



APPLICATION FORM

HDFC CHILDREN'S GIFT FUND

Open-ended Balanced Scheme

Application No. CG

Investors must read the Key Information Memorandum and the instructions before completing this form. The Application Form should be completed in English and in BLOCK LETTERS only.

1. KEY PARTNER / AGENT INFORMATION			FOR OFFICE USE ONLY			
Name and AMFI Reg. No. (ARN)	Sub Agent's Name and Code / Bank Branch Code	M O Code	Date of Receipt	Folio No.	Branch Trans. No.	ISC Name & Stamp
ARN-						

Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

2a. INVESTOR INFORMATION (DONOR) (refer Instruction 2)

Name of First/Sole Applicant Mr. / Ms. / M/s. _____

Nationality _____ KYC Compliance Status (Mandatory for Rs.50,000 & above)⁵: Yes No If yes (attach proof)

PAN* [Mandatory] _____ Mobile _____

Address of First/Sole Applicant _____

_____ PIN _____

Overseas Address (Mandatory in case of NRIs/PIOs) _____

Date of Birth D D M M Y Y Y Y Tel. : Office _____ Residence _____

Facsimile _____ e-mail _____

Name of the Second Applicant Resident NRI [Mandatory Please tick (✓)]

Mr. / Ms. _____

Nationality _____

PAN* [Mandatory] _____ KYC Compliance Status (Mandatory for Rs.50,000 & above)⁵: Yes No If yes (attach proof)

Name of the Third Applicant Resident NRI [Mandatory Please tick (✓)]

Mr. / Ms. _____

Nationality _____

PAN* [Mandatory] _____ KYC Compliance Status (Mandatory for Rs.50,000 & above)⁵: Yes No If yes (attach proof)

*** Please attach PAN proof. If PAN is already validated, please don't attach any proof (refer Instruction 12) ⁵ Refer instruction 14**

2b. POWER OF ATTORNEY (PoA) HOLDER DETAILS

Name OF PoA Mr. Ms. M/s. _____

PAN* _____ [Please (✓)] KYC Compliance Status Proof** * Refer instruction 12 ** Refer instruction 14

Status (of First/Sole Applicant) [Please (✓)]	Occupation (of First/Sole Applicant) [Please (✓)]
<input type="checkbox"/> Resident Individual <input type="checkbox"/> Society / Club <input type="checkbox"/> AOP <input type="checkbox"/> PIO <input type="checkbox"/> HUF <input type="checkbox"/> NRI-Repatriation <input type="checkbox"/> NRI-Non-Repatriation <input type="checkbox"/> Company <input type="checkbox"/> BOI <input type="checkbox"/> Trust <input type="checkbox"/> Partnership <input type="checkbox"/> Body Corporate <input type="checkbox"/> Others _____ (please specify)	<input type="checkbox"/> Service <input type="checkbox"/> Student <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Business <input type="checkbox"/> Proprietorship <input type="checkbox"/> Retired <input type="checkbox"/> Agriculture <input type="checkbox"/> Others _____ (please specify)

3. UNIT HOLDER (BENEFICIARY CHILD) INFORMATION (refer Instruction 3)

Name of the Beneficiary Child Mast. / Miss. _____

(Not exceeding 18 years of age) _____

Nationality _____ Date of Birth (Mandatory) D D M M Y Y Y Y

PAN* _____

Name of the Parent / Legal guardian of Beneficiary Child Mr. / Ms. _____

PAN* [Mandatory] _____ KYC Compliance Status (Mandatory for Rs.50,000 & above)⁵: Yes No If yes (attach proof)

Date of Birth of the parent / legal guardian of the Unit holder (Mandatory) D D M M Y Y Y Y

Signature of the Parent / Legal Guardian of the Unit holder _____

Address of the Beneficiary Child _____

_____ PIN _____

Overseas Address (in case of NRIs/PIOs) _____

_____ PIN _____

***Please attach PAN proof. If PAN is already validated, please don't attach any proof (refer Instruction 12) ⁵ Refer instruction 14**

Mode of Holding	Status (of the Beneficiary Child) [Mandatory Please (✓)]	Occupation (of the Beneficiary Child) [Please (✓)]
Single	<input type="checkbox"/> Resident <input type="checkbox"/> NRI/PIO <input type="checkbox"/> Others _____ (please specify)	<input type="checkbox"/> Student <input type="checkbox"/> Others _____ (please specify)

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 600676(Do not Prefix STD Code) or 18002336767 (Toll Free)]

HDFC MUTUAL FUND

Head office : Ramon House, 3rd Floor, H.T. Parekh Marg, 169, Backbay Reclamation, Churchgate, Mumbai 400020

Date : _____

Received from Mr/Ms/M/s _____ an application for Gifting of Units along with Cheque/Demand Draft dated _____ as per details below :

HDFC Children's Gift Fund _____ Plan. Units subject to Lock-in Period (Please ✓) Yes No.

Rs. _____ Cheque/DD No. _____

drawn on _____ Bank _____ Branch _____

Please Note : All Purchases are subject to realisation of cheques/demand drafts.

Application No. CG

ISC Stamp & Signature

TEAR HERE

4. ALTERNATE CHILD INFORMATION (refer Instruction 4)											
Name of the Alternate Child Mast. / Miss. _____ (Not exceeding 18 years of age)											
Nationality _____						Date of Birth D D M M Y Y Y Y					
Name of the Parent / Legal guardian of Alternate Child Mr. / Ms. _____											
Address of the Alternate Child _____											

_____ PIN _____											
Overseas Address (in case of NRIs/PIOs) _____											

_____ PIN _____											

Status (of the Alternate Child) [Mandatory (Please ✓)]						Occupation (of the Alternate Child) [Mandatory (Please ✓)]					
<input type="checkbox"/> Resident <input type="checkbox"/> NRI/PIO <input type="checkbox"/> Others _____ (please specify)						<input type="checkbox"/> Student <input type="checkbox"/> Others _____ (please specify)					

5. BANK ACCOUNT DETAILS OF UNIT HOLDER (BENEFICIARY CHILD) (Please note that, as per SEBI Regulations it is mandatory for unit holders to provide their bank account details - refer Instruction 5a)											
Account No. _____				Name of the Bank _____							
Branch _____				Bank City _____							
Account Type [Please ✓] <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> Others _____ (please specify)				IFSCCode*** (Refer Instruction 5b) _____							
The 9 digit MICR Code number of my/our Bank & Branch is**:				(The 9 digit code appears on your cheque next to the cheque number)				*** (Mandatory for Credit NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)			
** (Refer Instruction 9) (Mandatory for Dividend Payout via ECS)											

6. MODE OF PAYMENT OF REDEMPTION / DIVIDEND PROCEEDS VIA DIRECT CREDIT / NEFT / ECS (Refer Instruction 9)											
Unitholders will receive their redemption / dividend proceeds (if any) directly into their bank account (as furnished by them in Section 5) as per the following arrangements: (i) Direct Credit for bank accounts with ABN AMRO Bank NV, Axis Bank Limited, Citibank N.A, Deutsche Bank AG, HDFC Bank Limited, The Hongkong and Shanghai Banking Corporation, ICICI Bank Limited, IDBI Bank Limited, Kotak Mahindra Bank Ltd., Standard Chartered Bank and YES Bank Limited. (ii) Electronic credit through National Electronic Funds Transfer (NEFT) System of RBI for bank accounts other those mentioned in section no 6 (i). (iii) Electronic credit through Electronic Clearing System (ECS) facility of RBI to receive dividend proceeds, if any, for bank accounts other those mentioned in section no. 6 (i). I / We want to receive the redemption / dividend proceeds (if any) by way of a cheque / demand draft instead of direct credit / credit through NEFT system/ credit through ECS into my / our bank account <input type="checkbox"/>											

7. eSERVICES OPTIONS (SAVE PAPER, SAVE TREES) [Please tick (✓)] (Refer Instruction 10)											
<input type="checkbox"/> HDFCFM Online & HDFCFM Mobile - I / We would like register for my/our HDFCFM Personal Identification Number (HPIN) to transact online. Mandatory information to be provided: a) Email address: _____ (if the address given herein is different from the email address under section 4a, the email address under section 6(i) will be considered during registration for HPIN). b) Mother's maiden name: _____ I / We have read and understood the terms and conditions and confirm I / we shall bound by them (Terms & Conditions available in the eServices booklet as well as on our website) ii) <input type="checkbox"/> eDocs : I / We wish to receive account statements, newsletters, annual reports and other statutory information documents by email in lieu of physical documents (Email address is mandatory). iii) <input type="checkbox"/> eAlerts : I / We would like to receive SMS updates (Mobile number in section 4a is mandatory).											

8. INVESTMENT DETAILS (refer Instructions 6 & 7) (Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.)											
The Cheque/DD should be drawn favouring "HDFC CGF A/c Investment Plan" or "HDFC CGF A/c Savings Plan" as applicable											
Cheque/DD No. _____				Cheque / DD Date _____		Drawn on Bank _____					
Amount of Cheque / DD / RTGS in figures (Rs.) _____				Branch Name _____							
Amount in words (Rs.) _____											
Investment Plans (Please ✓)				<input type="checkbox"/> Investment Plan (Equity Oriented)				<input type="checkbox"/> Savings Plan (Debt Oriented)			
Units subject to Lock-in Period [Please ✓]				<input type="radio"/> Yes				<input type="radio"/> No			

9. DECLARATIONS & SIGNATURE(S) (Refer Instruction 11)											
I/We have read and understood the contents of the Scheme Information Document of HDFC Children's Gift Fund and Statement of Additional Information. I/We hereby apply to the Trustee of HDFC Mutual Fund for gifting Units of HDFC Children's Gift Fund above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I/We have understood the details of the Scheme and I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We hereby declare that I/We am/are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We declare that the information given in this application form is correct, complete and truly stated. *I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External / Ordinary Account / FCNR Account. *Applicable to NRIs only											
SIGNATURE(S) _____ _____ _____				Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.							
				First / Sole Applicant							
				Second Applicant							
Third Applicant											
Date : D D M M Y Y Y Y											

Continuing a tradition of trust.

Offer of Units At Applicable NAV

CDQ

Investors must read the Key Information Memorandum and the instructions before completing this Form. The Application Form should be completed in **English** and in **BLOCK LETTERS** only.

KEY PARTNER / AGENT INFORMATION

Name and AMFI Reg. No. (ARN)	Sub Agent's Name and Code / Bank Branch Code	MO Code
ARN-		

FOR OFFICE USE ONLY

Date of Receipt	Folio No.	Branch Trans. No.	ISC Name & Stamp

Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

1. EXISTING UNIT HOLDER INFORMATION (If you have existing folio, please fill in your folio number, complete details in section 2 and proceed to section 6. Refer instruction 2).

Folio No. / *The details in our records under the folio number mentioned alongside will apply for this application.*

2. PAN AND KYC COMPLIANCE STATUS DETAILS (MANDATORY)

	PAN # (refer instruction 12)	KYC Compliance Status (Mandatory for Rs.50,000 & above)** (if yes, attach proof)	
First / Sole Applicant / Guardian		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Second Applicant		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Third Applicant		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please attach PAN proof. If PAN is already validated, please don't attach any proof. ** Refer instruction 14

3. STATUS (of First/Sole Applicant)

[Please tick (✓)]

<input type="checkbox"/> Resident Individual	<input type="checkbox"/> NRI-Repatriation	<input type="checkbox"/> NRI-Non Repatriation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> HUF	<input type="checkbox"/> AOP	<input type="checkbox"/> PIO	<input type="checkbox"/> Company	<input type="checkbox"/> FIs
<input type="checkbox"/> Minor through guardian	<input type="checkbox"/> BOI	<input type="checkbox"/> Body Corporate		
<input type="checkbox"/> Society / Club	<input type="checkbox"/> Others _____	(please specify)		

MODE OF HOLDING

[Please tick (✓)]

<input type="checkbox"/> Single
<input type="checkbox"/> Joint
<input type="checkbox"/> Anyone or Survivor

OCCUPATION (of First/Sole Applicant)

[Please tick (✓)]

<input type="checkbox"/> Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional
<input type="checkbox"/> Housewife	<input type="checkbox"/> Business	<input type="checkbox"/> Retired
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	
<input type="checkbox"/> Others _____	(please specify)	

4a. UNIT HOLDER INFORMATION (refer instruction 3)

DATE OF BIRTH

(Mandatory in case of Minor) DD MM YYYY

NAME OF FIRST / SOLE APPLICANT

Mr. Ms. M/s.

Nationality

NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON – DESIGNATION (in case of non-individual Investors)

Mr. Ms.

Nationality Designation Contact No.

NAME OF THE SECOND APPLICANT Resident Individual NRI [Mandatory Please tick (✓)]

Mr. Ms.

Nationality

NAME OF THE THIRD APPLICANT Resident Individual NRI [Mandatory Please tick (✓)]

Mr. Ms.

Nationality

MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O. Box Address may not be sufficient)

CITY STATE PIN CODE

OVERSEAS ADDRESS (Mandatory in case of NRIs/FIs) (P.O. Box Address may not be sufficient)

CONTACT DETAILS OF FIRST / SOLE APPLICANT

Telephone : Off. Res. Mobile

Fax E-Mail

4b. POWER OF ATTORNEY (PoA) HOLDER DETAILS

NAME OF PoA

Mr. Ms. M/s.

PAN* [Please tick (✓)] KYC Compliance Status Proof** * Refer Instruction 12 ** Refer Instruction 14

5. BANK ACCOUNT DETAILS OF FIRST / SOLE APPLICANT (refer instruction 4a) Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details

Account No. Name of the Bank

Branch Bank City

IFSCCode*** Account Type [Please tick (✓)] SAVINGS CURRENT NRE NRO FCNR OTHERS _____ (please specify)

*** Refer Instruction 4b (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)

The 9 digit MICR Code number of my/our Bank & Branch is**:

(The 9 digit code appears on your cheque next to the cheque number)

6. e SERVICES OPTIONS (SAVE PAPER, SAVE TREES) [Please tick (✓)] (refer instruction 9)

HDFCFMF Online & HDFCFMF Mobile - I/We would like register for my/our HDFCFMF Personal Identification Number (HPIN) to transact online.

i) **Mandatory information to be provided:**

a) Email address: _____
(if the address given herein is different from the email address under section 4a, the email address under section 6(i) will be considered during registration for HPIN).

b) **Mother's maiden name:** _____
I/We have read and understood the terms and conditions and confirm I/we shall bound by them (Terms & Conditions available in the eServices booklet as well as on our website)

ii) **Docs** : I / We wish to receive account statements, newsletters, annual reports and other statutory information documents by email in lieu of physical documents (Email address is mandatory).

iii) **Alerts** : I / We would like to receive SMS updates (Mobile number in section 4a is mandatory).

... continued overleaf

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 60006767 or 18002336767 (Toll Free)]

HDFC MUTUAL FUND

Head office : Ramon House, 3rd Floor, H.T. Parekh Marg, 169, Backbay Reclamation, Churchgate, Mumbai 400020

Date :

Received from Mr. / Ms. / M/s. _____

an application for Purchase of Units of HDFC Income Fund HDFC Short Term Plan HDFC Liquid Fund HDFC High Interest Fund

HDFC Floating Rate Income Fund HDFC Cash Management Fund HDFC Gilt Fund

alongwith Cheque / DD as detailed overleaf. **Please Note** : All Purchases are subject to realisation of cheques / demand drafts.

CDQ

ISC Stamp & Signature

7. INVESTMENT DETAILS – Please (✓) Choice of Scheme / Plan / Option (refer instruction 5)

<input type="radio"/> HDFC Income Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option Payout Reinvestment Payout Reinvestment	<input type="radio"/> HDFC Short Term Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option Payout Reinvestment Payout Reinvestment	<input type="radio"/> HDFC Liquid Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="checkbox"/> Daily Dividend Reinvestment Only <input type="checkbox"/> Weekly Dividend Payout <input type="checkbox"/> Monthly Dividend Payout <input type="checkbox"/> Monthly Dividend Reinvestment	<input type="radio"/> HDFC Liquid Fund - Premium Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option Daily Dividend Reinvestment Only <input type="checkbox"/> Weekly Dividend Payout <input type="checkbox"/> Weekly Dividend Reinvestment
<input type="radio"/> HDFC High Interest Fund-STP <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option (Fortnightly) Payout Reinvestment		<input type="radio"/> HDFC Liquid Fund - Premium Plus Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Weekly Dividend Payout <input type="checkbox"/> Weekly Dividend Reinvestment	
<input type="radio"/> HDFC High Interest Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option Quarterly Dividend Payout <input type="checkbox"/> Half-Yearly Dividend Payout <input type="checkbox"/> Yearly Dividend Payout <input type="checkbox"/> Yearly Dividend Reinvestment			<input type="radio"/> HDFC Floating Rate Income Fund <input type="checkbox"/> Short Term Plan <input type="checkbox"/> Wholesale Option <input type="checkbox"/> Retail Option <input type="checkbox"/> Long Term Plan <input type="checkbox"/> Dividend Option <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="checkbox"/> Growth Option Daily (Reinvestment Only) <input type="checkbox"/> Daily (Reinvestment Only) <input type="checkbox"/> Weekly Payout <input type="checkbox"/> Monthly Payout <input type="checkbox"/> Monthly Reinvestment <input type="checkbox"/> Dividend Option Reinvestment Only
<input type="radio"/> HDFC Cash Management Fund - Savings Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option Daily (Reinvestment Only) <input type="checkbox"/> Weekly Payout <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	<input type="radio"/> HDFC Cash Management Fund - Call Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Daily Dividend Reinvestment Only	<input type="radio"/> HDFC Cash Management Fund - Treasury Advantage Plan <input type="checkbox"/> Wholesale Option <input type="checkbox"/> Retail Option <input type="checkbox"/> Growth <input type="checkbox"/> Dividend Daily (Reinvestment Only) <input type="checkbox"/> Weekly Payout <input type="checkbox"/> Monthly Payout <input type="checkbox"/> Monthly Reinvestment	<input type="radio"/> HDFC Gilt Fund <input type="checkbox"/> Short Term Plan <input type="checkbox"/> Long Term Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="checkbox"/> Dividend Option <input type="checkbox"/> Payout <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment <input type="checkbox"/> Reinvestment

8. PAYMENT DETAILS (refer instruction 6) (Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.)

Cheque / DD No.	Cheque / DD Date
Amount of Cheque/DD/RTGS in figures (Rs.) (i)	Drawn on Bank /
DD charges, if any, in figures (Rs.) (ii)	Branch Name)
Total Amount (i) + (ii)	Account No. (For Cheque Only)
in figures (Rs.)	
in words	
Account Type [Please (✓)]	<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> OTHERS _____ (please specify)

9. NOMINATION (refer instruction 11)

I/ We _____, _____ and _____
 _____ (Unit holder 1) _____ (Unit holder 2) _____ (Unit holder 3)

do hereby nominate the person(s) more particularly described hereunder/ and/ cancel the nomination made by me/ us on the _____ day of _____ in respect of the Units under Folio No. _____ (* strike out which is not applicable)

Name and Address of Nominee(s)	Date of Birth	Name and Address of Guardian	Signature of Guardian	Proportion (%) by which the units will be shared by each Nominee (should aggregate to 100%)
(to be furnished in case the Nominee is a minor)				
Nominee 1				
Nominee 2				
Nominee 3				

10. DOCUMENTS ENCLOSED (Please ✓)

<input type="checkbox"/> Memorandum & Articles of Association	<input type="checkbox"/> Trust Deed	<input type="checkbox"/> Bye-Laws	<input type="checkbox"/> Partnership Deed
<input type="checkbox"/> Resolution / Authorisation to invest	<input type="checkbox"/> List of Authorised Signatories with Specimen Signature(s)	<input type="checkbox"/> PAN Proof	<input type="checkbox"/> KYC Compliance Status Proof
<input type="checkbox"/> Power of Attorney			

APPLICATIONS ENCLOSED (Please ✓)

<input type="checkbox"/> Systematic Investment Plan	<input type="checkbox"/> SIP Enrolment Form
<input type="checkbox"/> Cheques	
<input type="checkbox"/> SIP Auto Debit Facility	

11. MODE OF PAYMENT OF REDEMPTION / DIVIDEND PROCEEDS VIA DIRECT CREDIT / NEFT / ECS (refer instruction 8)

Unit holders will receive their redemption / dividend proceeds (if any) directly into their bank account (as furnished by them in Section 5) as per the following arrangements:

(i) **Direct Credit** for bank accounts with ABN AMRO Bank NV, Axis Bank Limited, Citibank N.A, Deutsche Bank AG, HDFC Bank Limited, The Hongkong and Shanghai Banking Corporation, ICICI Bank Limited, IDBI Bank Limited, Kotak Mahindra Bank Ltd., Standard Chartered Bank and YES Bank Limited.

(ii) **Electronic credit through National Electronic Funds Transfer (NEFT)** System of RBI for bank accounts other those mentioned in section no 11 (i).

(iii) **Electronic credit through Electronic Clearing System (ECS)** facility of RBI to receive dividend proceeds, if any, for bank accounts other those mentioned in section no. 11 (i).

I / We want to receive the redemption / dividend proceeds (if any) by way of a cheque / demand draft instead of direct credit / credit through NEFT system/ credit through ECS into my / our bank account

12. DECLARATIONS & SIGNATURE/S (refer instruction 10)

I / We have read and understood the terms and contents of the Scheme Information Document(s) of the respective Scheme(s) and Statement of Additional Information of HDFC Mutual Fund. I / We hereby apply to the Trustee of HDF Mutual Fund for allotment of Units of the Scheme(s) of HDFC Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I / We have understood the details of the Scheme(s) and I / we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. **The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.** I/We hereby declare that I/We am/are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We declare that the information given in this application form is correct, complete and truly stated.

Applicable to NRIs only :

I / We confirm that I am / We are Non-Resident of Indian Nationality / Origin and I / We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my / our Non-Resident External / Ordinary Account / FCNR Account.

Please (✓) Yes No
 If yes, (✓) Repatriation basis Non-repatriation basis

DD	MM	YYYY

SIGNATURE/S		Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.
First / Sole Applicant / Guardian		
Second Applicant		
Third Applicant		

Particulars	SCHEME NAME / PLAN / OPTION	SCHEME NAME / PLAN / OPTION
Scheme Name / Plan / Option		
Cheque / DD No. / Date		
Drawn on (Name of Bank and Branch)		
Amount in figures (Rs.)		



Application Form for Equity, Balanced, MIP and ELSS Schemes

HDFC GROWTH FUND • HDFC EQUITY FUND • HDFC TOP 200 FUND • HDFC CAPITAL BUILDER FUND • HDFC BALANCED FUND • HDFC PRUDENCE FUND • HDFC LONG TERM ADVANTAGE FUND* • HDFC TAXSAVER* • HDFC INDEX FUND • HDFC CORE & SATELLITE FUND • HDFC ARBITRAGE FUND • HDFC PREMIER MULTI-CAP FUND • HDFC MF MONTHLY INCOME PLAN (an open-ended income scheme. Monthly income is not assured and is subject to availability of distributable surplus) * (an open-ended equity linked savings scheme with a lock-in period of 3 years)

Continuing a tradition of trust.

Offer of Units At Applicable NAV

CEQ

Investors must read the Key Information Memorandum and the instructions before completing this Form. The Application Form should be completed in **English** and in **BLOCK LETTERS** only.

KEY PARTNER / AGENT INFORMATION

Name and AMFI Reg. No. (ARN)	Sub Agent's Name and Code / Bank Branch Code	MO Code
ARN-		

FOR OFFICE USE ONLY

Date of Receipt	Folio No.	Branch Trans. No.	ISC Name & Stamp

Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

1. EXISTING UNIT HOLDER INFORMATION (If you have existing folio, please fill in your folio number, complete details in section 2 and proceed to section 6. Refer instruction 2).

Folio No. / *The details in our records under the folio number mentioned alongside will apply for this application.*

2. PAN AND KYC COMPLIANCE STATUS DETAILS (MANDATORY)

First / Sole Applicant / Guardian	PAN # (refer instruction 12)	KYC Compliance Status (Mandatory for Rs.50,000 & above)** (if yes, attach proof)
Second Applicant		<input type="checkbox"/> Yes <input type="checkbox"/> No
Third Applicant		<input type="checkbox"/> Yes <input type="checkbox"/> No

Please attach PAN proof. If PAN is already validated, please don't attach any proof. ** Refer instruction 14

3. STATUS (of First/Sole Applicant) [Please tick (✓)]

<input type="checkbox"/> Resident Individual	<input type="checkbox"/> NRI-Repatriation	<input type="checkbox"/> NRI-Non Repatriation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> HUF	<input type="checkbox"/> AOP	<input type="checkbox"/> PIO	<input type="checkbox"/> Company	<input type="checkbox"/> FIs
<input type="checkbox"/> Minor through guardian	<input type="checkbox"/> BOI	<input type="checkbox"/> Body Corporate		
<input type="checkbox"/> Society / Club	<input type="checkbox"/> Others _____	(please specify)		

MODE OF HOLDING [Please tick (✓)]

<input type="checkbox"/> Single
<input type="checkbox"/> Joint
<input type="checkbox"/> Anyone or Survivor

OCCUPATION (of First/Sole Applicant) [Please tick (✓)]

<input type="checkbox"/> Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional
<input type="checkbox"/> Housewife	<input type="checkbox"/> Business	<input type="checkbox"/> Retired
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	
<input type="checkbox"/> Others _____	(please specify)	

4a. UNIT HOLDER INFORMATION (refer instruction 3)

NAME OF FIRST / SOLE APPLICANT	DATE OF BIRTH (Mandatory in case of Minor)
Mr. Ms. M/s.	DD MM YYYY
Nationality	
NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON – DESIGNATION (in case of non-individual Investors)	
Mr. Ms.	Designation Contact No.
NAME OF THE SECOND APPLICANT <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI [Mandatory Please tick (✓)]	
Mr. Ms.	
Nationality	
NAME OF THE THIRD APPLICANT <input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI [Mandatory Please tick (✓)]	
Mr. Ms.	
Nationality	
MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O. Box Address may not be sufficient)	
CITY STATE PIN CODE	
OVERSEAS ADDRESS (Mandatory in case of NRIs/FIs) (P.O. Box Address may not be sufficient)	
CONTACT DETAILS OF FIRST / SOLE APPLICANT	
Telephone : Off. Res. Mobile	STD Code
Fax E-Mail	

4b. POWER OF ATTORNEY (PoA) HOLDER DETAILS

NAME OF PoA Mr. Ms. M/s.
PAN* [Please tick (✓)] KYC Compliance Status Proof** * Refer Instruction 12 ** Refer Instruction 14

5. BANK ACCOUNT DETAILS OF FIRST / SOLE APPLICANT (refer instruction 4a) Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details

Account No. Name of the Bank
 Branch Bank City
 IFSCCode*** Account Type [Please tick (✓)] SAVINGS CURRENT NRE NRO FCNR OTHERS (please specify)
 *** Refer Instruction 4b (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank) The 9 digit MICR Code number of my/our Bank & Branch is** (The 9 digit code appears on your cheque next to the cheque number) ** Refer Instruction 8 (Mandatory for Dividend Payout via ECS)

6. e-SERVICES OPTIONS (SAVE PAPER, SAVE TREES) [Please tick (✓)] (refer instruction 9)

HDFCFund & HDFCFMF Mobile - I/ We would like register for my/our HDFCFMF Personal Identification Number (HPIN) to transact online.
 i) **Mandatory information to be provided:**
 a) Email address: _____
 (if the address given herein is different from the email address under section 4a, the email address under section 6(i) will be considered during registration for HPIN).
 b) **Mother's maiden name:** _____
 I/ We have read and understood the terms and conditions and confirm I/ we shall bound by them (Terms & Conditions available in the eServices booklet as well as on our website)
 ii) **eDocs**: I/ We wish to receive account statements, newsletters, annual reports and other statutory information documents by email in lieu of physical documents (Email address is mandatory).
 iii) **eAlerts**: I/ We would like to receive SMS updates (Mobile number in section 4a is mandatory).

... continued overleaf

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 60006767 or 18002336767 (Toll Free)]

HDFC MUTUAL FUND
 Head office : Ramon House, 3rd Floor, H.T. Parekh Marg, 169, Backbay Reclamation, Churchgate, Mumbai 400020
 Date : _____
 Received from Mr. / Ms. / M/s. _____
 an application for Purchase of Units of HDFC Growth Fund HDFC Equity Fund HDFC Top 200 Fund HDFC Capital Builder Fund
 HDFC Balanced Fund HDFC Prudence Fund HDFC Long Term Advantage Fund HDFC TaxSaver HDFC Index Fund
 HDFC Core & Satellite Fund HDFC Arbitrage Fund HDFC Premier Multi-Cap Fund HDFC MF Monthly Income Plan
 alongwith Cheque / DD as detailed overleaf. **Please Note** : All Purchases are subject to realisation of cheques / demand drafts.

CEQ
ISC Stamp & Signature

