| | | 35 | = | | | |
|---|-------------|---------------------------|--------------------|--------------------|---------------------------|--|
| STAR ME | | | | | | |
| Broker/Agent Code ARN: | | JMAINT INVI | SUB-BROKI | ER: | EUIN: | |
| Unit Holder Information | | | | | | |
| Name of the First Applicant : | | | | | | |
| PAN Number : KYC: | | | | Date of Birth : | | |
| Father Name : | | | | Mother Name : | | |
| Name of Guardian : | | | PAN: | | | |
| Contact Address : | | | | | | |
| City: | Pincode : | | | State : | Country: | |
| Tel.(Off) : | Tel.(Res): | | | Email : | | |
| Fax (Off): | Fax (Res) : | | | Mobile : | | |
| Income Tax Slab/Networth : | | | Occupation Details | | | |
| Place of Birth : Country of Tax Residence : | | | | | | |
| Tax Id No.: | | | | | | |
| Politically exposed person / Related to Politically exposed person | | | n etc.? Yes No | | | |
| Mode of Holding : | | | | Occupation : | | |
| Name of Second Applicant : | | | | | | |
| PAN Number : KYC: | | | Date of Birth : | | | |
| Income Tax Slab/Networth : | | | Occupation Details | | | |
| Place of Birth : Country of Tax Resid | | | x Residence | ce: | | |
| Tax Id No. : | | | | | | |
| Politically exposed person / Related to Politically exposed person etc.? Yes No | | | | | | |
| Name of Third Applicant : | | | | | | |
| PAN Number : | | KYC: | | Date of Birt | th: | |
| Income Tax Slab/Networth : | | | | Occupation Details | | |
| Place of Birth : Country of Tax Residence : | | | | : | | |
| Tax Id No. : | | | | | | |
| Politically exposed person / Related to Politically exposed person etc.? Yes No | | | | | | |
| Other Details of Sole/ 1st Applicant | | | | | | |
| Overseas Address : | | | | | | |
| (In case of NRI investor) | | | | | | |
| City: | Pincode : | | | Country: | | |
| Bank Mandate Details | | | | | | |
| Name of Bank : | | | | Branch : | | |
| A/C No. : A/c Type : | | | | IFSC Code: | | |
| Bank Address : | | | | | | |
| City: | Pincode : | | | State : | Country: | |
| Nomination Details | | | | | | |
| Nominee Name : | | | | Relationship: | | |
| Guardian Name (If Nominee is Minor) : | | | | | | |
| Nominee Address : | | | | | | |
| City: Pincode: | | | | State : | | |
| Declaration and Signature | | | | | | |
| I/We confirm that details provided by me/us are true and correct. The ARN holder has disclosed to me/us all the | | | | | | |
| commission (In the form of trail commission or any other mode), payable to him for the different competing | | | | | | |
| Schemes of various Mutual Fund From amongst which the scheme is being recommended to me/us. | | | | | | |
| Date : | | | Place : | | | |
| | | | | | | |
| 1st applicant Signature : | | 2nd applicant Signature : | | | 3rd applicant Signature : | |