

Amount

__/__/___ Drawn on Bank & Branch_

Dated_

COMMON APPLICATION FORM

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Collection centre's stamp with date and time of receipt

AF		Sub-Broker A Branch Cod		Internal Sub-Broke Code	r EUIN* (Refer Section of instruction	on 'L' ons)	RIA Code / PMRN**	Date & Time St	amp				
	RN-307640				E584535								
ot ch / me nion	narged any advisory fees entioning the RIA Code/ f Mutual Fund with the SE Sign a/ First Applicant/ Guardia	s on this transaction. PMRN, I/we hereby g EBI Registered Investi nature an/ POA/ Authorised S	give my/our c ment Adviser	onsent to share/provide r/ SEBI registered Portfo Second App	e the transactions data fe olio Managers. Signature olicant/ POA/ Authorised	eed / unit holdings	in respect of my/our inve	erson of the distributor and the estments under Direct Plan in Signature Signature Considered for this application)	the Scher				
		Single	○ .loint	(Default option)	Anyone or Survive	ors							
	MODE OF HOLDING Single Joint (Default option) Anyone or Survivors FIRST APPLICANT'S INFORMATION* [Please tick (✓)] (Refer Section 'B' and 'C' of instructions) (Please ensure that the details mentioned matches with the KYC det												
	OMr. OMs. OM/s.	SINFORMATION*	[Please tich	(V)) (Refer Section		ons) (Please er	nsure that the details me	entioned matches with the K	C details,				
	PAN (Copy of PAN A	Advisable)			ОКУС	CKYC No. ((KIN) ^						
	LEI Code ^ ^				1	Valid up to	D D M M Y Y	YY					
		(Refer Section 'I' o	of Instruction	, ,	mention Country and Are	ea Code)							
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	On providing email-id,	investors shall receive	ve the schen	ne wise annual report o	or an abridged summar	y thereof/ accoun	nt statements/ statutory	and other documents by em	ail.				
	Mailing address* (P.				abridged summary the	reor in physical to	orm [Please (🗸)] Opt-in	0					
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Instrument No

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SECOND APPLICANT/ GUARDIAN I (Refer Section 'B' and 'C' of instruction		N FOR NON-II	NDIVIDUALS/	POA HOLDER D	ETAILS* [P	Please tick (🗸)]		
OMr. OMs. NAME	O F S E C O N	D A P	P L I C	A N T	^	Date of Birth	1* D D	M M Y	YY
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4d. Other Details* O I am Politically			olitically Expose		O Not Appli				
4e. Contact Details* Mobile No ^{\$} .		E-mail ^{\$}	,,		O				
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THIRD APPLICANT'S INFORMATION	. ,,,					Date of Divi	*	M Ad .	, , , ,
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5c. Gross Annual Income* O Below									
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5e. Contact Details* Mobile No ^{\$} .		E-mail ^{\$}							
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Dependent Children Dependent Children Investors who have completed the equested to quote the 14 digit KIN. FATCA INFORMATION/ FOREIGN T. NPO Declaration Form available at the below information is required for a Category Is the Country of Birth / Citizenship / Nationality / Tax Residency other than India?* * If Yes, please indicates the country of Birth Country of Birth Address Type	AX LAWS* - for Individuals in www.unionmf.com or at our Call applicant(s)/ guardian First Applicant (includin Yes Ves	KYC Records cluding Sole Customer Serv g Minor) No	Depende Registry (CKYO Proprietors (Notice Centres) (Noti	ent Children CR), and have a lon-Individuals a [Please tick (🗸)] (Applicant/ Gual es N s and the associa	Depen KYC Identi Are required (Refer Section rdian o atted Tax Refer	d to submit the on 'M' of instru	ne separa cuctions) Third Ap Yes ers below	te FATC	CKYC
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Please address all future communication(s) in connection with this application to the Registrar & Transfer Agent of the Scheme:

Computer Age Management Services Ltd.,

Unit: Union Mutual Fund

Rayala Tower 2, 5th Floor, #158 Anna Salai, Chennai - 600002. Email: enq_uk@camsonline.com | Website: www.camsonline.com Union Asset Management Company Pvt. Ltd.
Unit 503, 5th Floor, Leela Business Park, Andheri Kurla Road,
Andheri (East), Mumbai - 400059

Toll Free: 1800 200 2268/1800 572 2268 | Tel No.: 022 67483333

Website: www.unionmf.com | Email: investorcare@unionmf.com
Give a missed call from your registered mobile number on 08010421326 and get an Account Statement via SMS.

UnionMutual Fund

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- I/ We have read, understood and hereby agree to comply with the terms and conditions (T & C) of the scheme related documents, the T & C and policies on the AMC's website, and hereby apply for Units of the aforementioned Scheme(s). I/ We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We hereby 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. 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. I/ We hereby confirm that Union Mutual Fund (the Fund)/ Union Asset Management Company Private Limited (the AMC) and its empanelled broker(s) have not given me/us any indicative portfolio and indicative yield, in any manner whatsoever. I/We hereby confirm that at the time of investment, I/we have the express authority to invest in units of the Scheme and the AMC / Trustee / Mutual Fund / Sponsor will not be responsible if such investment is ultravires the relevant constitution.
- I/We hereby confirm that the information provided hereinabove is true, correct and complete to the best of my/our knowledge and belief and that I/we shall be solely liable and responsible for the information submitted. I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws. I/ we also confirm that I have read and understood the FATCA \& CRST & C and hereby accept the same. I/ We also undertake to keep you promptly informed in writing about any changes/modifications to the above information in future and also undertake to provide any other additional information as may be required by any intermediary or by domestic or overseas regulators/tax authorities. I/We hereby authorize the Fund/ the AMC/ the RTA to share any information provided by me/ us to the Fund, its Sponsor, the AMC, Trustee, their employees, RTAs, authorized agents, third party service providers, my/our distributor (s), SEBI registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities/registered Intermediaries or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities or any Indian or foreign governmental or statutory or judicial or tax/revenue authorities or any Indian or foreign governmental or statutory or provided authorities or any Indian or grant or graagencies and other investigation agencies in or outside India, and/or to withhold and pay out any sums from my/our account(s) or close or suspend my/our account(s), without any obligation of advising me/us of the same, as may be required by regulators/tax authorities.
- I/ We hereby consent to receiving information from Central KYC Registry (CKYCR) through SMS/Email on the above registered mobile number/email address. I/ We also providing consent to MF/AMC/KRA to share this KYC Data with CKYCR, download the information from CKYCR and other participating intermediaries as mandated by PMLA Act/Rules/SEBI Guidelines.

Applicable to SIP Investments only: I/ We hereby express my/ our willingness to make payments towards SIP instalments as mentioned under the SIP Auto debit form. If the transaction is delayed or not effected for reasons of incomplete/ incorrect information, I/we would not hold the user institution and its affiliates responsible. Further, I/ we authorize the representative (the bearer of this request) to get the mandate herein verified. Mandate verification charges, if any, may be charged to my/our account.

Applicable to Micro Investments only: I/We do not have any existing Micro investments which together with the current application will result in aggregate investments exceeding ₹50,000 in a year.

Applicable to NRIs only: I/We confirm that I am / we are Non-Resident(s) of Indian Nationality / Origin and I/we hereby confirm that the funds for subscriptions have been remitted from a broad through normal banking channels or from fund in my/our Non Resident External / Ordinary account/FCNR account(s).

Important alert: Incase there is any change to your KYC information, please update the same by using the prescribed "KYC Change Request Form" and submit the same at the point of service of any KYC Registration Agency.

Name & Signature of	Name	Name	Name
Unitholder(s)	Sole/ First Applicant/ Guardian/ POA/ Authorised Signatory	Second Applicant/ POA/ Authorised Signatory	Third Applicant/ POA/ Authorised Signatory

Document Checklist	Individual	Company	Society	Partnership Firms	Investment through POA	Trusts	NRI	FII's	HUF	AOP & BOI	Demat Holder
PAN Card [Micro Investments, Investor(s) from Sikkim, government officials specifically exempt]	1	1	1	✓ /	√ /	1	✓		1	✓	√
KYC Acknowledgement	/	/	/	/	/	1	1	/	1	/	√ *
Resolution/ Authorisation to invest		/	/	/		/		/		/	
List of authorised signatories with specimen signatures		/	/	1	✓	/		/		/	
Memorandum & Articles of Association		/									
Certificate of Incorporation		/	/	1		/					
Trust Deed						/					
Bye-laws			/								
Partnership Deed				1							
Notorised POA (signed by investor and POA Holder)					✓						
Bank Account Proof (Latest available)	/	/	1	1	/	1	1		/	/	
Demat Statement (Latest available)											1
Client Master Statement (Latest available)											/
HUF Deed									1		
Overseas Auditor's Certificate & SEBI Regn. Certificate								/			
FATCA Form & UBO Declarations	1	/	1	1	/	1	1	1	1	1	/
NPO Declarations		/	/			1				1	

^{*}For demat holder, submission of KYC is optional

TERMS AND CONDITIONS FOR ONE TIME MANDATE (OTM) REGISTRATION:

- Investment through NACH (National Automated Clearing House) / ECS / Direct Debit is offered to investors having bank accounts in selected bank / cities where they have an account or located currently.
- ii.
- The list of such banks may be modified/ updated at any time in future entirely at the discretion of Union Mutual Fund without assigning any reasons or prior notice. The investor agrees to abide by the terms and conditions of NACH facility of National Payments Corporation of India (NPCI). The investor assumes the entire risk of using the Auto Debit Facility and takes full responsibility for the same. Investor will not hold Union Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles of NACH Debit/Auto Debit /ECS.
- Union Mutual Fund reserves the right to reverse allotments in case the Auto debit is rejected by the bank for any reason whatsoever.
- By submitting the Auto Debit mandate the investor authorizes Union Mutual Fund to utilize the information provided herein for the purpose of investor's investments in the Mutual Fund, including creation of a folio.
- Investors are required to ensure that there are adequate funds in their bank account on the date of investment transaction. Union Mutual Fund will endeavor to debit the investor bank account on the date of investment transaction, however if there is any delay all such transactions will be debited subsequently.
- SIP cancellation can be done separately by submitting the request atleast 15 Business Days in advance; however the associated mandate can be retained for future investments.
- Lumpsum Investment / SIP instalments in a day should be less than or equal to the a) maximum amount as mentioned in the Mandate Instruction. viii.
- e enrolment period i.e Start and End Month/ Year specified for the SIPs puld be less than or equal to the enrolment period mentioned in the Mandate
- Investments made through the One Time Mandate (OTM) Mode are subject to realization of funds from investor's bank account and the NAV guidelines will be applicable for the transactions.
- Following fields need to be filled mandatorily:-
 - Date in format DD/MM/YYYY
 - Bank A/c Type: Tick the relevant box b.
 - Bank Account Number (Investor's bank account number)
 - d. Name of Destination Bank (Investor's bank)

- Mention Maximum Amount such that the total of all SIP instalments in a day should be less than or equal to the Maximum Amount. f.
- Reference 1: Mention Folio Numbe
- Reference 2: Mention Application No.
- Phone No. (Optional)
- Email ID (Optional)
- Period: Start date and End Date of NACH registration (in format DD/MM/YYYY). Maximum period of validity of this mandate is 40 years only.
- Signature as per bank account records
- Name: Mention Bank Account Holder Name as per bank records

SIP Snapshot-Frequency. Minimum Amount and Minimum Period

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SIP Frequency	Minimum SIP Amount	Minimum Period	Default Date/Day						
Daily ^	₹ 100 and in multiples of ₹ 1 thereafter	6 Days	Daily (i.e. Business Days)						
Weekly	₹ 500 and in multiples of ₹ 1 thereafter	6 Weeks	Wednesday						
Fortnightly	₹ 500 and in multiples of ₹ 1 thereafter	6 Fortnights	1st and 15th of the month						
Monthly	₹ 500 and in multiples of ₹ 1 thereafter	6 Months	8th of the month						

Note:

- **^ Daily Frequency** is applicable to all schemes except Union Liquid Fund, Union Money Market Fund and Union Overnight Fund.
 - ^ For Union ELSS Tax Saver Fund: Minimum SIP installment ₹ 500 and in multiples of ₹ 500 thereafter. (for all frequencies)
- In case the chosen date/day falls on a Non-Business Day or on a date which is not available in a particular month/week, the SIP will be processed on the immediate next Business date/day.'
- In case none of the frequencies have been selected then Monthly Frequency shall be treated as the default frequency, provided the requirement relating to minimum installment size for monthly frequency is fulfilled.
- Period: Start date and End Date of NACH registration (in format DD/MM/YYYY) and Maximum period of validity of this mandate is 40 years only.
- The SIP shall commence after 25 calendar days in case of registration via new OTM (One Time Mandate). In case OTM is already registered, SIP shall commence by 10 calendar days.