

COMMON APPLICATION FORM FOR OPEN-ENDED EQUITY AND BALANCED SCHEMES

PLEASE USE SEPARATE FORM FOR EACH SCHEME

(OCBs & US PERSONS INCLUDING QUALIFIED FOREIGN INVESTORS REGISTERED IN USA AND CANADA AND RESIDENTS OF CANADA ARE NOT ALLOWED TO INVEST IN UNITS OF ANY OF THE SCHEMES OF UTI MF)

Sr.No. 2015/

PLEASE FILL IN ALL COLUMNS IN CAPITAL LETTERS ONLY

Registrar Sr. No.

(PLEASE READ INSTRUCTIONS CAREFULLY TO HELP US SERVE YOU BETTER) [Fields Marked with (*) must be Mandatorily filled in] DISTRIBUTOR INFORMATION (only empanelled Distributors/Brokers will be permitted to distribute Units) (refer instruction 'h') BDA / CA Code Name of Financial Advisor Sub ARN Code Sub Code M O Code EUI No.@ UTI RM No. Bank Branch Code ARN-91276 SHAILESH SAMPAT E088599 Upfront commission shall be paid directly by the investor to the AMFI / NISM certified UTI MF registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned or notwithstanding the advice of in-appropriateness, if any, provided by such distributor personnel and the distributor has not charged any advisory fees for this transaction. (Please tick and sign below when EUIN box is left blank) (refer instruction 'v'). Signature of 1st Applicant / Guardian Signature of 2nd Applicant Signature of 3rd Applicant TRANSACTION CHARGES TO BE PAID TO THE DISTRIBUTOR (Please tick any one of the below) (Refer Instruction 'i') I AM A FIRST TIME INVESTOR IN MUTUAL FUNDS I AM AN EXISTING INVESTOR IN MUTUAL FUNDS ₹ 150 will be deducted as transaction charges per Subscription of ₹ 10,000 and above ₹ 100 will be deducted as transaction charges per Subscription of ₹ 10,000 and above **Existing Unit Holder information** Scheme Name Folio Number: APPLICANT'S PERSONAL DETAILS Mr. * Denotes Mandatory Fields Name of First Applicant (as appearing in ID proof given for KYC) Date of Birth Mandatory for minors First Applicant's Address (Do not repeat the name) Name & Address of resident relative in India (for NRIs) (P.O. Box No. is not sufficient) Village/Flat/Bldg /Plot* Street/Road/Area/Post City/Town* State Pin* *PAN OF 1ST APPLICANT/FATHER/MOTHER/GUARDIAN (whose particulars are furnished in the form) AADHAR CARD NO. Enclosed PAN Card Copy Know Your Customer (KYC)* Acknowledgement Copy Please (✓) OVERSEAS ADDRESS (Overseas address is mandatory for NRI / FPI applicants in addition to mailing address in India) City* Zip/Pin* State Country* NAME IN FULL OF THE FATHER (OR) MOTHER / GUARDIAN (IN CASE OF MINOR)\$ / CONTACT PERSON FOR INSTITUTIONAL APPLICANTS Mr. Ms. Mrs \$ Proof of date of birth and proof of relationship with minor to be attached or else sign the declaration on the reverse (Refer instruction 'f'). OPTION FOR DESPATCH OF STATEMENT OF ACCOUNT FOR NRIS Applicant's address as mentioned above At my Overseas address as mentioned above / To be despatched to my resident relative's address in India as given above **DETAILS OF OTHER APPLICANTS** Date of Birth of 2nd Applicant Name of 2nd Applicant Mr. Ms. Mrs. *PAN of 2nd Applicant AADHAR CARD NO. Enclosed PAN Card Copy Know Your Customer (KYC)* Acknowledgement Copy Please (✓) Date of Birth of 3rd Applicant Name of 3rd Applicant Ms Mrs *PAN of 3rd Applicant AADHAR CARD NO. Enclosed PAN Card Copy Know Your Customer (KYC)* Acknowledgement Copy Please (✓) PAYMENT DETAILS (Refer Instruction 'x') #Cheque/DD/*NEFT/*RTGS Ref. No. Savings Current Cash Account type / Unique Serial No. (For Cash) (please ✓) NRO DD issued from abroad Account No. # Please mention the application No. on the reverse of Date Amt. of investment (i) the cheque / DD, NEFT / RTGS advice. Cheque / DD must be drawn in favour of "The Name of the Scheme" Bank DD Charges if any (ii) & crossed "A/c Payee Only" Branch Net amount paid (i-ii) Investment amount shall be Rs. 2 lacs and above Amt. in words in case of payments through RTGS.

RANK PA	ARTICUI ARS O	F 1ST APPLICANT (M	Mandatory as per SEBI	Guidelines)			
Bank Nam		TOTAL LICARI (IV	landatory as per OLDI	Guidelines)	Branch		
Address					MICR Coo		to your cheque number)
	City		Pin*		IFS Code (this is a 1	1-digit number)	
Account ty	/pe (please √)	Savings	Current NRO	NRE			
Account N	lo.						
INVEST	MENT DETAILS	(For "DIRECT PLAN"	" Please tick here	& tick Scheme,	Plan / Op	tion given belov	w) (Refer instruction 'j')
	UTI-Balanced	f Fund		UT	l-Mid Ca	p Fund	
	UTI-Banking	Sector Fund - Re	gular Plan	UT	I-MNC F	und	
	UTI-Dividend	Yield Fund		UT	l-Multi C	ap Fund	
	UTI-Energy F	und		UT	l-Nifty In	dex Fund	
	UTI-Equity Fu	und		UT	l-Opport	unities Fund	
	UTI-India Life	estyle Fund		UT	l-Pharma	a & Healthcar	e Fund
	UTI-Infrastruc	cture Fund		UT	l-Top 10	0 Fund	
	UTI-Leadersh	nip Equity Fund		UT	l-Transp	ortation & Log	gistics Fund
	UTI-Mastersh	are Unit Scheme			l-Wealth etail Pla	Builder Fund n	Series II
OPTION	I (for all schemes	s) Growth	Dividend Pay	out Divide	nd Reinve	stment	(Default is growth option)
			plicable category). Ow old limit provided belo				nip percentage/interest in ficiary. (Refer instruction q)
C	Category	Unlisted company	Partnership Firm	Unincorpor Association Individuals		Trust	Foreign Investor \$\$\$
Ownershi	ip per cent	>25%	>15%	>15%		>=15%	
@@@ Ow by the inve		e of shares/capital/prof	its/property of juridical p	erson/interest in the	Trust as o	on the date of the	application shall be furnished
\$\$\$ In the o	case of Foreign in	e beneficial ownership,	•				SAI/relevant Addendum. / KRA as may be applicable
Sr. No.	Beneficial Ownersh	nip (Please attach a sep Name	arate sheet with this for	Mat if the space pro	Deta su	sufficient) hils of Identity ch as PAN / Passport	% of ownership
1							
3							
4							
5							
6				***			_
Please atta	ach self attested c	opy of PAN/Passport (p	roof of photo identity) al	ong with applicatior	n form]		

Unitholding Option [De	mat Mode	Phys	ical Mod	de	(if Dema	t acco	unt detail	s are	provided	d belo	w, ı	units	will be	allot	tted, I	by def	ault, i	n Elec	ctron	ic Mod	de only
DEMAT ACCOUNT												tion	form	matcl	hes w	vith th	at of	he ac	count	held	with a	any one
of the Depository Pa			Account	details a	are co	mpulsory		nat mode Central	Т													
National Depositor Securities DP ID N	•	me	1 1	1			_ [Depository		pository	Name	<u> </u>										
Depository Limited Beneficia								Services India)	Tai No	get ID												
Account	-							imited														
Enclosures : C	lient M	aster List (C	ML)	Transa	action	cum Hold	ing Sta	tement		Delivery Ir	nstruct	ion	Slip (l	DIS)								
FRIEND IN NEED UTI MF to correspo		•									with	me	/us a	t my	/ our	regis	stered	addr	ess, I	/ we	e auth	orize
Name F	R	ST			IV		D	D L	Е									L	Α	S	Т	
Address:																						
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Relationship with the	e appli	cant (optior	nal)		Ema	ail					Mobi	ile										
GENERAL INFO	RMAT	ION - Plea	se (√) v	whereve	er app	olicable																
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## OCBs & US perso		-	-		_				nd res	dents of C	Canada	are	not a	llowed	to inv	est in	units (of any	of the s	schen	nes of l	JTI MF.
OCCUPATION:		Business Housewife Forex Deal	or.	Re	udent etired	Diogga e	posifi.			culture ate Secto	r Sen	/ice			empl		ervice		=		ional ment	Service
MODE OF HOLDING:		Single	ei			Please s or surviv		<u></u>	Join	t												
MARITAL STATUS:		Unmarried		Ma	arried				Wed	lding An	niver	sary	D	D	M							
OTHER DETAILS	(MANI	DATORY)																				
1st Applicant:	(A)	Gross Ar	nnual Inc	come D	etails			NDIVIDU/	ALS	ONLY												
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Net-worth in ₹			(Net w	exth sho	uld no	t be older	than 1					_		(date)		D	M	ΙZY	Υ	Y		
		Please tie				Political	ly Exp	osed Per	son (PEP)	L							osed se ref			EP) ion 'w'	') .
2 nd Applicant:	(A)	-				1-5 lacs			5-	10 Lacs			10-25	5 Lacs	 ; [] >	25 La	cs - 1	Crore] >1	Crore
								[OR]														
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3rd Applicant:	(A)	Gross Ar	nnual Ind w 1 Lac		Service Services	1-5 lacs	d.		ء ٦	10 Lacs	Г	-	10.20	Lacs		٦ 、	ne La	aa 1	Cror	. г	7 -1	Crore
		L Delo	W I Lac		<u> </u>	1-0 lacs		[OR]		TO Lacs	_	_	10-20	Lacs	, _		ZU La		Cioie	; _		Citie
Net-worth in ₹	(B)	Please tic	CONTRACT OF	Pr. 1215.001		Delitical		osed Per	/	DED)		=		(date)		D/	MI	□/⊻ osed	Y	Y Y		
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Net-worth in ₹								[OR] 1 year)				a	s on	(date)) D	D IZ	MIN	ΙИΥ	Υ	ΥΙΥ	ı	
	(B)	Is the entit	y involve	d in / pro	viding	any or th	e follo		ces	Gaming /						_	os, bet	ting syr	ndicate	s) [YES	□ NO
	(C)	- Money Le	-	-			YE	S NO)													
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An application under												(s	chem	ne nan	ne)							
along with Cheque [‡] /[DD\$/NE							d	ated													
Ref. No./Unique Seria Drawn on (Bank)	al No. (ror Cash)																			Office	
for ₹ (in figures)																					n Cen	
Cheques and drafts			e e																			

		LAWS (Refer	Instruction 'y')				
					nes as given in the	Application Fo	orm. For <u>Non-Individuals</u> ,
	rescribed form along with		specified there	ein)			
-	sident of any country other		(O IA E				
If no, please tick		-	(Second Applica	· L ·	d Applicant)		
If yes, please in	dicate all the countries in	which you are	resident for tax	purposes and the	associated Tax Refe	erence Number(s) below:-
	Category	First Applica	ant (including N	Minor) Seco	nd Applicant/Guar	dian	Third Applicant
Country of Birth	1						
Country of Citiz	zenship						
# Country of T	ax Residency 1						
Tax Reference	No.1						
# Country of T	ax Residency 2						
Tax Reference	No.2						
# Country of T	ax Residency 3						
Tax Reference	No.3						
# to include USA	A, where investor is a citiz	en / greencard	holder of USA				
NOMINATION E	ETAILS (Please ✓) (ple	ease sign if yo	ou do not wish t	to nominate)			
that all pay							ur death. I/We also unders of, shall be a valid discharg
Name and Ad	Idress of Nominee			To be f	urnished in case no	ominee is a min	nor
Name				Name o	f the guardian		
Data of Di-	d d m m y y y	V			s of guardian		
1	minee is a minor)	, y					
Address with	pin code			Signatu (for min	re of Nominee / gua or)	rdian	
Investors who w	vish to nominate two or thr	ee persons may	y fill in the separa	ate form prescribe	d for the same and a	attach it with this	application form.
I/We do not	t wish to nominate						
Signatur	re of 1st Applicant / Guard	dian	Signa	ture of 2nd Appli	cant	Sign	ature of 3rd Applicant
I/We have rea		ntents of the So	cheme Information				d Key Information Memora onditions, rules and regulati
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M/s. Karvy Computershare Pvt. Ltd.: Unit: UTIMF, Karvy Selenium Tower B, Plot Nos. 31 & 32, Financial District, Nanakramguda, Serilingampally

Mandal, Hyderabad - 500 032, Board No: 040-6716 2222, Fax No.: 040-6716 1888, Email: uti@karvy.com