

For Resident Indians and NRIs/FIIs/FPIs



Distributor Name & ARN/ RIA No.	Sub Broker Name & ARN/ RIA No.	Sub Broker Code	Employee Unique ID. No. (EUIIN)

Application No.

I/we hereby confirm that the EUNJ box has been intentionally left blank my/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 in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Third Applicant

In case the subscription (lumpsum) amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹ 150/- (for first time mutual fund investor) or ₹ 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

Existing Folio No.								
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Mr. Ms. M/s.

(Prefix if any)

Mr. Ms. M/s.

(Prefix if any)

Mr. Ms. M/s.

(Prefix if any)

Mr. Ms. M/s.

(Prefix if any)

ISD CODE

TEI · OFF

TEL · RESI

#The application is liable to get rejected if does not match with PAN card/ Aadhar card

** Mandatory in case the First / Sole Applicant is Minor

☐ Resident Individual ☐ FIs ☐ NRI - NRO ☐ HUF ☐ Club / Society ☐ PIO ☐ Body Corporate ☐ Minor ☐ Government Body
☐ Trust ☐ NRI - NRE ☐ Bank & FI ☐ Sole Proprietor ☐ Partnership Firm ☐ QFI ☐ Provident Fund ☐ Others

☐ Joint☐ Single

☐ **Anyone or Survivor** (Default option is Anyone or survivor)

MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O.Box Address is not sufficient. Please provide full address.) (Indian Address in case of NRIs/ElDs)

CITY

STATE

PIN CODE

COMMON APPLICATION FORM

Application No.



One India Bulls Centre, Tower 1, 17th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai 400 013

Toll Free : 1-800-270-7000/ 1-800-22-7000 | Email: connect@birlasunlife.com

Collection Centre /
ABSLAMC Stamp & Signature

Received from Mr. / Ms. _____ Date : ____ / ____ / ____

[Please tick (✓)] **ENCLOSED** ☐ PAN/PEKRN Proof ☐ KYC Complied NECS Form ☐ Yes ☐ No

2. GO GREEN (Please tick (✓)) (Refer Instruction No. 10)

☐ SMS Transact

☐ Online Access

Mobile No. +91

I/ We would like to register for my/our SMS Transact and/ or Online Access

Email Id

Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: ☐ Account Statement ☐ Annual Report ☐ Other Statutory Information

Facebook Id

Twitter Id

3. BANK ACCOUNT DETAILS (Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details) Refer Instruction No. 3(A)

Name of the Bank

Branch Address

Pin Code

City

Account No.

Account Type ☐ SAVINGS ☐ CURRENT ☐ NRE ☐ NRO ☐ FCNR ☐ OTHERS (please specify)

11 Digit IFSC Code

9 Digit MICR Code

4. INVESTMENT DETAILS (Please tick (✓)) (Refer Instruction No. 5, 9 & 14) (If this section is left blank, only folio will be created)

Seperate cheque/ demand draft must be issued for each investment drawn in favour of respective scheme name and the instrument should be crossed "A/c Payee Only".
Please write appropriate scheme name as well as the Plan/Option/Sub Option

S. No.	*Cheque / DD Favouring Scheme Name (refer Instruction 5)	Plan / Option	Sweep to (applicable only for Dividend option)	Cheque Date	Amount Invested (₹)	^DD Charges	Net Amount Paid (₹)	Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch and Account Number
1.	BSL		Scheme Name						
			Plan / Option						
2.	BSL		Scheme Name						
			Plan / Option						
3.	BSL		Scheme Name						
			Plan / Option						

(Type of Account : Saving / Current / NRE / NRO / FCNR / NRSR) *All purchases are subject to realization of funds ^Refer to Instruction No. 5 (vi)

KYC DETAILS (Mandatory)

OCCUPATION (Please tick (✓))

FIRST APPLICANT

☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (please specify)

SECOND APPLICANT

☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (please specify)

THIRD APPLICANT

☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (please specify)

GROSS ANNUAL INCOME (Please tick (✓))

FIRST APPLICANT

☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ > 25 Lacs - 1 Crore ☐ > 1 Crore
Net worth (Mandatory for Non - Individuals Rs. _____ as on

D

D

M

M

Y

Y

Y

Y

 [Not older than 1 year]

SECOND APPLICANT

☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ > 25 Lacs - 1 Crore ☐ > 1 Crore OR Net Worth _____

THIRD APPLICANT

☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ > 25 Lacs - 1 Crore ☐ > 1 Crore OR Net Worth _____

For Individuals

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

☐ I am Politically Exposed Person

☐ I am Related to Politically Exposed Person

☐ Not Applicable

Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (If No, please attach mandatory UBO Declaration)

Foreign Exchange / Money Charger Services

Gaming / Gambling / Lottery / Casino Services

Money Lending / Pawning

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No



S. No.	Scheme Name	Plan / Option	Net Amount Paid (₹)	Payment Details	
				Cheque/DD No./UTR No. (in case of NEFT/RTGS)	Bank and Branch
1.	BSL				

5. **DEMAT ACCOUNT DETAILS (OPTIONAL)** (Please ensure that the sequence of names as mentioned in the application form matches with that of the A/c. held with the depository participant.) Refer Instruction No. 3(B)

NSDL: Depository Participant Name: _____

DPID No.:

I

N

Beneficiary A/c No.

CDSL: Depository Participant Name: _____

Beneficiary A/c No.

Enclosed: ☐ Client Master ☐ Transaction/ Statement Copy/ DIS Copy

6. **NOMINATION DETAILS (Mandatory)** (Refer Instruction No. 7)

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

	Nominee Name and Address	Guardian Name (in case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				

To register multiple nominee please fill separate Multiple nomination Form.

7. **FATCA & CRS INFORMATION [Please tick (✓)] For Individuals & HUF (Mandatory) Non Individual investors should mandatorily fill seperate FATCA detail form**

The below information is required for all applicant(s)/ guardian

Address Type: ☐ Residential or Business ☐ Residential ☐ Business ☐ Registered Office (for address mentioned in form/existing address appearing in Folio)

Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? ☐ Yes ☐ No

If Yes, please provide the following information [mandatory]

Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below.

Category	First Applicant (including Minor)	Second Applicant/ Guardian	Third Applicant
Name of Applicant			
Place/ City of Birth			
Country of Birth			
Country of Tax Residency#			
Tax Payer Ref. ID No^			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 3			
Tax Payer Ref. ID No. 3			
Identification Type [TIN or other, please specify]			

#To also include USA, where the individual is a citizen/ green card holder of USA. ^In case Tax Identification Number is not available, kindly provide its functional equivalent.

