

## MUTUAL FUND Request for change in status from Minor to Major

The Trustees					
	Mutual Fund				
Name of the Applicant (unitholder w	ho is requesting for change of state	us from MINOR to MAJ	OR)		
Mr./Ms.					
Date of Birth / /	/     P	PAN			
Tax Status: ☐ Resident Individual ☐	4	X 27			
Discretisists (which were in greation to		Identification No.			
Please tick√ whichever is applicable					
Name of the Guardian Mr./Ms.					
Relationship with the applicant:	Father	ourt Appointed Guardian	[		
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I, the above applicant, hereby request Guardian's name therein as I have sinc		•	•		te:
Folio No(s).	e become a major, and update the	details provided herein i	II your records	S	
1)	2)	3)			
4)	5)	6)			
7)	8)	9)			
Contact details of the Applicant					
Mobile No.+91	Tel. No. STD -				
Email Address	1 1101 22				
Address of the Applicant Address Line 1					
Address Line 2					
			DIN		Т
Cit	Ctata		PIN		
City:	State	Tr / VVC Pagistration	1 - am an magand	<i>I</i> _1	
(Please note that address will be updated	d as per applicant's address on KYC	C form / KYC Registration	Agency record	ls)	
(Please note that address will be updated  Bank Account Details of the Applica	d as per applicant's address on KYC	C form / KYC Registration	Agency record	ds)	
(Please note that address will be updated	d as per applicant's address on KYC		Agency record	ds)	_ _
(Please note that address will be updated  Bank Account Details of the Applica	d as per applicant's address on KYC	C form / KYC Registration  11-digit IFSC	Agency record	ds)	
(Please note that address will be updated  Bank Account Details of the Applica  Bank Name  Account No.  A/c. Type □ SB □Current □NRO	d as per applicant's address on KYC			(s)	
(Please note that address will be updated  Bank Account Details of the Applica  Bank Name  Account No.	d as per applicant's address on KYC	11-digit IFSC		(s)	
(Please note that address will be updated  Bank Account Details of the Applica  Bank Name  Account No.  A/c. Type □ SB □Current □NRO	d as per applicant's address on KYC	11-digit IFSC			
(Please note that address will be updated  Bank Account Details of the Applica  Bank Name  Account No.  A/c. Type □ SB □Current □NRO  Name of bank branch	d as per applicant's address on KYC  nnt  □ □NRE □FCNR	11-digit IFSC 9-digit MICR No	o. PIN		
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Country of Birth		Place of Birth	
Nationality			
Are you a tax resident of any country		Yes □No	
If Yes, please mention all the countri			es and the associated Taxpayer
Identification Number and its identif			
Country	Tax-Payer Identificati	on Number	Identification Type
	1		-
<b>Nomination</b> (Please tick ( $\checkmark$ ) one of the	ontions helow)		
			laular dan sailand in the Mousing tion Forms
attached herewith, to receive the			larly described in the <b>Nomination Form</b> h. <i>{Recommended}</i>
	<u>*</u>	<u> </u>	<u> </u>
☐ I <b>DO NOT</b> wish to make a nomin	nation (Please tick $\sqrt{i}$ f you	ı do not wish to nomir	nate anyone)
Declaration and Signature of the Ap	mlicant		
have attached herewith all the releva	_	as indicated below.	
confirm that the information provide	-		
•	d above is true and com	ect to the best of my	•
undertake to keep	ion to the chara inform	otion in future and a	Mutual Fund / its AMC/R7
nformation as may be required by the		ation in future and a	iso undertake to provide any other addition
• • •	AMC/KIAS.		M . 15 1 1: 11600
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