



Common Application Form for Lump sum/Systematic Investments Plan

Application No. _____

Investor must read Key Scheme Features and Instructions before completing this form.

All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS.

BROKER CODE (ARN CODE)/ RIA/PMRN CODE#	SUB-BROKER ARN CODE	SUB-BROKER CODE (As allotted by ARN holder)	Employee Unique Identification No. (EUIN)
#By mentioning RIA/PMRN code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund.			
Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. XIII). - 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.			
SIGNATURE OF SOLE / FIRST APPLICANT		SIGNATURE OF SECOND APPLICANT	

TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY [Refer Instruction XII]

* In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid 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.

Existing Folio No. _____

1. APPLICANT(S) DETAILS (Please refer to Instruction No. II (b) & IV) (Name should be as per the PAN)

SOLE / 1ST APPLICANT Mr. Ms. M/s _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* _____ KYC Id No.¥ _____ Enclosed (Please ✓)* KYC Acknowledgement Letter Date of Birth** _____
 D D M M Y Y Y Y

LEI Number _____ (Legal Entity Identifier Number is Mandatory for Transaction value of INR 50 crore and above. See Instruction No. XVI, page no. 48)

NAME OF GUARDIAN (in case First/Sole applicant is minor)/CONTACT PERSON-DESIGNATION/PoA HOLDER (in case of Non-Individual Investors)
 Mr. Ms. _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* KYC Proof Attached (Mandatory) | Relationship with Minor applicant: Natural guardian Court appointed guardian Date of Birth _____
 KYC Id No.¥ _____ D D M M Y Y Y Y

2ND APPLICANT Mr. Ms. M/s _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* _____ KYC Id No.¥ _____ KYC Proof Attached (Mandatory) Date of Birth _____
 D D M M Y Y Y Y

3RD APPLICANT Mr. Ms. M/s _____ FIRST _____ MIDDLE _____ LAST _____

PAN/PEKRN* _____ KYC Id No.¥ _____ KYC Proof Attached (Mandatory) Date of Birth _____
 D D M M Y Y Y Y

If mandatory information left blank, the application is liable to be rejected. ¥ Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14 digit KYC Identification Number (KIN).

2. BANK ACCOUNT (PAY-OUT) DETAILS OF SOLE/FIRST APPLICANT (Please Refer to Instruction No. III)

Mandatory information - If left blank the application is liable to be rejected. (Mandatory to attach proof, in case the pay-out bank account is different from the source bank account.)

For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

MANDATORY Account Number _____ Account Type Savings Current NRE NRO FCNR
 Name & Branch of Bank _____ Branch City _____
 9 Digit MICR Code _____ 11 Digit IFSC _____ Enclosed (Please ✓): Bank Account Details Proof Provided.

3. INVESTMENT DETAILS (Refer Instruction No. IV) (For Plans & Sub-options please see key scheme features). Please mention scheme name below:

ICICI Prudential Plan: _____ Option: _____

For investors investing in Income Distribution cum Capital Withdrawal (IDCW) option of the Scheme may note that the amounts can be distributed out of investors capital (Equalization Reserve), which is part of sale price that represents realized gains.

4. PAYMENT DETAILS

Investment Amount ₹ _____ A Mode of Payment Cheque DD Funds Transfer NEFT RTGS
 DD Charges (if applicable) ₹ _____ B Total Amount ₹ _____ A + B

Cheque / DD Number _____ Date D D M M Y Y Y Y

BANK DETAILS: Same as above [Please tick (✓) if yes] Different from above [Please tick (✓) if it is different from above and fill in the details below]

A/c Number _____ Account Type Savings Current NRE NRO FCNR

Name & Branch of Bank _____

Branch City _____ Mandatory Enclosures (Please tick (✓) if the first instalment is not through cheque) Cheque Copy Bank Statement Banker's Attestation _____

Applications with Third Party Cheques, prefunded instruments etc. and in circumstances as detailed in AMFI Circular No.135/BP/16/10-11 shall be processed in accordance with the said circular. Please read the instruction no. VI(e). Third Party Payment Declaration form is available in www.icicipruamc.com or ICICI Prudential Mutual Fund branch offices.

5. CORRESPONDENCE DETAILS OF SOLE/FIRST APPLICANT:

Correspondence Address (Please provide full address)*

HOUSE / FLAT NO.	HOUSE / FLAT NO.
STREET ADDRESS	STREET ADDRESS
CITY / TOWN	STATE
COUNTRY	PIN CODE

Overseas Address (Mandatory for NRI / FII Applicants)

HOUSE / FLAT NO.	HOUSE / FLAT NO.
STREET ADDRESS	STREET ADDRESS
CITY / TOWN	STATE
COUNTRY	PIN CODE

Tel. _____ Office _____ Residence _____ Mobile _____

Email [£] _____

Please tick (✓) if you wish to receive Annual Report or Abridged Summary via Post - (Default communication mode is E-mail) [Refer Instruction No.IX(a)]
 Please tick (✓) if you wish to receive Account statement / Other statutory information via Post instead of Email [Refer Instruction No.IX(b)]
 Please ✓ any of the frequencies to receive Account Statement through e-mail [£]: Daily Weekly Monthly Quarterly Half Yearly Annually

* Mandatory information - If left blank the application is liable to be rejected. # Name of Guardian/Contact Person is Mandatory in case of Minor/Non-Individual Investor. ** Mandatory in case the Sole/First applicant is minor and/or if investing in Retirement Fund. £ For KYC requirements, please refer to the instruction Nos. II b(5) & X For documents to be submitted on behalf of minor folio refer instruction II-b(2) Please refer to instruction no. IX



ACKNOWLEDGEMENT SLIP (Please Retain this Slip)

To be filled in by the Investor. Subject to realization of cheque and furnishing of Mandatory Information.

Application No. _____

Name of the Investor: _____ EXISTING FOLIO NO. _____

TOLL FREE NUMBER: 1800 222 999 (MTNL/BSNL) 1800 200 6666 (OTHERS) EMAIL: enquiry@icicipruamc.com WEBSITE: www.icicipruamc.com

6. MODE OF HOLDING [Please tick (✓)] Single Joint Anyone or Survivor (Default)

7. TAX STATUS [Please tick (✓)]

Resident Individual, NRI, Partnership FIRM, Government Body, FPI category I, NPS Trust, Bank, On behalf of Minor, Company, AOP/BOI, FPI category II, NON Profit Organization/Charities, HUF, Body Corporate, Private Limited Company, Public limited company, FPI category III, Defence Establishment, Financial Institution, Trust/Society/NGO, Limited Partnership (LLP), Sole Proprietorship, Others (Please specify)

8. DEMAT ACCOUNT DETAILS (Optional - Please refer Instruction No. XI)

NSDL: Depository Participant (DP) ID (NSDL only), Beneficiary Account Number (NSDL only), CDSL: Depository Participant (DP) ID (CDSL only)

9. FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor) (Mandatory)

Non-Individual investors should mandatorily fill separate FATCA Form (Annexure II). The below information is required for all applicants/guardian

Table with columns: Applicant (First, Second, Third), Place/City of Birth, Country of Birth, Country of Citizenship / Nationality (Indian, U.S., Others)

Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? Yes No [Please tick (✓)]

If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen/Resident / Green Card Holder / Tax Resident in the respective countries.

Table with columns: Applicant (First, Second, Third), Country of Tax Residency, Tax Identification Number or Functional Equivalent, Identification Type (TIN or other please specify), If TIN is not available please tick (✓) the reason A, B or C

- Reason A -> The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents.
Reason B -> No TIN required (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected)
Reason C -> Others, please state the reason thereof:

Address Type of Sole/1st Holder:

Address Type of 2nd Holder:

Address Type of 3rd Holder:

Residential, Registered Office, Business (for all three holders)

Annexure I and Annexure II are available on the website of AMC i.e. www.icicipruamc.com or at the Investor Service Centres (ISCs) of ICICI Prudential Mutual Fund.

10. KYC DETAILS (Mandatory)

Occupation [Please tick (✓)]

Occupation details for Sole/First Applicant, Second Applicant, Third Applicant with categories like Private Sector Service, Public Sector Service, Government Service, Business, Professional, Agriculturist, Retired, etc.

Gross Annual Income [Please tick (✓)]

Gross Annual Income details for Sole/First Applicant, Second Applicant, Third Applicant with ranges like Below 1 Lac, 1-5 Lacs, 5-10 Lacs, 10-25 Lacs, >25 Lacs-1 crore, >1 crore

Others [Please tick (✓)]

For Individuals: Politically Exposed Person (PEP), Related to Politically Exposed Person (RPEP), Not applicable
For Non-Individuals: Foreign Exchange / Money Changer Services, Gaming / Gambling / Lottery / Casino Services, Money Lending / Pawning

11. NOMINATION DETAILS (Refer instruction VII). I/We hereby nominate the undermentioned nominee(s) to receive the amount to my/our credit in event of my/our death as follows:

Table with columns: Name and address of Nominee(s), Applicant's Relationship with the Nominee, Date of Birth, Name and address of Guardian, Signature of Nominee/Guardian, Proportion (%) in which the units will be shared by each Nominee

Other Details (optional)

Table with columns: Nominee (1, 2, 3), PAN, Mobile, Email ID

INVESTOR(S) DECLARATION & SIGNATURE(S): To the Trustee, ICICI Prudential Mutual Fund, I/We have read, understood and hereby agree to abide by the Scheme Information Document/Key Information Memorandum of the Scheme(s), Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) under FATCA & CRS provision of the Central Board of Direct Taxes notified Rules 114 F to 114H, as part of the Income-tax Rules, 1962.

Sole/1st Applicant, 2nd Applicant, 3rd Applicant signature boxes

Table with columns: Scheme Name, Plan, Option/Sub-option, Payment Details (Amt., Cheque/DD No., Bank & Branch)