COMMON APPLICATION FORM
Please read Product Labeling available on the Front Inside Cover Page and instructions before filling this form (all points marked * are mandatory)



Sponsor: Edelweiss Financial Services Limited. Trustee Company: Edelweiss Trusteeship Company Limited. Investment Manager: Edelweiss Asset Management Limited. Edelweiss House, Off. C.S.T Road, Kalina, Mumbai - 400098

1			DISTRIBUTOR INFORMATIO	N			FOR OFFIC	E USE ONLY	Application No:		
	ARN-10249	5 ARN	Code Employee Unique Indentification Nur E-145320	nber (EUIN)*	Sub-Broker Code E Internal Code	- Code Reg	istrar/Bank Serial No.	Date & Time of Re	CAF WB055403		
	Meri Punji IMF Pvt *Investors should mention by me/us as this transact	on the FIIIN of th	e person who has advised the investor. If le vithout any interaction or advice by the en	eft blank, the f	fund will assume folk tionship manager/sa	owing declarati les person of th	on by the investor "I/We le above distributor/sub	hereby confirm that broker or notwithsta	the EUIN box has been intentionally left blank nding the advice of in-appropriateness, if any,		
	Upfront commission sha please mention 'Direct' i All sections to be filled in	Ill be paid directly n the column 'Nai English and in BL making a one tim	y by the investor to the AMFI registered E me & Distributor Code'	inature(s)		's' assessment c Guardian /		ng the service render	ard by the distributor. For Direct investments,		
2	•		filling the form (Please ✓) [Please ✓) (Default option Exist	INVES			ANCE FOLIO (Re	fer Instruction	No. XII)		
	☐ I am a First T	ime Investo	r in Mutual Funds] I am an Ex	kisting Investor in		r) or ₹100/- (for investor other than first		
3									ed to section 8. (Refer Instruction No. XII)		
4	Folio No.		PAN Please attach certified			tion No. VI	Know	Vour Customer	r (KYC) (Refer Instruction No. X)		
	1st Applicant /G	uardian	P A N N U M B		·	submit prod			ibmit KYC Application Form)		
5									d Canada will not be accepted		
	Name of Sole /1s		Mr. Ms. M/s. Others (Please		DEGEN EETTEN						
		_ :	12 11 1	<u> </u>			ate of Birth (DOB)^ / Date of Inco	orporation DDMMYYY		
	In case of Minor -	- Parent/ Leg	gal Guardian Name of 1st Appli	cant /Con	· · · · · · · · · · · · · · · · · · ·						
	AD 4 = 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	f-fD : 1	Birth Certificate				th Minor/ Designa ng Certificate	ition	Passnort		
	^Mandatory prod Birth for Minors (Mark sheet issued by High	her Secon			ng Certificate Others _		Please Specify		
	Mailing Address	of Sole/First	Applicant (P.O. Box alone may	not be su	fficient) Overse	eas Investor	must provide Ind	ian Address			
	Mailing Address of Sole/First Applicant (P.O. Box alone may not be sufficient) Overseas Investor must provide Indian Address										
	Cit										
	City Dataile	Email ID (In	BLOCK Letters				Country	I N D I A	Pin Code		
	Contact Details of Sole / First	Liliali ID (III	BLOCK Letters/				Mobile No.				
	Applicant	Tel. No.	STD Code R	es.		0	ffice		Fax		
			ial to enable us to communicate w	ith you bet	tter						
	Country Country	mandator	y for NRI/FII applicant*)			Addross fo	or correspondence	o (for NIBI appli	cants) Indian Overseas		
		UNICATION	(Refer Instruction No. III) [plea	ase √1		Address it	or correspondence	е (тог түткі арріп	cants) Indian Overseas		
			document via email in lieu of physica		t(s) Account State	ment / News	Letter / Annual Repo	rt / Other Statutor	y Information Yes No		
	Gross Annual Incor	me [please √]	*	Occupati	ion* [please √]		<u> </u>	Legal Statu	ıs* [please √]		
	Below 1 Lac	1-5 Lacs 5	-10 Lacs 10-25 Lacs		ess Service		= -		t Individual FII's Society/Club		
	>25 Lacs-1 cror				e Wife 🔝 Studer : Dealer 🔃 Unlist	nt Defence ted Company		AOP/BO Minor			
			-Individuals) ₹		d Company Ot		se Specify	Compar	ny/Body Corporate NPO		
	as on DD/M			Investor	* Related to	o PEP Yes	rson (PEP) Yes No	Others _	Please Specify		
	FATCA INFORMATION Country of Birth/Reg		cant/Non-Individual)* (Refer Instru		(VII) nship/ Nationality	v: India	IISA Others	(nlease specify)			
	Country of Tax Resid			(please sp		y maia _		erence Number: _			
	Mandatory for Non-Individual Investor	◆ For Forei	y involved/providing any of the fo gn Exhange / Money Changer Servi ending / Pawning ☐ Yes ☐ No						o form) (Refer Instruction No. XIV)] ing syndicates) Yes No		
	Mode of Holding*	[please ✓]	Single Joint Any one o	r survivor(s	;)						
	Name of 2nd Applicant Mr. Ms.						PAN				
	Gross Annual Incor		* 5-10 Lacs 10-25 Lacs	Busin	ion* [please ✓] less Service e Wife Studer		Agriculturist e Bureaucrat	Residen	us* [please √] t Individual FII's Society/Club DI NRI/PIO FI HUF		
	>25 Lacs-1 cron			For Indiv	Dealer Unlist Company Ot Vidual Politically	ted Company thers <u>Plea</u> Exposed Per	Body Corporate s e S p e c i f y rson (PEP) Yes	Minor Compar	Partnership Firm Bank Trust ny/Body Corporate NPO Please Specify		
	Investor* Related to PEP Yes No Others FATCA INFORMATION (2nd Applicant)*										
	Country of Birth:		Count	y: India							
	Country of Tax Resid	ency: Indi	a USA Others	(please sp	ecify)		Tax Ref	erence Number: _			
*	Edelwei				DGEMEN in by the inves			CA	Application No: NB055403		
ece	eived from: Mr. /	Ms. / M/s_				an	application for a	llotment	Collection Center's Stamp &		
			Plan						Receipt Date and Time		
			Dated/_					rawn on			
	c and Branch										
leas	se note: All purchase	s are subject t	o realization of cheques and as per	applicable	load structure (p	lease refer S	cheme Information L	Document)			







sms IQ to 5757590



1	Name of 3rd Applicant Mr. Ms. PAN										
(Gross Annual Income [please ✓]*	Occupation*	[please √]			Legal Stat	us* [please ✓]				
	Business Service Professional Agriculturist Resident Individual FII's Society/Club Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs House Wife Student Defence Bureaucrat AOP/BOI NRI/PIO FI HUF										
	>25 Lacs-1 crore >1 crore		prex Dealer Unlisted Company Body Corporate sted Company Others				Minor Partnership Firm Bank Trust				
				xposed Person (PEP)	Yes No	Company/Body Corporate NPO Others Please Specify					
	Investor* Related to PEP Yes No Street										
	Country of Birth: Country of Citizenship/ Nationality: India USA Others (please specify)										
		(please specify			Tax Referenc						
	POWER OF ATTORNEY (POA) If investment is being made by	a Constitution	al Attorney, ple	ase submit notarised co	py of POA						
	POA Name Mr. Ms.					PAN					
	FATCA INFORMATION										
	Country of Birth: Country of Citizenship/ Nationality: India USA Others (please specify) Country of Tax Residency: India USA Others (please specify) Tax Reference Number:										
_	BANK ACCOUNT DETAILS* (Refer Instruction No. IV for multiple bank registration)										
	A/c Type [please Y] SB Current NRO NRE FCNR										
\vdash	Account No Bank Name Bank Name										
\vdash	Branch Address										
\vdash	Pin IFSC Code MICR Code										
	INVESTMENT DETAILS* Choice of Scheme /Plan / Option (Refer Instruction No. VI) [please ✓]										
		Scheme		Plan			Option/Facility				
	seneme, rian, option, racinty						Option/Facility				
	(Default Plan/Option/Facility will be applied in case of no inf	tormation, ar	nbiguity or d	¬ ' ''	swa For-White		de under Edelustes ELCC 5				
- 1	Dividend Sweep to Scheme	Form Incom	Eund	Dividend Keinvestme	ent Facility is	not availab	le under Edelweiss ELSS Fund				
_ 느	*Dividend Sweep facility not applicable for Edelweiss Short Term Income Fund										
-	PAYMENT DETAILS (Refer Instruction No. VII)										
-	Mode of Payment [please √] RTGS/NEFT Transfer Letter Cheque No. DateDMMY_Y_Y_Y_ Gross Amount (₹) Net Amount (₹)										
-	iross Amount (₹)	DD Charges	s (\\)	Net A	inount (X)						
-	Bank /Branch & City Account No. Account Type [please ✓] SB Current NRO NRE FCNR										
	DEMAT ACCOUNT DETAILS*		Account Ty	pe [blease v]	овС	urrent	NRO NRE FCNR				
	o you want units in demat Form? [please ✓] Yes No [Please e	ncuro that the	coguence of n	amas as montioned in t	ho applicatio	n form ma	tches with that of the domat A/s hold				
	Depository Participant (DP) Name: DP ID No.: Beneficiary A/c No.										
	NOMINATION DETAILS* (Refer Instruction No. IX)										
1/	We hereby nominate the under mentioned nominee to receive the amounts to my/our credit in event of my/our death. I/We also understand that all payments and settlements made to										
	such Nominee shall be a valid discharge by the AMC/Mutual Fund/Trustee Company.										
	Name of Nominee Date of Birth (If Nominee is minor)	Allocation (%)		gal Guardian/Parent ominee is minor)	Relationsi		Address of Nominee/ Legal Guardian				
2	DECLARATION AND SIGNATURE(S)										
H "F an h to vi A gi	aving read and understood the contents of the Scheme Information Document of revention of Money Laundering" and "Know Your Customer". I/We hereby apply to di regulations of the Scheme. I/We further declare, I, am / we are authorised to invel sld or designed for the purpose of contravention of any acts, rules, regulations or a time. It is expressly understood that I/We have the express authority from our con res thereto and the investment is contrary to the relevant constitutional documents set Management Ltd., Investment Manager to the Edelweiss Mutual Fund, has fi fis, directly or indirectly in making this investments. I //We hereby authorise Edelw	the Scheme and to the Trustee of Evest the amount & ny statute or legis stitutional documes. I/We agree that ull right to refund veiss Mutual Fund	I Statement of Accelerations Mutual that the amount lation or any other ents to invest in the excess to med, its Investment	ditional Information and sub- fund for units of the Scheme nvested by me/us in the abc r applicable laws or notificati e units of the Scheme(s) and vus to bring my/our investme Manager and its agents to di	sequent amend as indicated a ove mentioned ons, directions d the AMC/Trus is equal to or ment below 25%. isclose details	dments there bove and agr Scheme(s) is issued by the stee/Fund wo ore than 25% I/We have no full my investing the stee of my investing the steel of my investing the steel by the steel of my investing the steel of my investing the steel of	to including the section on who cannot invest, ee to abide by the terms and conditions, rules derived through legitimate sources and is not governmental or statutory authority from time uld not be responsible if the investment is ultra of the corpus of the Scheme, then Edelweiss treceived nor been induced by any rebate or lent to my bank(s) / Edelweiss Mutual Fund's				
in an is re pa	aving read and understood the contents of the Scheme Information Document of the Scheme and Statement of Additional Information and subsequent amendments thereto including the section on who cannot invest, Prevention of Money Laundering" and "Know Your Customer", I/We hereby apply to the Trustee of Edelweiss Mutual fund for units of the Scheme as indicated above and agree to abide by the terms and conditions, rules not regulations or any other amount invested by me'us in the above mentioned Scheme(s) is derived through legitimate sources and is not eld of designed for the purpose of contravention of any acts, rules, regulations or any statute or legislation or any other applicable laws or notifications, directions issued by the governmental or statutory authority from time to time. It is expressly understood that I/We have the express authority from our constitutional documents to invest in the units of the Scheme(s) and the AMC/Trustee/Fund would not be responsible if the investment is untra rises thereto and the investment is contrary to the relevant constitutional documents. I/We agree that case my/our investment the Scheme(s) is equal to or more than 25% of the corpus of the Scheme, then Edelweiss sest Management Ltd., Investment Manager to the Edelweiss Mutual Fund, has full right to refund the excess to me/us to bring my/our investment below 25%. I/We have not received nor been induced by any rebate or itis, directly or indirectly in making this investments. I. Whe hereby authorize bedieveis Mutual Fund, its investment Manager and its agents to disclose details of my investment to my bank(s). I Edelweiss Mutual Fund, and other investment Manager and its agents to disclose details of my investment to my bank(s). I Edelweiss Mutual Fund and other investigation agencies without obligation on advising me/u so of the same. Live authority of my Indianal Pund to reject the application, revert the units credited/redeem units created at applicable NAV, restrain elus from making any further investment in any of the										
re	le 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 policy recommended to me/us. I/We further agree that the Fund/AMC can send us all types of 5MS relating to the products offered by them. Splicable to investors who have not opted for nomination facility. Whe nereby confirm that it is my/our informed decision not to avail the nomination facility offered by Edelweiss Mutual Fund. We confirm that I am/We are not resident(s) of United States under the laws of United States or resident(s) of Canada. In case of change to this status, I / We shall notify the AMC, in which event the AMC serves the right to redeem my/our investments in the Scheme(s). Serves the right to redeem my/our investments in the Scheme(s). Seplicable to NRI only: 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 approved banking annels from funds in my/our Non-Resident External/Ordinary Account/FCNR Account. Please () (Including amount of Additional Purchase Transaction made in future) Repatriation Non Repatriation										
	Date D D M M Y Y Sp										
ΙĪ	Date D D M M Y Y					, ,					
	Sole/1st Applicant/ Authorised Signatory /		(x) 2		ignatory	(x) ₃	rd Applicant / Authorised Signatory				
_		tructions on Fillin	g the Application	Form please refer to Page r	no. 30.						
٥.											
	HECKLIST (Please submit the following documents with your application (where otary Public.)	e applicable). All o	documents shoul	d be original/true copies cer	tified by a Dire	ctor/Trustee	/Company Secretary /Authorised signatory /				
	Documents Indiv	idual	Companies S	ocieties Partnership Firm	is Investm	ent through					
Н	Resolution/ Authorisation to invest		· ·	v v			1 1 1 1				