

Amount _

_ Cheque/DD No._

_ Date_

Bank and Branch details

FAMILY SOLUTIONS

FORM FOR NEW INVESTORS

(Please use separate Transactions Form for each

INVESTMENTS	INVESTMENT PLANS FO		Scheme / Plan and Transaction)			
Advisor ARN / RIA code Sub-l	proker/Branch Code Sub-bro		presentative EUIN 161330	For offi	For office use only	
	f any, shall be paid to the ARN Holder (AMFI registered dis			of various factors including service	e rendered by the ARN Holder.	
The upfront commission on investment made by the investor, Applicable only if ARN is mentioned but EUIN box is left blar person of the above distributor/sub broker or notwithstanding give you my/our consent to share/provide the transactions date of the consent to share a consen	ik: "I/We hereby confirm that the EUIN box has been intentigued advice of in-appropriateness, if any, provided by the enaled for a feed/portfolio holdings/NAV etc. in respect of my/our involutions."	onally left blank by me/us as this transa nployee/relationship manager/sales pe estments under Direct Plan of all Schem	ction is executed without any ir erson of the distributor/sub br es managed by you, to the SEBI-	nteraction or advice by the employ oker." Applicable only if RIA Cod Registered Investment Adviser wh	ee/relationship manager/sales e is mentioned: "I / We hereby nose code is mentioned herein."	
TRANSACTION CHARGES (Refer instructions I am a first time investor in mutual funds (and tick the appropriate option) Applicable for		tributors/agents/broker	rs who have opted to receive		
_	KS.130 Will be deducted).	an existing mutual funus i	Date	Place		
DECLARATION Having read and understood the contents of the Statement of A (together referred as Scheme Documents) and after evaluating	and acknowledging the risk factors. I / we hereby apply to the	he Franklin Templeton Trustee Services	ation Document (SID); Key Info Pvt. Ltd., Trustees to the schem	rmation Memorandum (KIM), the	of FTMF as indicated above, and	
agree to abide by all applicable laws and the terms and condition	s mentioned in the Scheme Documents. Notwithstanding the	generality of the aforesaid undertaking, I	I/We hereby confirm that (i) I /v	ve am/are not a 'US Person' and are	not applying for Units on behalf	
to any osterism in the form of trail commission or any other mode), offered by commaking this investment and are not in contravention or evasior referred as Franklin Templeton) harmless against any losses, cost incorrect or incomplete or for the activities performed by them in	of any applicable laws. I/ We further agree to hold FTMF, Is, damages arising out of any actions undertaken or activities a good faith or on the basis of information provided by me/us	ranklin Resources Inc. its subsidiary an performed by them in accordance with t as also due to my/our not intimating / o	nd associate entities including the the Scheme Documents and for delay in intimating such changes	neir employees, directors and key any consequences in case of any of s. I/We hereby authorise Franklin T	managerial persons (collectively the above particulars being false, empleton to use, disclose, share,	
remit in any form, mode or manner, all / any of the information representatives or distributors or any other parties located in Inc hereby agree to keep the information provided to Franklin Tenni	provided by me/ us, including all changes, updates to such ila or outside India or any Indian or foreign governmental, sta oleton updated and to provide any additional information / o	information as and when provided by natutory, regulatory, administrative or judi documentation that may be required by	ne/ us alongwith the details of icial authorities / agencies with Franklin Templeton. in connect	investment made by me/us, to any out any obligation of advising / info ion with this application. I/We he	rming me/us of the same. I/ We reby provide my/our consent in	
accordance with Aadhaar Act, 2016 and regulations made theret PMLA. I/We hereby provide my consent for sharing/disclosing of Registry for the purpose of updating the same in the folios linked to	ınder, for (i) collecting, storing and usage (ii) validating/authe my/our Aadhaar number including demographic informatio	enticating and (ii) updating my/our Aadl on with the asset management companies	haar number(s) in accordance v s of SEBI registered mutual fund	vith the Aadhaar Act, 2016 (and re l and their Registrar and Transfer A	gulations made thereunder) and gent (RTA), KRA(s) & Central KYC	
Sole / First Unit Holder		1 Wester W. 1.1	_	microd Horse Holds		
MY DETAILS (To be filled in Block Lett		nd Unit Holder)	Third Unit Holde	r	
My Name (Should match with Aadhaar Card)	ers. Flease provide the following details in i	iuii, Flease Feier Ilisu ucuolis	•	/PEKRN (1st Applicant)	кус	
My Guardian's Name (if minor)/POA/Contac	t Person		PAN	/PEKRN (Guardian/POA)	KYC	
On behalf of Minor	Date of Birth Minor's	Date of E		n named is :		
(* Attach Mandatory Documents as per instructions).	Minor's	Proof atta	ached * Father	Mother Court	Appointed	
JOINT APPLICANTS (IF ANY) DET		Mode	e of Operation : Sing		r Survivor(s) [Default]	
2nd Applicant Name (Should match with Aac	lhaar Card)		PAN	PEKRN (2nd Applicant)	KYC	
3rd Applicant Name (Should match with Aad	haar Card)		PAN	/PEKRN (3rd Applicant)	КУС	
I ⊗ INVESTMENT DETAILS": I/We wou	ıld like to invest in the following sch	nemes to meet my/our l	ife goals (Please read F	Product labeling details availa	ible on cover page of KIM)	
	GOAL Additional Details		Retirement	Child's Future e.g. Deepa's Marriage	Wealth Builder e.g. Home/Car	
Scheme Na		Options	Amount in ₹	Amount in ₹	Amount in ₹	
Lumpsum SIP	Plan: Regular Direct		(SIP: per Installment)	(SIP: per Installment) (SIP: per Installment)	
		Dividend Payout				
		☐ Dividend Reinvestment				
Lumpsum SIP	Plan: Regular Direct					
		☐ Dividend Payout ☐ Dividend Reinvestment				
Lumpsum SIP	Plan: Regular Direct	Growth				
		Dividend Payout				
	pi	Dividend Reinvestment				
Lumpsum SIP	Plan: Regular Direct	☐ Dividend Payout				
		☐ Dividend Reinvestment				
Total Investm		Ī	C + C			
Total Investme	nt in all Goals		(in figu	res)		
Amount Invested	(DD Charges)	Net A	Amount			
Payment Details Cheque/DD No.	Bank	D 1 4 (0 V				
Branch Please register my Pay-in bank deta <u>ils a</u> lso as one of t	he banks in my/our account/folio based on the pay	Bank A/C No.	e refer the instruction for	supporting document require	d for registering Rank	
	wish to register this bank as additional bank in my		- 1 Just and more detroit for s		replaceding bank	
ACKNOWLEDGEMENT SLIP				Sl. No.		
Received from				Pin		

MY CONTACT DET	'AILS (As per KY	C records. To be f	illed in Block Let	ters)							
Email ID (in capital) Mobile +91 Address Landmark			Tel	(STD Code)			a b c	lress Type (Ma . Residential & . Residential . Business . Registered Off	Business		
City			Pin Co	ode							
			(Mandat		Sta	te					
BANK ACCOUNT D	ETAILS (Avail	Multiple Bank	Registration Fa	icility)							
My Bank Name]					
Bank A/C No.					A/C Type_	Savings Curre	entNRE	_NRO	Others		
Branch Address											
				City			Pi		ligit number next to		
IFSC code: (11 digit)				MICR	code (9 digit)			your cheque			
ADDITIONAL INFORMATION											
Applicant	Aadhaa	r No. ⁺		KIN No. (I	KYC done via CKYC)			ite of Birth"	Gender		
1st 2nd							D D /	/	Y □M □F Y □M □F		
3rd									Y M DF		
G or POA							D D /	M M / Y	Y M F		
#Date of Birth - Mandatory if CK			wer Of Attorney [†] If	Aadhaar number is not		nber and proof to be pro	vided.	a . Po			
Details Mobile No.	2	Applicant			3 rd Applicant		G or POA				
Email Id.											
NOMINATION DET	FAILS (In case of	f more than one n	ominee, please s	submit a separate	nomination form availabl	e with any of our IS	SCs or on our	website). Refer in	structions.		
	<u> </u>			<u> </u>	ory to attach DOB Proof)						
Nominee	e Name and Addr	ess	DOB	Gua	rdian Name & Address	Allocatio	n Nominee/ Guardian Signature				
						100 %	x				
				I							
OR I/We DO NOT wish	to nominate and	l sign here (To be	signed by all the	joint holders irre	spective of the mode of ho	oldings.)					
OR I/We DO NOT wish DEPOSITORY ACC							nstructions.				
DEPOSITORY ACC				estor wishes to							
DEPOSITORY ACC	OUNT DETAIL	S (Optional. To	be filled if inve	estor wishes to	hold the units in Dema	t mode). Refer in Beneficiary Beneficiary	Ac No.				
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence	OUNT DETAIL	S (Optional. To	be filled if invo	estor wishes to D I N th the sequence of na	hold the units in Dema	t mode). Refer in Beneficiary Beneficiary aclosed (Mandatory)	Ac No. Ac No. Client Master Lis	st OR DP states	ment		
DEPOSITORY ACCOMES TO PROBLEM DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUSTON	OUNT DETAIL e of names as mention TOMER (KYC)	S (Optional. To	be filled if invo DP II on Form matches wi	estor wishes to D I N th the sequence of na k/ Specify. The ap	hold the units in Dema	t mode). Refer in Beneficiary Beneficiary closed (Mandatory)	Ac No. Ac No. Client Master List ot filled.)				
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS' Status details for Resident Individual	ount Detail of names as mentic romer (Kyc) 1st Applicant	oned in this Applicati	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap Guardian	hold the units in Dema	t mode). Refer in Beneficiary Beneficiary closed (Mandatory)	Ac No. Ac No. Client Master Lis				
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS' Status details for Resident Individual NRI/PIO/OCI	e of names as mention FOMER (KYC) 1st Applicant	S (Optional. To oned in this Application DETAILS (Management 2nd Applicant	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap	mes in the Demat account. Er plication is liable to get re Occupation details for Private Sector Public Sector	t mode). Refer in Beneficiary Beneficiary Inclosed (Mandatory) Sejected if details not 1st Applicant	Ac No. Ac No. Client Master List filled.) 2 nd Applicant	3 rd Applicant	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS' Status details for Resident Individual	e of names as mention TOMER (KYC) 1st Applicant	S (Optional. To	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap Guardian	mes in the Demat account. Er plication is liable to get re Occupation details for Private Sector	Beneficiary Beneficiary Beneficiary closed (Mandatory) pjected if details no	Ac No. Ac No. Client Master Lis t filled.) 2nd Applicant	3 rd Applicant	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship	e of names as mention TOMER (KYC) 1st Applicant □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	S (Optional. To	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap Guardian	mes in the Demat account. En plication is liable to get re Occupation details for Private Sector Public Sector Government Service Business Professional	Beneficiary Beneficiary Beneficiary closed (Mandatory) pjected if details no	Ac No. Ac No. Client Master Lis t filled.) 2nd Applicant	3 rd Applicant	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian	e of names as mention TOMER (KYC) 1st Applicant	S (Optional. To	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap Guardian ip	mes in the Demat account. En plication is liable to get reconstruction of the private Sector Public Sector Government Service Business Professional Agriculturist	Beneficiary Beneficiary Beneficiary closed (Mandatory) pjected if details no 1 st Applicant	Ac No. Ac No. Client Master Lis t filled.) 2nd Applicant	3 rd Applicant	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust	oned in this Application DETAILS (Manoral Details (Manor	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap Guardian ip	mes in the Demat account. Er plication is liable to get re Occupation details for Private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife	Beneficiary Beneficiary Beneficiary closed (Mandatory) pjected if details no	Ac No. Ac No. Client Master Lis t filled.) 2nd Applicant	3 rd Applicant	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank	oned in this Application DETAILS (Manoral Details (Manor	be filled if invo	estor wishes to D I N th the sequence of na k/ Specify. The ap Guardian ip	mes in the Demat account. En plication is liable to get reconstruction of the private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student	Beneficiary Beneficiary Beneficiary Beneficiary closed (Mandatory) perceted if details no 1 st Applicant	Ac No. Ac No. Client Master Lis t filled.) 2 nd Applicant	3 rd Applicant	Guardian		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac	e of names as mentice FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.)	oned in this Application DETAILS (Manoral Properties of the Component of	be filled if invo	th the sequence of na k/ Specify. The ap	mes in the Demat account. En plication is liable to get re Private Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify)	Beneficiary Benefi	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	3 rd Applicant	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.)	oned in this Application DETAILS (Manoral Details (Manor	be filled if invo	cestor wishes to D I N The sequence of na k/ Specify. The ap Guardian ip I I I I I I I I I I I I I	mes in the Demat account. En plication is liable to get reconstruction of the private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student	Beneficiary Benefi	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	3 rd Applicant	Guardian		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.)	S (Optional. To	be filled if invo	cestor wishes to D I N D I N Cuardian Cua	mes in the Demat account. En plication is liable to get replication is lia	Beneficiary Benefi	Ac No. Ac No. Client Master List filled.) 2nd Applicant	a 3 rd Applicant	Guardian Guardi		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.)	oned in this Application DETAILS (Manoral Details (Manor	be filled if invo	th the sequence of na k/ Specify. The ap	mes in the Demat account. En plication is liable to get replication is lia	Beneficiary Benefi	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Guardian Guardian Guardian		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr	e of names as mentic FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.)	oned in this Applicati DETAILS (Mano 2nd Applicant	be filled if invo	cestor wishes to D I N th the sequence of na k/ Specify. The ap Guardian - ip I	mes in the Demat account. En plication is liable to get replication is lia	Beneficiary Benefi	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Guardian Guardian Not Applicable		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr > 10 cr OR Networth in Rs.	e of names as mentice FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.)	s (Optional. To	be filled if invo	th the sequence of na k/ Specify. The ap	mes in the Demat account. Erroplication is liable to get reconstruction of the private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1 rd Applicant 2 rd Applicant 3 rd Applicant Guardian Authorised Signatories Promoters	Beneficiary Benefi	Ac No. Ac No. Client Master List titiled.) 2nd Applicant	Related to PEP	Guardian Guardian Guardian Guardian Guardian Guardian Guardian Guardian		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr > 10 cr > 10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older	e of names as mentice FOMER (KYC) 1st Applicant Company/B Trust Bank Bank Company/B Trust Bank Company/B Company	oned in this Applicati DETAILS (Mano 2nd Applicant	be filled if invo	th the sequence of na k/ Specify. The ap	mes in the Demat account. En plication is liable to get reconception details for Private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1st Applicant 2st Applicant 3rd Applicant Guardian Authorised Signatories Promoters Partners Karta	Beneficiary Beneficiary Beneficiary Beneficiary Benefici	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Guardian Guardian Guardian Guardian		
NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr > 10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year)	e of names as mentice FOMER (KYC) 1st Applicant Company/B Trust Bank Gomes as mentice Company/B Trust Bank Company/B Trust Bank Company/B Compa	s (Optional. To	be filled if invo	th the sequence of na k/ Specify. The ap Guardian	mes in the Demat account. En polication is liable to get respectively provided in the Demat account. En polication is liable to get respectively provided in the Demat account. En polication is liable to get respectively provided in the Demat Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1 rd Applicant 2 rd Applicant 3 rd Applicant Guardian Authorised Signatories Promoters Partners Karta Whole-time Directors/1	Beneficiary Beneficiary Beneficiary Beneficiary Beneficiary Beneficia	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Guardian		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr > 10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year)	e of names as mentice FOMER (KYC) 1st Applicant Company/B Trust Bank Gomes as mentice Company/B Trust Bank Company/B Trust Bank Company/B Compa	S (Optional. To	be filled if invo	sestor wishes to D I N The sequence of na k/ Specify. The appropriate in the sequence of na k	mes in the Demat account. En plication is liable to get reconception of the private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1st Applicant 2nd Applicant 3rd Applicant Guardian Authorised Signatories Promoters Partners Karta Whole-time Directors/1st Stors including HUF shouse in the property of the professional Agriculturist Retired Housewife Student Others (Please specify)	Beneficiary Beneficiary Beneficiary Beneficiary Beneficiary Colored (Mandatory) Sepected if details no 1st Applicant	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	MBO details form		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year) EST FATCA/CRS/UBO Details	e of names as mentice FOMER (KYC) 1st Applicant Company/B Trust Bank Gomes as mentice Company/B Trust Bank Company/B Trust Bank Company/B Compa	s (Optional. To	be filled if invo	th the sequence of na k/ Specify. The ap Guardian	mes in the Demat account. En plication is liable to get reconception of the private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1st Applicant 2nd Applicant 3rd Applicant Guardian Authorised Signatories Promoters Partners Karta Whole-time Directors/1st Stors including HUF shouse in the property of the professional Agriculturist Retired Housewife Student Others (Please specify)	Beneficiary Beneficiary Beneficiary Beneficiary Beneficiary Beneficia	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	MBO details form		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year) Details Place & Country of Birth Nationality	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.) Company/B Company/	S (Optional. To oned in this Application of the App	be filled if invo	sestor wishes to D I N D I N The sequence of na k/ Specify. The ap Guardian	mes in the Demat account. En plication is liable to get respectively provided in the Demat account. En plication is liable to get respectively provided in the Demat account. En private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1th Applicant 2nd Applicant Guardian Authorised Signatories Promoters Partners Karta Whole-time Directors/7th Stors including HUF shelicant	Beneficiary Beneficiary Beneficiary Beneficiary Benefici	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Not Applicable		
NSDL: DP Name CDSL: DP Name CDSL: DP Name Please ensure that the sequence Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac - 1 cr 1-5 cr 5-10 cr > 10	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.) Company/B Company/	S (Optional. To oned in this Application of the App	be filled if invo	sestor wishes to D I N D I N The sequence of na k/ Specify. The ap Guardian ip II III III III III III I	mes in the Demat account. En plication is liable to get replication is lia	Beneficiary Beneficiary Beneficiary Beneficiary Benefici	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	MBO details form		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year) Details Place & Country of Birth Nationality	e of names as mention FOMER (KYC) 1st Applicant Company/B Trust Bank ange (in Rs.) Company/B Company/	S (Optional. To oned in this Application of the App	be filled if invo	sestor wishes to D I N D I N The sequence of na k/ Specify. The ap Guardian ip II III III III III III I	mes in the Demat account. En plication is liable to get respectively provided in the Demat account. En plication is liable to get respectively provided in the Demat account. En private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1th Applicant 2nd Applicant Guardian Authorised Signatories Promoters Partners Karta Whole-time Directors/7th Stors including HUF shelicant	Beneficiary Beneficiary Beneficiary Beneficiary Benefici	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Not Applicable		
DEPOSITORY ACC NSDL: DP Name CDSL: DP Name Please ensure that the sequence KNOW YOUR CUS Status details for Resident Individual NRI/PIO/OCI Sole Proprietorship Minor through Guardian Non Individual Others (Please specify) Gross Annual Income R Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac-1 cr 1-5 cr 5-10 cr > 10 cr OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year) Place & Country of Birth Nationality Are you a tax resident of a	ount Detail of names as mention fomer (KyC) 1st Applicant Company/B Trust Bank ange (in Rs.) Company/B Company/B Trust Bank Company/B Company/B	S (Optional. To	be filled if invo	sestor wishes to D I N D I N The sequence of na k/ Specify. The ap Guardian ip II III III III III III I	mes in the Demat account. En plication is liable to get re Occupation details for Private Sector Public Sector Government Service Business Professional Agriculturist Retired Housewife Student Others (Please specify) Politically Exposed Per 1 rd Applicant 2 rd Applicant Guardian Authorised Signatories Promoters Partners Karta Whole-time Directors/71 stors including HUF sh licant No Mandatory to enclose FATCA	Beneficiary Beneficiary Beneficiary Beneficiary Benefici	Ac No. Ac No. Client Master List of filled.) 2nd Applicant	Related to PEP	Guardian		

SIP ECS form. (ii) Future date - Please fill the SIP [ECS/Direct Debit] form along with the Application form. Note: SIP will start after 30 days 2. In case you are investing via both Regular and SIP simultaneously (where the SIP will start after 30 days 2. In case you are investing via both Regular and SIP simultaneously (where the SIP will start after 30 days), please provide a single cheque for the Regular amount, along with the completed SIP (ECS/Direct Debit) Mandate form. 3. Cheque for the investment should be made in favour of "Franklin Templeton Family Solutions" 4. For payments by demand draft please attach a certificate from the banker or Challan (instruction to bank) or passbook/bank statement evidencing the debit for issuance.