

A

CLIENT DETAILS

Please fill the form in CAPITAL letters

***Name Title:** Mr. Ms. FIRST MIDDLE LAST

Date of Birth D D M M Y Y Y Y *PAN (pls. attach pan card copy)

KYC Compliant (Please tick) Yes No If Yes, please attach KYC acknowledgement copy Whether minor: Y / N
If No, please fill up the KYC application form and attach relevant documents If yes, please, fill section 'D'

Client Type (Resident Individual /NRI) *Nationality

*Gender M F Marital Status

Earning Status (Earning/Non- Earning) *Occupation Agriculture Business Student Professional Retired
 Service Housewife Self Employed Other_____

Residential Address (Indian)* Same as the one provided to CVL for KYC

Address 1

Address 2

*City *Pin Code *State *Country

Phone No.* (O) Phone No. (R) Fax

Mobile* *Email

Residential Address (Overseas - in case of NRI)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

B

SECOND APPLICANT DETAILS

***Name Title:** Mr. Ms. FIRST MIDDLE LAST

Date of Birth D D M M Y Y Y Y *PAN (pls. attach pan card copy)

KYC Compliant (Please tick) Yes No If Yes, please attach KYC acknowledgement copy
If No, please fill up the KYC application form and attach relevant documents

Client Type (Resident Individual /NRI) *Nationality

*Gender M F Marital Status

Earning Status (Earning/Non- Earning) *Occupation Agriculture Business Student Professional Retired
 Service Housewife Self Employed Other_____

Residential Address (Indian)* Same as 1st Holder (Please ✓ Tick)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

Residential Address (Overseas -Only in case of NRI)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

C

THIRD APPLICANT DETAILS

***Name Title:** Mr. Ms. FIRST MIDDLE LAST

Date of Birth D D M M Y Y Y Y *PAN (pls. attach pan card copy)

KYC Compliant (Please tick) Yes No If Yes, please attach KYC acknowledgement copy
If No, please fill up the KYC application form and attach relevant documents

Client Type (Resident Individual /NRI) *Nationality

*Gender M F Marital Status

Earning Status (Earning/Non- Earning) *Occupation Agriculture Business Student Professional Retired
 Service Housewife Self Employed Other_____

Residential Address (Indian)* Same as 1st Holder (Please ✓ Tick)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

Residential Address (Overseas -Only in case of NRI)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

D

DETAILS OF GUARDIAN (only applicable if applicant is a minor)

***Name Title:** Mr. Ms. FIRST MIDDLE LAST

Date of Birth D D M M Y Y Y Y *PAN (pls. attach pan card copy)

KYC Compliant (Please tick) Yes No If Yes, please attach KYC acknowledgement copy
If No, please fill up the KYC application form and attach relevant documents

Client Type (Resident Individual /NRI) *Nationality

*Gender M F Marital Status

Earning Status (Earning/Non- Earning) *Occupation Agriculture Business Student Professional Retired
 Service Housewife Self Employed Other_____

Residential Address (Indian)* Same as 1st Holder (Please ✓ Tick)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

Residential Address (Overseas - Only in case of NRI)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

Declaration by Guardian

Type of Guardian (Please 3 Tick) : () Father () Mother () Appointed by Court () Other

Full name of Guardian

Full name of the Minor

I hereby declare that the date of birth of the minor who is my _____ (Relationship) is _____ (DD MM YY) and I am his/her natural and lawful guardian /guardian appointed by the Court vide order dated _____ (copy enclosed). I shall represent the said minor in all future transaction(s) of any description in the e-nivesh account opened with IFAN Finserv Private Limited until the said minor attains the age of majority. I further declare that the transactions / dealings / investments of money / redemptions of money in the said e-nivesh account from time to time will not belong to me, but the e-nivesh account will be operated by me as a guardian of the minor. I indemnify IFAN Finserv Private Limited against any claim issued in the above named minor towards any deposit /withdrawal / transaction(s) etc., made by me in his/her e-nivesh account.

Affix Guardian's passport size photograph and sign across the same

I undertake to inform IFAN Finserv Private Limited of the marriage of the minor, if happens during the minority.

Date Signature of Guardian

Place Name of Guardian

Name and Signature of Witness:

- 1.
- 2.

E NOMINEES DETAILS

***Name Title:** Mr. Ms. **FIRST** **MIDDLE** **LAST**

Date of Birth *PAN (pls. attach pan card copy)

KYC Compliant (Please tick) Yes No If Yes, please attach KYC acknowledgement copy Relationship with 1st Applicant
If No, please fill up the KYC application form and attach relevant documents

Client Type (Resident Individual /NRI) *Nationality

*Gender M F Marital Status

Earning Status (Earning/Non- Earning) *Occupation Agriculture Business Student Professional Retired Service Housewife Self Employed Other _____

Residential Address (Indian)* Same as 1st Holder (Please ✓ Tick)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

Residential Address (Overseas -Only in case of NRI)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

F GUARDIAN OF NOMINEES DETAILS (Only in case nominee is a minor)

*Name Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	FIRST	MIDDLE	LAST
Date of Birth	D D M M Y Y Y Y	*PAN (pls. attach pan card copy)	
KYC Compliant (Please tick)	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please attach KYC acknowledgement copy If No, please fill up the KYC application form and attach relevant documents	
			Relationship with Nominee

Client Type (Resident Individual /NRI)	*Nationality
*Gender <input type="checkbox"/> M <input type="checkbox"/> F	Marital Status
Earning Status (Earning/Non- Earning)	*Occupation
<input type="checkbox"/> Agriculture <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Retired <input type="checkbox"/> Service <input type="checkbox"/> Housewife <input type="checkbox"/> Self Employed <input type="checkbox"/> Other	

Residential Address (Indian)* Same as 1st Holder (Please ✓ Tick)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

Residential Address (Overseas -Only in case of NRI)

Address 1

Address 2

*City *Pin Code *State *Country

Phone No. (O) Phone No. (R) Fax

Mobile *Email

I / We _____ and _____ do hereby nominate the aforementioned nominee / guardian of nominee's to receive all the holdings in my / our credit in respect of the investment made through the IFAN E-Nivesh provided by IFAN Finserv Private Limited. I / We also understand that all payments and settlements made to such nominee / guardian of nominee's shall be a valid discharge by the respective manufacturers or financial product companies and IFAN shall not be liable for such discharge.

G BANK DETAILS (Please attach a cancelled cheque copy) *MANDATORY

Bank Details*

Bank Name Account No.

MICR Code* NEFT Code RTGS Code

Account Type* (Savings, Current, NRE, NRO others) Branch Name*

Branch Address*

City Name* Pin Code* State* Country*

*Account Holder Name

Name of 1st A/c Holder Signature of 1st A/c Holder

Name of 2nd A/c Holder Signature of 2nd A/c Holder

Name of 3rd A/c Holder Signature of 3rd A/c Holder

Name of Guardian Signature of Guardian

Mode of Operation of Bank A/c.: A. Single B. Joint C. Either or Survivor D. As per Resolution (Please select one)

Joint Bank Account disclaimer: Please note that, incase the subscription for mutual fund units are remitted through joint bank accounts of investors, the default option for applying for mutual funds unit would be treated in the joint names of all the account holders of the bank account. However, you also have an option to apply for units in single name of any one or more names of the joint account holders of the bank account by specifically indicating your option in the form.

THIRD PARTY PAYMENT DISCLAIMER:

The AMC's/ Registrar's reserve the right to reject any application where the subscription money is remitted through a Third Party Bank Account*.

*Note: Third Party Bank Account means a payment made through a bank account other than that of the beneficiary investor bank account registered with IFAN Online Transaction facility (E-Nivesh).

H Annexure A : List of documents needed (Please submit self attested documents)

Documents	1st Applicant	2nd Applicant	3rd Applicant	Guardian
	Please ✓ tick			
PAN Card Copy (mandatory)				
KYC Acknowledgement Copy (mandatory if KYC compliant)				
Cancelled Cheque copy (mandatory)		N.A.	N.A.	
Proof of Address (Any one from the below list)				
Telephone Bill (not older than 2 months)				
Electricity Bill (not older than 2 months)				
Valid Passport				
Valid Driving License				
Bank A/c Statement (not older than 2 months)				
Bank Passbook (not older than 2 months)				
Demat A/c Statement (not older than 2 months)				
Voter ID				
Valid Ration Card				
Valid Rent Agreement				
Court Order (only in case of minor)	N.A.	N.A.	N.A.	

DECLARATION: I/ We have read and understood the terms and conditions subject to which IFAN E-Nivesh Facility is offered by IFAN Finserv Private Limited (IFAN) on IFAN website www.ifan.co.in and undertake to abide with the provisions of the same. All the information and particulars given by me / us in the registration form are true to the best of my/our knowledge and belief. I/ We agree to inform IFAN if there is any change in the information provided by me/us. I/ We hereby declare that I/ We are authorized to make this investment and the amount invested in the same is through legitimate sources/ channel only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Regulations, Notifications or Directions of the provisions of Income Tax Act, Prevention of Money Laundering Act, Anti-Corruption Act or any other applicable laws enacted by the Government of India/ State Governments from time to time. I hereby state and agree that all such acts, deeds and things done by me for transacting online through the IFAN E-Nivesh on the IFAN website shall be binding on me at my sole risk and cost. I also agree and give consent to IFAN in sharing my above details with any Service and/or any Product Provider/s and/or any regulatory/judicial/administrative authorities as may be required, from time to time.

NOTE: A/c holder's name should be printed on cheque copy.


Mode of Holding: (Please select one) A. Single B. Joint C. Either or Survivor D. As per Resolution
(For IFAN E-Nivesh)


Affix 1st Applicant's passport size photograph and sign across the same


Affix 2nd Applicant's passport size photograph and sign across the same

Affix 3rd Applicant's passport size photograph and sign across the same

SIGNATURE/S


1st Applicant 

2nd Applicant 

3rd Applicant 

Place : _____

Date : _____


Signature of Guardian (in case of minor)

SIP MANDATE FORM

E-nivesh Reference No.:

Declaration: I / We hereby authorize IFAN Finserv Pvt. Ltd. (IFAN) for making payments to mutual fund companies for the Systematic Investment Plan (SIP) transactions scheduled by myself / us on www.ifan.co.in (IFAN website). The debit transaction shall be processed by IFAN authorized Service Provider on behalf of IFAN. I / We authorize you to honor such payments for which I / We have signed and endorsed the mandate form.

MY E-NIVESH ACCOUNT DETAILS:

1) 1st Applicant Name

2) 2nd Applicant Name

3) 3rd Applicant Name

MY BANK DETAILS ARE AS MENTIONED BELOW:

A) Account Holder Name

B) 2nd Holder Name
(in case of Joint Accounts)

C) 3rd Holder Name
(in case of joint accounts)

D) 9-digit MICR Code of the bank & branch (as appearing on the MICR cheque issued by the bank)

E) Account Type (SB / Current / Cash)

F) Bank Account Number

G) Effective Date of the Mandate

D	D	M	M	Y	Y	Y	Y
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H) Expiry Date of the Mandate

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

I) Maximum Amount Limit per transaction (Rs.)

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Declaration:

I/we acknowledge that as per the process, the SIP amount would be debited 2-3 days prior to the SIP trigger date or as per the process set by IFAN so that the funds get transferred to the respective AMC account on the SIP trigger date.

I/we acknowledge the fact that this SIP mandate form is a common mandate registration form across multiple AMCs and the monthly / quarterly SIP amount and the scheme name shall be selected by me/us once the SIP mandate is successfully registered.

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

E-Nivesh Applicant Signatures:

1st Applicant

2nd Applicant

3rd Applicant

Note:

Kindly submit both the pages of this form along with cancelled cheque copy to your IFAN associate or you may send the same to:

IFAN Finserv Private Ltd. (Erstwhile ING Financial Services Pvt. Ltd.)
304, VIP Plaza, Near Infinity Mall, Andheri (W), Mumbai – 400 053, India.

To,
The Bank Manager

E-nivesh Reference No.:

Bank Name

Bank Branch

Bank City

Bank Telephone No.

Declaration: I / We hereby authorize IFAN Finserv Pvt. Ltd. (IFAN) for making payments to mutual fund companies for the Systematic Investment Plan (SIP) transactions scheduled by myself / us on www.ifan.co.in (IFAN website). The debit transaction shall be processed by IFAN authorized Service Provider on behalf of IFAN. I / We authorize you to honor such payments for which I / We have signed and endorsed the mandate form.

MY BANK DETAILS ARE AS MENTIONED BELOW:

A) Account Holder Name

B) 2nd Holder Name

(in case of Joint Accounts)

C) 3rd Holder Name

(in case of joint accounts)

D) 9-digit MICR Code of the bank & branch (as appearing on the MICR cheque issued by the bank)

E) Account Type (SB / Current / Cash)

F) Bank Account Number

G) Effective Date of the Mandate

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

H) Expiry Date of the Mandate

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

I) Maximum Amount Limit per transaction (Rs.)

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

TERMS & CONDITIONS:

I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in ECS/Standing Instruction/Direct Debit. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold IFAN and its Service Provider responsible. I/We will also inform IFAN, about any changes in my bank account. I/We have read and understood the Scheme Information Document/Key Information Memorandum of the Scheme. I/We apply for the units of the Scheme and I/we agree to abide by the terms, conditions, rules and regulations of the scheme.

This is to inform I/we have registered for the RBI's Electronic Clearing Service (Debit Clearing) and that my payment towards my investment in mutual fund companies shall be made from my/our above mentioned bank account with your bank. I/We authorize the representative carrying this ECS mandate Form to get it verified & executed. I/We authorize the bank to honor the instructions as mentioned in the application form. I/We also hereby authorize bank to debit charges towards verification of this mandate, if any.

I/We undertake to keep sufficient funds in the funding account on the date of execution of ECS/Standing Instruction/Direct Debit. I/We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/we would not hold the Mutual Fund, IFAN, Service Provider or the Bank responsible. If the date of debit to my/our account happens to be a non banking/business day as defined in the Scheme Information Document of the said Scheme of AMC, execution of the debit will happen as per the normal practice of the bank mandated by the investor and allotment of units will happen as per the Terms and Conditions listed in the Scheme Information Document of the Mutual Fund.

I/We hereby agree to avail the facility for SIP and authorize my bank to execute the ECS/Standing Instruction/Direct Debit for a further increase in installment from my designated account. I/We agree that IFAN/AMC/Mutual Fund (including its affiliates)/ Service Provider, and any of its officers directors, personnel and employees, shall not be held responsible for any delay / wrong debits on the part of the bank for executing the standing instructions of additional sum on a specified date from my account. If the transaction is not effected at all for reasons of incomplete or incorrect information, IFAN would not be held responsible. I/We confirm to have understood the introduction of this facility and agree to abide by the terms, conditions, rules and regulations of this facility.

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

BANK A/C. HOLDER'S SIGNATURE

1st Account Holder

SIGNATURE

2nd Account Holder*

SIGNATURE

3rd Account Holder*

SIGNATURE

DOCUMENT CHECKLIST FOR KYC

A. Proof of Identity

- Photo PAN Card (Mandatory)
- In case of Non Photo PAN Card, please submit any one of the following in addition to the PAN Card:
Driving License/Passport copy/ Voter ID/Bank Photo Pass Book

B. Proof of Address (Any one of the following)

- Latest Telephone Bill: Landline (not more than 2 months prior to the date of application)
- Latest Electricity Bill (not more than 2 months prior to the date of application)
- Passport copy
- Latest Bank Passbook/ Bank Account Statement (not more than 2 months prior to the date of application)
- Latest Demat Account Statement (not more than 2 months prior to the date of application)
- Voter ID
- Driving License
- Ration Card
- Rent Agreement

Note:

1. This list is applicable only for Individual Investors. Please note that KYC has to be completed for each Applicant (in case of joint holders).
2. Please submit the document for Proof of Identity and Proof of Address which has to be SELF ATTESTED or True Copies attested by a Notary Public/Gazetted Officer/ Manager of a Scheduled Commercial Bank or Multinational Foreign Banks (Name, Designation and Seal should be affixed on the copy). Unattested photocopies of an original document will not be accepted.

LIST OF BANKS FOR IFAN E-NIVESH

For transacting online through IFAN e-NIVESH, given below are the list of Banks that are enrolled for the same. You may select the bank in which you have internet banking facility activated.

- 1 Allahabad Bank
- 2 Axis Bank
- 3 Bank of Bahrain and Kuwait
- 4 Bank of Baroda
- 5 Bank of India
- 6 Bank of Maharashtra
- 7 Bank of Rajasthan
- 8 Central Bank of India
- 9 City Union Bank
- 10 Corporation Bank
- 11 Deutsche Bank
- 12 Development Credit Bank
- 13 Dhanlaxmi Bank
- 14 Federal Bank
- 15 HDFC Bank
- 16 ICICI Bank
- 17 IDBI Bank
- 18 Indian Bank
- 19 Indian Overseas Bank
- 20 ING Vysya Bank
- 21 Jammu and Kashmir Bank
- 22 Karnataka Bank
- 23 Karur Vysya Bank
- 24 Oriental Bank of Commerce
- 25 South Indian Bank
- 26 Standard Chartered Bank
- 27 State Bank of Bikaner and Jaipur
- 28 State Bank of Hyderabad
- 29 State Bank of India
- 30 State Bank of Mysore
- 31 State Bank of Patiala
- 32 State Bank of Travencore
- 33 Syndicate Bank
- 34 Tamilnad Mercantile Bank
- 35 Union bank of India
- 36 United Bank of India
- 37 Vijaya Bank
- 38 Yes Bank

* Please attach a cancelled cheque copy of the bank account having your name and MICR code pre-printed. In case if your name and MICR code is not pre-printed on the cheque, please attach a self attested copy of your bank statement.

LIST OF AMCs FOR IFAN E-NIVESH

Please find below list of AMCs for online transactions through IFAN e-NIVESH.

1. AXIS Asset Management Company Limited
2. Birla Sunlife Asset Management Company Limited
3. DSP Black Rock Investment Managers Private Limited
4. Franklin Templeton Asset Management (India) Private Limited
5. HDFC Asset Management Company Limited
6. IDFC Asset Management Company Limited
7. Mirae Asset Global Investments (India) Private Limited
8. Reliance Capital Asset Management Limited
9. Religare Invesco Asset Management Company Pvt Ltd
10. SBI Funds Management Private Limited
11. Sundaram Asset Management Company Limited
12. Tata Asset Management Limited
13. UTI Asset Management Company Limited