

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

FOR NON-INDIVIDUALS: Is the "Entity" a tax resident of any country other than India? Yes No

(If Yes, please provide country lies in which the entity is a resident for tax purpose and the associated Tax Identification No. below)

1 st Applicant (Sole / Guardian / Non-Individual)		2 nd Applicant		3 rd Applicant	
Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any non-Indian Country(ies) of Birth / Citizenship / Nationality and Tax Residency	<input type="checkbox"/> Yes <input type="checkbox"/> No
Country of Birth / Incorporation		Country of Birth		Country of Birth	
Country Citizenship / Nationality		Country Citizenship / Nationality		Country Citizenship / Nationality	
Are you a US specified person?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id. _____	Are you a US specified person?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id. _____	Are you a US specified person?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please provide Tax Payer Id. _____

For non-Individual investor, in case your country of incorporation / Tax residence is US, but you are not a specified US person then please mention exemption code _____ Refer instruction 15(e)

Individual or Non-Individual investors fill this section if ticked Yes above.			Individual investor have to fill in below details in case of joint applicants		
Tax Residency Status: 1	Country:		Tax Residency Status: 1	Country:	
	No.:			No.:	
	Type:			Type:	
Tax Residency Status: 2	Country:		Tax Residency Status: 2	Country:	
	No.:			No.:	
	Type:			Type:	
Tax Residency Status: 3	Country:		Tax Residency Status: 3	Country:	
	No.:			No.:	
	Type:			Type:	
Address Type _____		Address Type _____		Address Type _____	
(Address Type: Residential or Business (default) Residential Business Registered Office) (For address mentioned in form existing address appearing in folio)					

In case of applications with POA, the POA holder should fill separate form to provide the above details mandatorily.

13 . DECLARATION AND SIGNATURES / THUMB IMPRESSION OF APPLICANT(s) [Refer Instructions 2(f) of KIM]

To The Trustees, Mirae Asset Mutual Fund (The Fund) – (A) Having read and understood the contents of the SID of the Scheme applied for (Including the scheme(s) available during the New Fund Offer period); I/We hereby apply for units of the said such scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. (B) I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any provisions of the Income Tax Act, Anti Money Laundering Laws or any other applicable laws enacted by the Government of India from time to time. (C) Signature of the nominee acknowledging receipts of my/our credit will constitute full discharge of liabilities of Mirae Asset Mutual Fund. (D) The information given in / with this application form is true and correct and further agrees to furnish additional information sought by Mirae Asset Investment Managers (India) Private Limited (AMC) / Fund and undertake to update the information/details with the AMC / Fund/Registrars and Transfer Agent (RTA) from time to time. I/We hereby confirm that the AMC/Fund shall have the right to share my information and other details with the regulatory and government authorities as and when needed. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions. (E) I/We further declare that "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. (F) I/We hereby confirm that I/We have not been offered/communicated any indicative portfolio and/ or any indicative yield by the Fund/AMC/its distributor for this investment. I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. (G) Applicable to Investors availing the online facility: I/We have read, understood and shall be bound by the terms & conditions of the PIN agreement available on the AMC website for transacting online. (H) RIA: I/We hereby agree to consent the AMC to share my transaction details to the registered investment advisor (RIA) through the registrar or otherwise. (I) Applicable to Foreign Resident's Residing in India:- I/We confirm that I/We satisfy the Residency test as prescribed under FEMA provisions. I/We further declare that I/We am/are "Person Resident in India" and are allowed to invest into the Scheme as per the said FEMA regulations and other applicable laws and regulations. (J) I / We confirm that I am / We are not United States person(s) 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 reserves the right to redeem my / our investments in the Scheme(s). (K) FATCA/CRS Certification: I / We have understood the information requirements of this Form (read along with the FATCA& CRS Instructions) and hereby confirm that the information provided by me / us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA& CRS Terms and Conditions and hereby accept the same. In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit. In such case, the concerned SEBI registered intermediary reserves the right to reject the application or reverse the allotment of units, if subsequently it is found that applicant has concealed the facts of beneficial ownership. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future & also undertake to provide any other additional information as may be required at your end. (L) Aadhaar: I/We hereby voluntarily submit Aadhaar card to the Fund/AMC for updating the same in my folio.

Sign of 1 st Applicant / Guardian / Authorised Signatory / PoA	Sign of 2 nd Applicant / Guardian / Authorised Signatory / PoA	Sign of 3 rd Applicant / Guardian / Authorised Signatory / PoA
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ACKNOWLEDGMENT SLIP

For Lumpsum 'OR' SIP

Received Application from Mr. / Ms. / M/s. _____ as per details below:

Scheme Name and Plan	Payment Details	Date & Stamp of Collection Centre / ISC
	Amount (Rs) _____ Cheque/ DD No.: _____ Dated _____ Bank & Branch _____	

Cheque / DD is subject to realisation

CU/10/2022