



TATA MUTUAL FUND

Mulla House, Ground Floor, M. G. Road, Fort, Mumbai - 400 001

This product is suitable for investors who are seeking*:

- To Generate Long Term Capital Appreciation.
 - An open ended equity scheme investing across large cap, mid cap and small cap stocks.
- *Investors should consult their financial advisors if in doubt about whether the product is suitable for them

Scheme Risk O Meter



Benchmark Risk O Meter (Nifty 500 Multicap 502525 TRI)



Application Form For Tata Multicap Fund

(SCHEME CODE TATA/O/E/MCF/22/10/0053)

ALL THE DETAILS REQUESTED IN THE FORM ARE MANDATORY FOR EACH OF THE APPLICANTS Sr. No.:

1. Advisor / Distributor Information

Refer Sec. B

ARN / RIA ^ Code	Sub-Broker ARN Code	Sub-Broker / Bank Branch Code	EUIN Code
Internal Code	OR <input type="checkbox"/> Declaration for "execution-only" transaction - I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.		
In case the subscription amount is ₹ 10,000 or more and your Distributor has opted to receive transaction charges, ₹ 150/- (for First time mutual fund investor) or ₹ 100/- (for investor other than First time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested. Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. ^ By mentioning RIA code, I / we authorize you to share with the SEBI Registered Investment Adviser (RIA) the details of my / our transactions in the schemes(s) of Tata Mutual Fund			
Sign here	Sole / 1st Unitholder Signature / Thumb Impression	2nd Unitholder Signature / Thumb Impression	3rd Unitholder Signature / Thumb Impression

2. Applicant's Information

Refer Sec. A, C & J

The Name of the Applicants should be as mentioned in the PAN and the KYC acknowledgement. There can be upto 3 holders. No joint holders allowed with 1st applicant as a minor. Any applicants should not be a resident of Canada or a person who falls within the definition of the term "U.S. Person" under the US Securities Act of 1933 and corporations or other entities organised under the laws of the U.S. For Investors New to Tata Mutual Fund, mention the C-KYC No. In case C-KYC No. is not available kindly complete the Know Your Client (KYC) form attached herewith.

1st Applicant's Details

Folio No.

The first applicant will be the primary holder and all correspondence will be sent to him/her. Only the first holder can be a minor. Existing investors may mention the Folio no. and proceed to Sec. 4. Investors to ensure that PAN is linked to Aadhaar.

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> M/s.	PAN / PEKRN	C-KYC
Name		
Date of Birth (DOB) / Date of Incorporation	In case of Minor: Proof of DOB: <input type="checkbox"/> Birth certificate <input type="checkbox"/> School leaving certificate	
<input type="text" value="D D / M M / Y Y Y Y"/>	<input type="checkbox"/> Passport <input type="checkbox"/> Others	
Mobile No.	Mobile belongs to <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Guardian	
<input type="checkbox"/> I hereby authorize TAMPL/ TMF to send important information and transaction updates to me on WhatsApp mobile number.		

Contact Person - Designation (Non Individual Investors) / Power of Attorney (POA) / Proprietor / Guardian details (minor applicant)

POA / Proprietor / Guardian Details	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	PAN / PEKRN
Name		
For Non Individual	Legal Entity Identifier (LEI) Number	
<input type="text"/>		
To be filled by Guardian	Relationship with the Minor Applicant <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
Mobile No.		Date of Birth
<input type="text"/>		<input type="text" value="D D / M M / Y Y Y Y"/>
		C-KYC
		<input type="text"/>

Tax Status

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Resident Individual | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Body Corporate | <input type="checkbox"/> Overseas Citizen of India |
| <input type="checkbox"/> NRI-Repatriation | <input type="checkbox"/> Hindu Undivided Family | <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Foreign National Resident in India |
| <input type="checkbox"/> NRI-Non-Repatriation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Body of Individuals | <input type="checkbox"/> Person of Indian Origin |
| <input type="checkbox"/> Minor - Resident Individual | <input type="checkbox"/> Company | <input type="checkbox"/> Society / Club | <input type="checkbox"/> Others (Please specify) |
| <input type="checkbox"/> Minor - NRI | <input type="checkbox"/> Trust | <input type="checkbox"/> Non Profit Organization | |

3. Contact Details

Refer Sec. D

Mailing address is required for initial communication. We will overwrite this address with the 1st Applicants address as per the KRA records

PIN		State	City
<input type="text"/>		<input type="text"/>	<input type="text"/>
Residence Phone (prefix STD Code)		Office Phone (prefix STD Code)	
<input type="text"/>		<input type="text"/>	
Email		Extn	
<input type="text"/>		Email belongs to <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Guardian	
For investors who do not have email address on record: I/We wish to receive physical copy of the scheme-wise annual report or abridged summary thereof <input type="checkbox"/> Yes <input type="checkbox"/> No			



Acknowledgement Slip

Sr. No.:

Received from Mr./Ms./M/s. PAN ₹

for purchase in Tata Multicap Fund :

- Plan: Regular Direct IDCW Reinvestment IDCW Payout
- Option: Growth IDCW Reinvestment IDCW Payout
- Subject to verification and realisation.



Overseas address

Mandatory for Non-Resident Individuals and Overseas Investors in addition to the mailing address.

		City
State	ZIP Code	Country

4. Investment Instrument Details

Refer Sec. E

The name of the first applicant should be available on the investment Cheque.

Cheque/ DD to be drawn in favour of 'Tata Multicap Fund'

Gross Amount (₹) (A)	DD Charges (₹) (if any) (B)	Net Amount (₹) (Cheque / DD Amount) (A - B)
Account Number	A/c Type	Dated
		D D / M M / Y Y Y Y
Drawn on Bank		Cheque / DD No.
Branch		Branch City

5. Investment Scheme Details

Refer Sec. F & Product Labels

Amount Allocation

Lumpsum Lumpsum + SIP

Scheme Name »
Plan (select any one) »
Option »
IDCW Payout Option (select any one) »

Tata Multicap Fund
<input type="checkbox"/> Regular <input type="checkbox"/> Direct
<input type="checkbox"/> Growth <input type="checkbox"/> IDCW
<input type="checkbox"/> IDCW Reinvestment <input type="checkbox"/> IDCW Payout

IDCW - Income Distribution cum Capital Withdrawal.

6. Bank Account Details

Refer Sec. G

This must be an Indian account. The 1st applicant should be a holder in this account.

The bank account details provided below will be held on record and considered as default bank mandate to pay redemption proceeds and IDCW payouts (if applicable).

Bank Name	Branch		
Account number	A/C type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO	
		<input type="checkbox"/> NRNR <input type="checkbox"/> NRE	
MICR	IFSC for RTGS	IFSC for NEFT	
Address			
City	PIN	State	

Cheque Details

Cheque/DD No. _____ dated _____ A/c. No. _____ Bank _____

Call (022) 6282 7777 (Monday to Saturday 9:00 am to 5:30 pm)

Acknowledgement Slip

Subject to realisation.

10. Nomination Details (Mandatory)

Refer Sec. L

You can nominate up to 3 persons to receive the Units allotted to you in your folio in the unfortunate event of death of all unit holders. All payments and settlements made to such Nominee(s) and Signature of the Nominee(s) acknowledging receipt thereof, shall be a valid discharge by the AMC/ Mutual Fund/ Trustees.

Select any one >>

<input type="checkbox"/> Register nomination as below <input type="checkbox"/> I do not wish to nominate.				
1 st Nominee	Name	PAN / PEKRN	Date of Birth D D / M M / Y Y Y Y	
	Relationship with Sole/1 st Holder	Allocation (%)	Signature of Nominee / Guardian	
	Address of Nomnee / Guardian (in case of Minor Nominee)			
	State	PIN	Country	
2 nd Nominee	Guardian Name in case of Minor Nominee	Guardian PAN	Relationship of Guardian with Nominee	
	Name	PAN / PEKRN	Date of Birth D D / M M / Y Y Y Y	
	Relationship with Sole/1 st Holder	Allocation (%)	Signature of Nominee / Guardian	
	Address of Nomnee / Guardian (in case of Minor Nominee)			
3 rd Nominee	State	PIN	Country	
	Guardian Name in case of Minor Nominee	Guardian PAN	Relationship of Guardian with Nominee	
	Name	PAN / PEKRN	Date of Birth D D / M M / Y Y Y Y	
	Relationship with Sole/1 st Holder	Allocation (%)	Signature of Nominee / Guardian	
Address of Nomnee / Guardian (in case of Minor Nominee)				
State			PIN	Country
Guardian Name in case of Minor Nominee			Guardian PAN	Relationship of Guardian with Nominee
1 st Applicant Signature / Thumb Impression			2 nd Applicant Signature / Thumb Impression	
			3 rd Applicant Signature / Thumb Impression	

Sign here

11. Demat Account Details

Refer Sec. M

The sequence of names as mentioned in the application form matches with that of the account held with DP. In case of discrepancy, Units will be allotted in physical mode.

NSDL Depository Participant Name	DP ID No. I N	Beneficiary Account No.
CDSL Depository Participant Name	Target ID No.	
Enclosures <input type="checkbox"/> Client Masters List (CML) <input type="checkbox"/> Transaction cum Holding Statement <input type="checkbox"/> Delivery Instruction Slip (DIS)		

12. Declaration and Signatures

Refer Sec. N

I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc., of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws. I / We hereby confirm and declare as under:-

- I / We have read, understood and hereby agree to comply with the terms and conditions of the scheme, related documents and apply for allotment of Units of the Scheme(s) of Tata Mutual Fund ('Fund') indicated in this application form.
- I/We am/are eligible Investor(s) as per the scheme related documents and am/are authorised to make this investment. The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India.
- The information given in / with this application form is true and correct and further agree to furnish such other further/additional information as may be required by the Tata Asset Management Private Limited (TAMPL)/ Fund and undertake to inform the AMC / Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished from time to time.
- That in the event, the above information and/or any part of it is/are found to be false/ untrue/misleading, I/We will be liable for the consequences arising therefrom.
- I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Mutual Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi- judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us. I/We hereby authorize you to share the account statement of the folio with the distributor /broker / advisor on record.
- I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity and authorization of my/our transactions.
- 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 confirm that I/We have not been offered/ communicated any indicative portfolio and/ or any indicative yield by the Fund/AMC/its distributor for this investment.
- I / We agree that the unit balance(s) reflecting in the account statement is subject to realisation of Cheque accompanying the purchase request, PAN validation and KYC compliance.
- For Foreign Nationals Resident in India only: I/We will redeem my/our entire investment/s before I/We change my/our Indian residency status. I/We shall be fully liable for all consequences (including taxation) arising out of the failure to redeem on account of change in residential status.
- For NRIs/ PIO/OCIs only: I/We confirm that my application is in compliance with applicable Indian and Foreign laws.
- I/We hereby accord my/our consent to TATA AMC for receiving the promotional information/ material via email, SMS, telemarketing calls, etc. on the mobile number and email provided by me/us in this Application Form.

Date: _____

Sign here	Sole / 1st Unitholder Signature / Thumb Impression	2nd Unitholder Signature / Thumb Impression	3rd Unitholder Signature / Thumb Impression
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