



Form for Fresh Nomination / Change of Existing Nomination

Applicable for Individual Unitholders only - whether holding Units Singly or Jointly with other holders
Please read the instructions carefully before filling up this form

Name of 1st Holder _____

Name of 2nd Holder _____

Name of 3rd Holder _____

I/We, the above-named investors of _____ Mutual Fund, do hereby nominate the person(s) more particularly described hereunder to receive the Units held my/our Folio/s listed below in the event of my / our death by cancelling the nomination(s) made by me / us previously in respect of the units held by me/ us in the Folio/s listed below.

Folio No. / Application No.
1.
2.
3.

Name of the 1 st Nominee*	% of Allocation*
PAN of the Nominee ^{\$}	Date of Birth of Nominee** DD / M / YYYY
Nominee Relationship*	
Name of the Guardian **	PAN of Nominee Guardian ^{\$}
Guardian's Relationship with Nominee** <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	
Proof of relationship ^{\$} <input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others	
Address ^{\$}	
City	State PIN
Nominee Signature ^{\$}	

Name of the 2 nd Nominee*	% of Allocation*
PAN of the Nominee ^{\$}	Date of Birth of Nominee** DD / MM / YYYY
Nominee Relationship*	
Name of the Guardian **	PAN of Nominee Guardian ^{\$}
Guardian's Relationship with Nominee** <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	
Proof of relationship ^{\$} <input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others	
Address ^{\$}	
City	State PIN
Nominee Signature ^{\$}	

Name of the 3 rd Nominee*	% of Allocation*	
PAN of the Nominee ^{\$}	Date of Birth of Nominee** DD / MM / YYYY	
Nominee Relationship*		
Name of the Guardian **	PAN of Nominee Guardian ^{\$}	
Guardian's Relationship with Nominee** <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian		
Proof of relationship ^{\$} <input type="checkbox"/> Birth Certificate <input type="checkbox"/> School Leaving Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others		
Address ^{\$}		
City	State PIN	
Nominee Signature ^{\$}		
Signature of the 1st holder	Signature of the 2nd holder	Signature of the 3rd holder

* Mandatory

\$ Optional

**Mandatory & Applicable in case the Nominee is a Minor