). Non Individual investors including HUF should mandatorily fill separate FATCA/CRS/UBO details form

Details	Sole/ 1st Applicant	2nd Applicant	3rd Applicant	Guardian/POA
Place & Country of Birth				
Nationality				
Are you a tax resident of any country other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If Yes: Mandatory to enclose FATCA /CRS Annexure

1800 425 4255 or 1800 258 4255 (from 8 am to 9 pm, Monday to Saturday)

service@franklintempleton.com

www.franklintempletonindia.com

- Quick Checklist**
- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Name, Address are correctly mentioned         | <input type="checkbox"/> Full scheme name, plan, option is mentioned      | <input type="checkbox"/> Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used. |
| <input type="checkbox"/> Email ID / Mobile number are mentioned        | <input type="checkbox"/> Pay-In bank details and supportings are attached | <input type="checkbox"/> Non Individual investors should attach  |
| <input type="checkbox"/> KYC information provided for each applicant   | <input type="checkbox"/> Nomination facility opted                        | <input type="checkbox"/> FATCA Details and Declaration Form  |
| <input type="checkbox"/> FATCA/CRS details provided for each applicant | <input type="checkbox"/> Form is signed by all applicants                 | <input type="checkbox"/> UBO Declaration Form  |
| <input type="checkbox"/> Corporate Documents/ Trust Deed               | <input type="checkbox"/> Proof of relationship with minor                 |  |
| <input type="checkbox"/> PoA Documents                                 |   |  |