



**Second Applicant** Mr. Ms. M/s. SECOND APPLICANT Gender  M  F  O

PAN (Mandatory)           Aadhaar No. (Optional)

DOB         CKYC No. (Optional)

Address

City  State  Pincode

Occupation Details  Pvt. Sector Service  Public Sector Service  Govt. Service  Business  Professional  Agriculturist  
 Retired  Housewife  Forex Dealer  Student  Others  Specify

Gross Annual Income (₹)  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  25 Lacs - 1 Crore  > 1 Crore

**Third Applicant** Mr. Ms. M/s. THIRD APPLICANT Gender  M  F  O

PAN (Mandatory)           Aadhaar No. (Optional)

DOB         CKYC No. (Optional)

Address

City  State  Pincode

Occupation Details  Pvt. Sector Service  Public Sector Service  Govt. Service  Business  Professional  Agriculturist  
 Retired  Housewife  Forex Dealer  Student  Others  Specify

Gross Annual Income (₹)  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  25 Lacs - 1 Crore  > 1 Crore

**GUARDIAN DETAILS (In case First / Sole Applicant is minor) / CONTACT PERSON - DESIGNATION / PoA HOLDER (In case of Non-individual Investors)**

Mr. Ms. M/s. GUARDIAN Gender  M  F  O

PAN (Mandatory)           Aadhaar No. (Optional)

DOB         CKYC No. (Optional)

Address

City  State  Pincode

Occupation Details  Pvt. Sector Service  Public Sector  Govt. Service  Business  Professional  Agriculture  
 Retired  Housewife  Forex Dealer  Student  Others  Specify

Gross Annual Income (₹)  Below 1 Lac  1-5 Lacs  5-10 Lacs  10-25 Lacs  25 Lacs - 1 Crore  > 1 Crore

Relationship Of Guardian (Refer Instruction No. 11)  Mother  Father  Court Appointed Guardian

Email ID

Proof of the Relationship with Minor  Birth Certificate  School Certificate  Passport  Others  Specify

**TAX STATUS (Applicable for First / Sole Applicant)**  Resident Individual  FII  NRI-NRO  HUF  Club / Society  PIO  Body Corporate  
 Minor  Government Body  Trust  NRI - NRE  Bank & FI  Sole Proprietor  Partnership Firm  QFI  Provident Fund  
 Others  Specify

For Individuals	For Non-Individual Investors (Companies, Trust, Partnership etc.)
<input type="checkbox"/> I am a Politically Exposed Person	Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (If No, please attach mandatory UBO Declaration) <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> I am related to a Politically Exposed Person	Foreign Exchange / Money Charger Services <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> I am not related to Politically Exposed Person	Gaming / Gambling / Lottery / Casino Services <input type="checkbox"/> Yes <input type="checkbox"/> No
	Money Lending / Pawning <input type="checkbox"/> Yes <input type="checkbox"/> No

## 2. FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor. Refer Instruction No. 23)

FOR RESIDENT  
INDIANS

The below information is required for all applicants/guardian.

	Place / City of Birth	Country of Birth	Country of Citizenship / Nationality
First Applicant / Guardian			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____
Second Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____
Third Applicant			<input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others _____

FOR NON-RESIDENT  
INDIANS

**Are you a tax resident (i.e., are you assessed for tax) in any other country outside India?**

If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen / Resident / Green Card Holder / Tax Resident in the respective countries.

Yes  No

	Country of Tax Residency	Tax Identification Number or Functional Equivalent	Identification Type (TIN or other please specify)	Address Type
First Applicant / Guardian				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business
Second Applicant				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business
Third Applicant				<input type="checkbox"/> Resi <input type="checkbox"/> Regd. Office <input type="checkbox"/> Business

### Overseas Address

		City		
State		Country		Zipcode

For Non Individual investors Annexure I and Annexure II are available on the website of AMC i.e. [www.axismf.com](http://www.axismf.com) or at the Investor Service Centres (ISCs) of Axis Mutual Fund



## 3. NOMINATION DETAILS (Mandatory) (Refer Instruction No. 18)

Sr. No.	Nominee Name	PAN	Allocation (%)	Relationship with Investor	Nominee date of birth	Guardian Name (in case of Minor)	Guardian Signature
1					D D M M Y Y		
2					D D M M Y Y		
3					D D M M Y Y		

I/We DO NOT wish to nominate and sign here

You/ Sole Applicant	Second Applicant	Third Applicant
---------------------	------------------	-----------------

## 4. INVESTMENT DETAILS (For multiple schemes ref instruction no. 22) (Investors applying under Direct Plan must select "DIRECT" against scheme name, Refer Instruction No. 2.)

Sr. No.	Scheme	Plan	Option	Amount
1		<input type="checkbox"/> Direct <input type="checkbox"/> Regular		
2		<input type="checkbox"/> Direct <input type="checkbox"/> Regular		
3		<input type="checkbox"/> Direct <input type="checkbox"/> Regular		
<b>Total</b>		In words		In figures



# SIP REGISTRATION FORM

for first time investors, submit Common Application form along with this form.

Application No.

--	--	--	--	--	--	--	--



Distributor ARN	Sub-Distributor ARN	Internal Sub-Broker/ Sol ID
EUIN	Employee Code	RIA CODE ^

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor. ^I/We, have invested in the scheme(s) of Axis Mutual Fund under Direct Plan. I/We hereby give my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all schemes of Axis Mutual Fund, to the above mentioned SEBI Registered Investment Adviser.

"I/We hereby confirm that the EUIN box has been intentionally left blank by 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."

You/ Sole Applicant /Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
-------------------------------	------------------	-----------------	--------------------------

**TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Instruction No. 20)**

I confirm that I am a first time investor across Mutual Funds. **OR**  I confirm that I am an existing investor across Mutual Funds. In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase/subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.

**1. YOUR INFORMATION (MANDATORY)**

**EXISTING INVESTOR'S FOLIO NUMBER**

(If you have an existing folio with KYC validated, please mention here)

Folio number 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Your Name (as in PAN Card / KYC records) Mr. Ms. M/s. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Name of the Guardian Mr. Ms. M/s. 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 (In case First / Sole Applicant is minor) / Contact Person - Designation / PoA HOLDER (In case of Non-individual Investors)

Your PAN 

--	--	--	--	--	--	--	--	--	--

 2nd Holder PAN 

--	--	--	--	--	--	--	--	--	--

3rd Holder PAN 

--	--	--	--	--	--	--	--	--	--

**DO NOT FILL THE MANDATE BELOW, IF OTM DETAILS ARE PROVIDED IN SECTION 2 ON THE NEXT PAGE.**

To register Axis One Time Mandate, please fill and submit the One Time Mandate form separately.

	UMRN <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Bank use <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Date <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					
Tick (✓)	Sponsor Bank Code <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Utility Code <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Bank use																					
CREATE <input checked="" type="checkbox"/>	I/We hereby authorize	Axis Mutual Fund	to debit (tick ✓) <input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other																																																													
MODIFY <input type="checkbox"/>	Bank a/c number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																														
CANCEL <input type="checkbox"/>	with Bank <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					Name of customers bank	IFSC <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					or MICR <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
	an amount of Rupees <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																					In Words	₹	In Figures																																								
FREQUENCY	<input checked="" type="checkbox"/> Mthly <input checked="" type="checkbox"/> Qtly <input checked="" type="checkbox"/> H-Yrly <input checked="" type="checkbox"/> Yrly <input checked="" type="checkbox"/> As & when presented	DEBIT TYPE	<input checked="" type="checkbox"/> Fixed Amount <input checked="" type="checkbox"/> Maximum Amount																																																													
Reference 1	PAN No. <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											Phone No.	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																			
Reference 2	All Schemes of Axis Mutual Fund	Email ID	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																													

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my accounts as per latest schedule of charges of the bank.

PERIOD From <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> To <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Or <input type="checkbox"/> Until Cancelled																					1. _____ Signature Primary Account holder Name as in bank records	2. _____ Signature of Account holder Name as in bank records	3. _____ Signature of Account holder Name as in bank records

This is to confirm that the declaration (as mentioned overleaf) has been carefully read, understood & made by me / us. I am authorizing the User Entity / Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the User entity / Corporate or the bank where I have authorized the debit.

**MANDATORY FIELDS:** • Instrument Date • Account type • Bank A/c number (core banking a/c no only) • Bank name • IFSC code or MICR code (as per the cheque / pass book) • Amount (in words & in figures) • Period start date and end date or until cancelled • Account holder signature • Account holder name as per bank records. Reference 1 - PAN.

**ACKNOWLEDGMENT SLIP (To be filled by the investor)**

Investor Name			
SIP Scheme 1	Top-up	<input type="checkbox"/> Yes <input type="checkbox"/> No	Stamp & Signature
SIP Scheme 2	Top-up	<input type="checkbox"/> Yes <input type="checkbox"/> No	
SIP Scheme 3	Top-up	<input type="checkbox"/> Yes <input type="checkbox"/> No	

## 2. SIP DETAILS

SIP Registration Mode  A-OTM  K-OTM  Mandate along with SIP form

OTM Reference No. \_\_\_\_\_

(if Multiple One Time Mandate are registered)

Scheme / Plan / Option	Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	SIP Date (DD) Default SIP Date 7th	Enrollment Period (MMYY) From _____ To _____ or <input type="checkbox"/> 1 2 9 9	SIP Amount ₹ _____ in figures _____ in words	TOP-UP Facility (Optional) Only available for Monthly SIP	
					Frequency <input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly	Amount ₹ _____ in figures _____ in words
					<input type="checkbox"/> Dynamic TOP-UP	
					<input type="checkbox"/> Dynamic TOP-UP	
					<input type="checkbox"/> Dynamic TOP-UP	

SIP initial payment details (Optional)

Drawn on bank / branch name	_____	Amount	_____
Mode	<input type="checkbox"/> Cheque/DD	Dated	D D M M Y Y Y Y

In case of multiple SIP, mention "Axis MF Multiple Schemes" on the payment instrument.

## 3. Declaration and Signature (to be signed by all unit holders if mode of holding is 'joint')

I / We declare that the particulars furnished here are correct. I / We authorize Axis Mutual Fund acting through its service providers to debit my / our bank account towards payment of SIP installments and/ or any lumpsum payments through an Electronic Debit arrangement / NACH (National Automated Clearing House) as per my request from time to time. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We will also inform Axis Mutual Fund about any changes in my bank account. I/We hereby authorize to honour such payments and have signed and endorsed the Mandate Form. Further, I authorize my representative (the bearer of this request) to get the above Mandate verified. Mandate verification charges, if any, may be charged to my/our account.

You/ Sole Applicant /Guardian	Second Applicant	Third Applicant
-------------------------------	------------------	-----------------

## INSTRUCTIONS FOR SIP & TOP-UP

- Multiple SIP registration facility is not available for Axis Children's Gift Fund, Axis Liquid Fund, Gold ETF and during NFO.
- Investors are required to submit Form along with a photo copy/cancelled cheque of Debit Bank Account at least 15 days before the first SIP Installment date.
- Investor shall have the option of choosing any date of the month as the SIP date except the dates 29th, 30th and 31st. If SIP date is not mentioned, default date would be considered as 7th of every month. If the SIP date falls on a non-business day or a bank holiday, the SIP debit will be processed on the following business day.
- Please refer below table for minimum amount per installments:
 

Scheme	Minimum Amount (₹)	Minimum Installments
All Schemes except Axis Liquid Fund	1000	6
Axis Long Term Equity Fund*	500	6

Note: For all schemes, minimum amount is as per above table and thereafter in multiple of ₹ 1.  
For Long Term Equity Fund Minimum amount is as per above table and thereafter in multiple of ₹ 500\*.
- If no amount is mentioned minimum scheme amount would be considered i.e. for Axis Long Term Equity Fund minimum amount would be ₹ 500/- and for other schemes minimum amount would be ₹ 1,000/-.
- For details about the Scheme and its facility please refer the SID, SAI & KIM of the respective schemes / Addendum issued from time to time carefully before investing.
- The SIP will be discontinued automatically if payment is not received for three successive installments.
- Investors can discontinue a SIP at any time by sending a written request to any Official Point of Acceptance or to the registrar Karvy. Notice of such discontinuance should be received at least 20 days prior to the due date of the next installment / debit.
- Mandate will be processed through NACH platform offered by NPCI.
- As per SEBI circular dated August 22, 2011, Transaction Charge per subscription of ₹ 10,000/- and above shall be charged from the investors and shall be payable to the distributors/ brokers (who have not opted out of charging the transaction charge) in respect of applications routed through distributor/broker relating to Purchases / subscription / new inflows only (lumpsum and SIP), subject to the following:
  - For Existing / New investors: ₹100 / ₹150 as applicable per subscription of ₹10,000/- and above.
  - Transaction charge for SIP shall be applicable only if the total commitment through SIP amounts to ₹10,000/- and above. In such cases the transaction charge would be recovered in maximum 4 successful installments.
  - There shall be no transaction charge on subscription below ₹10,000/-.
  - There shall be no transaction charges on direct investments.
  - There shall be no transaction charges for transaction other than purchases/subscriptions relating to new inflows such as Switches, etc.
  - Transactions carried out through the Stock Exchange platforms for mutual funds shall not be subject to transaction charges.

The requirement of minimum application amount shall not be applicable if the investment amount falls below the minimum requirement due to deduction of transaction charges from the subscription amount.

- However, the option to charge "transaction charges" is at the discretion of the distributors.
- Investors may note that distributors can opt to receive transaction charges based on type of the Scheme. Accordingly, the transaction charges would be deducted from the subscription amounts, as applicable.
- Investor will not hold Axis 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/ Local/Bank holiday. Axis Mutual Fund, its registrars and other service providers shall not be held responsible or liable for damages / compensation / loss incurred by the investor as a result of using the SIP or ECS / Auto debt facility. The investor assumes the entire risk of using this facility and takes full responsibility.
  - Investor can change bank details for SIP by submitting a "CHANGE OF BANK MANDATE - FOR SIP" form available on the website or at any Investor Service Centre along with cancelled cheque of the new bank with the investor's name printed on it.
  - TOP-UP Facility: Under this facility the Investor can increase the SIP installment at pre-defined intervals by a fixed amount or any time as per the request. This facility is available for individual investors only. For availing the said facilities, investors are required to note the following:
    - Investor willing to register TOP-UP should provide the TOP-UP details along with the SIP enrolment details.
    - The minimum amount for Axis TOP-UP facility is ₹ 500/- and in multiples of ₹ 1/- for all schemes; except Axis Long Term Equity Fund the minimum amount is ₹ 500 and in multiples of ₹ 500 thereafter.
    - If no amount is mentioned as TOP-UP amount under frequency yearly and half-yearly, minimum TOP-UP amount would be considered, i.e., ₹ 500/- for all schemes.
    - TOP-UP frequencies available are Half-Yearly/ Yearly/ Dynamic requested intervals.
    - In case TOP-UP frequency is not indicated, it will be considered as Yearly by Default.
    - The date for Axis Mutual Fund TOP-UP Facility will correspond to the registered SIP.
    - TOP-UP will continue till the End of the SIP tenure by default.
    - In case an investor wishes to change the Top-Up amount, he/she has to provide a cancellation for the existing SIP and register fresh SIP.
    - Only TOP-UP cannot be discontinued anywhere during the SIP tenure.
    - In case of Dynamic Top up option, any changes in the amount can be made only after completion of 6 months from the date of the first installment and minimum gap between two top up requests should be 3 months and amount specified in last request shall be continued till the End of the SIP tenure.
    - Please see the illustration below to know how to calculate SIP Top-Up amount:
      - SIP Starts on 07/May/2016 · SIP ends on 07/12/2099 · SIP amount is ₹ 1000
      - Top-Up amount is ₹ 500 · Top-Up Frequency is Half-yearly

Top-Up date	SIP Amount (₹)	Top-Up Amount (₹)	New SIP Amount (₹)
7-Nov-2016	1000	500	1500
7-May-2017	1500	500	2000
7-Nov-2017	2000	500	2500
7-May-2018	2500	500	3000