

APPLICATION FORM



"TO HAVE A NEW DREAM EVERY DAY. THAT'S HER RIGHT TO A BETTER LIFE."



Haq, ek behtar zindagi ka.

Enjoy your right to be financially prepared and give wings to your children's career. UTI MF now gives you two ways to invest in your children's future.

UTI Children's Career Balanced Plan:

- Asset Allocation:
Equity and Equity Linked Instruments: Minimum-0%, Maximum-40%
Debt Securities: Minimum-60%, Maximum-100%

UTI CCP Advantage Fund:

- Asset Allocation:
Equity and Equity related Instruments: Minimum-70%, Maximum-100%
Debt & Money Market Instruments including Securitised Debt: Minimum-0%, Maximum-30%

Both the above mentioned funds have Systematic Investment Plan (SIP) mode of investment available.

For more information, visit www.utimf.com

TOLL-FREE: 1800 22 1230 "UTICCBP" or "UTICCP" to 5676756 invest@uti.co.in www.utimf.com |

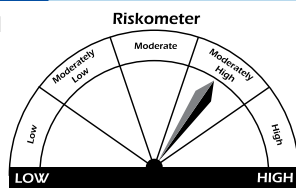
UTI CHILDREN'S CAREER PLAN

UTI CHILDREN'S CAREER BALANCED PLAN

This product is suitable for investors who are seeking:*

- Long term capital appreciation
- Investment in equity instruments (maximum-40%) and debt instruments

*Investors should consult their financial advisors if in doubt about whether the product is suitable for them.



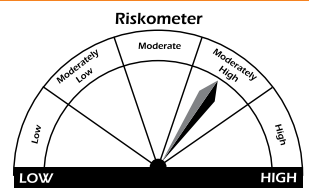
Investors understand that their principal will be at moderately high risk

UTI CCP ADVANTAGE FUND

This product is suitable for investors who are seeking:*

- Long term capital appreciation
- Investment in equity instruments (above 70%) and debt instruments

*Investors should consult their financial advisors if in doubt about whether the product is suitable for them.



Investors understand that their principal will be at moderately high risk

MUTUAL FUND INVESTMENTS ARE SUBJECT TO MARKET RISKS, READ ALL SCHEME RELATED DOCUMENTS CAREFULLY.

February 29, 2016.

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GENERAL INSTRUCTIONS FOR FILLING THE APPLICATION FORM

PLEASE FILL IN ALL COLUMNS IN CAPITAL LETTERS ONLY

[Fields Marked with (*) must be Mandatorily filled in]

[Before Filling up the Form, Please read the Cover Page Carefully to know the Risk Profile of the Scheme(s) you are Investing in]

- (a) Please read the terms of the Key Information Memorandum, Scheme Information Documents and Statement of Additional Information carefully before filling the Application Form. Investors should also apprise themselves of the prevailing Load structure on the date of submitting the Application Form.
- Investors are deemed to have accepted the terms subject to which this offer is being made and bind themselves to the terms upon signing the Application Form and tendering payment.
- (b) Before submission of application form at UTI Financial Centres and other authorised collection centres investors may please ensure that the form has been filled in completely and signed by all the applicants properly as incomplete application is liable to be rejected.
- (c) NRI applicants should preferably submit the application at NRI Branch, Mumbai, Dubai Representative Office or any Financial Centre of UTI AMC along with NR(E) / NR(O) cheque or a rupee draft payable at the place where the application is submitted.
- (d) **Please write the application serial Number on the reverse of the cheque / draft.**
- (e) Please fill in the names of the applicant(s) / beneficiary / alternate child (if any) / institution / parent or lawful guardian / minor / alternate applicant / nominee etc. at the appropriate places in the application form. PIN code no. must be given with address to avoid delay / loss in transit.
- (f) Attach any one of the documents as proof of date of birth and relationship with minor viz., birth certificate, School leaving certificate/mark sheet issued by Higher Secondary Board of respective states, ICSE, CBSE etc., Passport of the minor or any other suitable proof evidencing the date of birth and relationship with the minor.
- (g) It is mandatory for an applicant to furnish full and correct particulars of bank account such as nature and number of the account, name and address of the bank, name of the branch, MICR code of the branch (where applicable) etc. at the appropriate place in the application form. Application without such bank particulars is liable to be rejected. If the credit of dividend distribution is delayed or not effected at all for reason of incomplete or incorrect information furnished by the applicant, UTI AMC cannot be held responsible.
- (h) If you have invested through a distributor, kindly specify the Name and ARN Code, Sub ARN Code of the distributor, else for Direct Investment, please mention "Direct" in the Column "Name & Broker Code/ARN/ Sub ARN Code". In case nothing is specified, then by default, the Broker Code will be treated as Direct and the application form will be treated as Direct Application.
- (i) **Transaction Charges**
For Investments of value Rs 10000/- and above only, a transaction charge of Rs100 (for existing investors) and Rs 150 (for first time investor in mutual funds) will be deducted from the subscription amount and paid to the Distributor whose information is provided in the Application Form. However, upfront commission, if any, shall be paid directly by the Investor to the Distributor based on his assessment of various factors including service rendered by the Distributor. For further details on Transaction charges, refer to SAI/SID of the respective Scheme.
- (j) **Direct Plan**
Direct Plan is for all category of eligible investors (whether existing or new Unitholders) who purchase/subscribe Units directly with the Fund and is not available for investors who route their investments through a Distributor.
- The Direct Plan will be a separate plan under the Fund/Scheme and shall have a lower expense ratio excluding distribution expenses, commission etc and will have a separate NAV. No commission shall be paid from Direct Plan. Portfolio of the scheme under the Existing Plan and Direct Plan will be common.
- For further details refer to SAI.
- (k) **'Friend In Need'** details will be used by UTI MF only for ascertaining the present address of the unit holder (without disclosing investment details of the investor) if no response is received from the unit holder on sending communication in any form to his/her registered address or e-mail ID, if available, atleast for two occasions. For further details, please refer to SAI.
- (l) SEBI has made it mandatory for all applicants, irrespective of amount of investment, to furnish Income Tax PAN (PAN not applicable to Micro SIP). An application without PAN will be rejected. Investors are required to provide the photocopy (self attested by the investor) of the PAN card along with the application form. If the investment is in the name of minor the PAN of the minor or his father / mother / guardian whose particulars are provided in the application form is to be provided.
- Investment & Payment Details**
- (m) **The cheque/draft accompanying an application should be made payable in favour of "the name of the scheme".**
In the case of 'Direct Plan', the cheque/draft shall be payable in favour of "the name of the scheme- Direct Plan".
- (n) Outstation cheques are not accepted. In case the payment is made by demand draft, the draft commission will have to be borne by the applicants.
- However for investment made from areas where there are no UTI Financial Centres or authorised collection centres (where local cheques are accepted), UTI AMC may, if it so decides, bear draft charges to the extent of ₹250/- per application or the actual as is prescribed by banks, whichever is lower or such amount as may be decided by UTI AMC from time to time. The investors have to attach proof of the DD charges paid to a bank (i.e. acknowledgement issued by the bank where DD is purchased). The reimbursement/adjustment of DD charges is solely at the discretion of UTI AMC and in case if it is found that such charges are unreasonably higher than normal market rates, such charges may not be admissible. For further details, refer to SAI/SID of the respective scheme.
- (o) UTI AMC/MF shall not accept application for subscription of units accompanied with Third Party Payment except in certain exceptional cases as may be permitted. For details please refer to SID/SAI.
- Payment Modes**
- (p) **No money orders, outstation cheques, post-dated cheques [except through Systematic Investment Plan(SIP)/Micro SIP] and postal orders will be accepted.**
- However, **cash payment** to the extent of ₹50,000/- per investor, per Mutual Fund, per financial year through designated branches of Axis Bank will be accepted subject to the following procedure:-
- Investors who desire to invest upto ₹50,000/- per financial year shall contact any of our UTI UFCs and obtain a Form for Deposit of Cash and fill-up the same.
 - Investors shall then approach the designated branch of Axis Bank along with the duly filled-in Form for Deposit of Cash and deposit the cash.
 - Axis Bank will provide an Acknowledgement slip containing the details of Date & Time of deposit, Unique serial number, Scheme Name, Name of the Investor and Cash amount deposited. The Investors shall attach the Acknowledgement slip with the duly filled-in application form and submit them at the UFCs for time stamping.
 - Applicability of NAV will be based on depositing of cash at the designated bank branch before the cut-off time and time-stamping of the valid application together with the acknowledgment slip at the UTI Financial Centre (UFC)/Official Point of Acceptance (OPA).
- For further details please refer to SAI.
- (q) **Know Your Customer (KYC) Norms:**
Common Standard KYC through CDSL Ventures Ltd (CVL) is applicable for all categories of investors and for any amount of investment. KYC done once with a SEBI registered intermediary will be valid with another intermediary. Intermediaries shall carry out In-Person Verification (IPV) of their clients.
- For further details related to KYC, please refer to SAI/SID of the respective scheme.
- PAN-Exemption for micro financial products**
Only individual Investors (including NRIs, Minors & Sole proprietary firms) who do not have a PAN, and who wish to invest upto ₹ 50000/- in a rolling 12 month period or in a financial year under any Scheme including investments, if any, under SIPs shall be exempted from the requirement of PAN on submission of duly filled in purchase application forms, payment amount/instrument and KYC application form with other prescribed documents towards proof of identity as specified by SEBI. Eligible investors of micro investment should attached a copy of KYC Acknowledgement further quoting PAN exempt KYC reference number (PEKRN) along with the application form.
- For all other categories of investors, this exemption is not applicable. Please refer to the SAI for further details on KYC.
- (r) **Aadhar Card**
In addition to KYC compliance proof / self attested PAN Card copy, the investors are advised to provide Aadhar Card No., if any.
- (s) **Consolidated Account Statement (CAS)**
The AMC will issue a Consolidated Account Statement (CAS) for each calendar month to the investor in whose folios transactions has taken place during that month and such statement will be issued on or before the 10th day of the succeeding month detailing all the transactions and holding at the end of month including transaction charges paid to the distributor, if any, across all schemes of all mutual funds.
- Further, CAS as above, will also be issued every half yearly (September/March), on or before the 10th day of succeeding month detailing holding at the end of the sixth month, across all schemes of all mutual funds, to all such investors in whose folios no transactions has taken place during that period.
- The word "transaction" for the purposes of CAS would include purchase, redemption, switch, dividend payout, dividend reinvestment, Systematic Investment Plan (SIP), Systematic Withdrawal Plan (SWP), Systematic Transfer of Investment Plan (STRIP), bonus transactions and merger, if any.
- However, Folios under Micropension arrangement shall be exempted from the issuance of CAS.
- For further details on other Folios exempted from issuance of CAS, PAN related matters of CAS etc, please refer to SAI.

(t) **MF Utility for Investors**

UTI AMC Ltd has entered into an agreement with MF Utilities India Private Ltd (MFUI) for usage of MF Utility (MFU), a shared service initiative of various Asset Management Companies, which acts as a transaction aggregation portal for transacting in multiple Schemes of various Mutual Funds with a single form and a single payment instrument through a Common Account Number (CAN)

Accordingly, all financial and non-financial transactions pertaining to Schemes of UTI Mutual Fund excluding UTI Nifty, UTI Children's Career Balanced Plan, UTI Children's career Advantage Fund and UTI ULIP are available through MFU either electronically on www.mfuonline.com as and when such a facility is made available by MFUI or physically through authorised Points Of Service ("POS") of MFUI with effect from the respective dates as published on MFUI website against the POS locations. However, all such transactions shall be subject to the eligibility of investors, any terms and conditions and compliance with the submission of documents and procedural requirements as stipulated by UTI MF/UTI AMC from time to time in addition to the conditions specified by MFU, if any.

The online portal of MFUI i.e. www.mfuonline.com and the POS locations aforesaid shall act as Official Points of Acceptance (OPAs) in addition to the existing OPAs of the UTI AMC Ltd and any transaction submitted at such POS will be routed through MFUI or as may be decided by UTI AMC. Investors not registered with MFUI also can submit their transactions request by giving reference to their existing folio number. All valid applications received for any other scheme apart from eligible schemes as stated above may be accepted by UTI AMC at its own discretion

The uniform cut off time as prescribed by SEBI and as mentioned in the SID/KIM of the respective Schemes shall be applicable for applications received by MFUI. However, in case of investment of any amount in liquid funds and Rs 2 lacs and above for other Schemes, the applicability of NAV will be subject to the date and time of receipt of credit of amount to the specified bank account of AMC. UTI AMC Ltd will not be responsible for any delay or omission whatsoever, on the part of MFUI.

For further details regarding procedures for obtaining CAN and other particulars about MFU etc, please refer to Addendum No 50 dated 6th February 2015/SAL. Investors may also contact the nearest POS aforesaid for procedures to be complied with in this regard

- (u) **E-mail communication:** Unitholders who have opted to receive documents/communication by e-mail will be required to download and print the documents/communication after receiving the e-mail from UTI AMC. Should the unitholder experience any difficulty in accessing the electronically delivered documents/communication, the unitholder should advise the Registrars immediately to enable UTI AMC to send the same through alternate means. In case of non receipt of any such intimation of difficulty within 24 hours from receiving the e-mail, it will be regarded as receipt of email by the unitholder. It is deemed that the unitholder is aware of all the security risks including possible third party interception of the documents/communications and contents of the same becoming known to third parties. SMS and Email on the registered address of the investor shall be sent confirming the number of unit allotted within 5 business days from the date of transaction.

(v) **Abridged Annual Report:**

The unitholders whose Email ID is registered with UTI Mutual Fund will receive Abridged Annual Report by email unless indicated by the investor otherwise to receive the physical copy. The scheme-wise Abridged Annual report will also be made available on the website of UTI Mutual Fund (www.utimf.com).

- (w) **Note on EUIN:** Investors should mention the EUIN of the person who has advised the investor. If left blank, please sign the declaration provided in the application form. EUIN will assist in tackling the problem of mis-selling even if the employee/relationship manager/sales person leave the employment of the ARN holder/Sub broker.

Applicability of EUIN :

- Transactions to be included - Purchases, Switches, SIP/ STP / STP Triggers registration, Dividend Transfer Plan registration.
- Transactions to be excluded – Auto SIP/ STP / SWP / STP Triggers Installments, Dividend Reinvestments, Bonus Units, Redemption, SWP Registration, Zero Balance Folio creation and Dividend Transfer Plan installments.

- (x) Politically Exposed Persons (PEP) are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations, important political party officials, etc.

(y) **Risk Mitigation process against Third Party Cheques**

Third party payments are not accepted in any of the schemes of UTI Mutual Fund subject to certain exceptions.

"Third Party Payments" means the payment made through instruments issued from an account other than that of the beneficiary investor mentioned in the application form. However, in case of payments from a joint bank account, the first named applicant/investor has to be one of the joint holders of the bank account from which payment is made.

For further details on documents to be submitted under the process to identify third party payments, Exceptions for accepting such cheques etc, refer to SAL/relevant addenda.

Bank Mandate registration as part of the New Folio creation

In order to reduce frauds and operational risks relating to fraudulent encashment of redemption/dividend proceeds, Investors are required to submit any of the prescribed documents (along with original document for verification) in support of the bank mandate mentioned in the application form for subscription under a new folio, in case these details are not the same as the bank account from which the investment is made.

- (z) **Foreign Account Tax Compliance Act (FATCA) is a United States (US) Law aimed at prevention of tax evasion by US citizens and residents ("US Persons") through use of offshore accounts.**

FATCA obligates foreign financial institutions (FFIs), including Indian financial institutions to provide the US Internal Revenue Service (IRS) with information and to report on the accounts held by specified US Persons. The term FFI is defined widely to cover a large number of non-US based financial service providers such as mutual funds, depository participants, brokers, custodians as well as banks. FATCA requires enhanced due diligence processes by the FFI so as to identify US reportable accounts.

The identification of US person will be based on one or more of following "US indicia" -

- ✓ Identification of the Account Holder as a US citizen or resident;
- ✓ Unambiguous indication of a US place of birth;
- ✓ Current US mailing or residence address (including a US post office box);
- ✓ Current US telephone number;
- ✓ Standing instructions to transfer funds to an account maintained in USA;
- ✓ Current effective power of attorney or signing authority granted to a person with a US address or
- ✓ An "in-care of" or "hold mail" address that is the sole address that the Indian Financial Institution has on the file for the Account Holder

Common Reporting Standard - The New Global Standard for Automatic Exchange of Information

On similar lines as FATCA the Organization of Economic Development (OECD), along with the G20 countries, of which India is a member, has released a "Standard for Automatic Exchange of Financial Account Information in Tax Matters", in order to combat the problem of offshore tax evasion and avoidance and stashing of unaccounted money abroad, requiring cooperation amongst tax authorities. The G20 and OECD countries have together developed a Common Reporting Standard (CRS) on Automatic Exchange of Information (AEOI).

Please refer to Instructions given in the FATCA/CRS Form before filling in the particulars and for further details relating to FATCA/CRS, refer to AMFI India's Circular No.135/BP/63/2015-16 dated 18th September 2015 and SEBI Circular No. CIR/MIRSD/3/2015 dated 10th September 2015.

- (aa) **Power of Attorney**

If the investment is made by a Constituted Attorney on behalf of the investor, please furnish the following details and enclose a Notarised copy of the Power of Attorney(PoA) and register the same with the Registrars to the Scheme. If you have already registered your PoA, please provide the PoA Registration Number in the space provided below the signature box in the Application Form

- PoA Holder's Name: Mr / Ms
- PoA for First/Sole Applicant Second Applicant Third Applicant
- PAN of PoA Holder (Attach Pan Card Copy)
Please Note that PoA Holder must comply with applicable KYC requirements
- Date of Birth: (dd/mm/yyyy) & Email:

CHECK LIST

Please ensure that:

- **Application Form is filled in Capital letters only**
- Your name and address is given in full.
- Your preferred Scheme, plan and option is selected.
- Your investment is not less than the minimum investment amount.
- Your application is complete and signed by all applicants.
- Cheques are drawn in favour of 'The name of the scheme' (in case of Direct Plan, "the name of the scheme - Direct Plan") dated, signed and crossed 'A/C Payee only'.
- On the reverse of each cheque submitted, the Application Form number is written.
- PAN details of all holders are given failing which your application will be rejected (PAN not applicable to micro SIP).
- Copy of KYC acknowledgement for all holders provided by service provider is given, failing which your application will be rejected.
- Your bank account details are entered completely and correctly. This is mandatory. If this is not included, your application will be rejected.
- Only CTS-2010 complied cheques are submitted.

(Please read instructions carefully before filling the form and use **BLOCK LETTERS** only)

[Fields Marked with (*) must be Mandatorily filled in]

DISTRIBUTOR INFORMATION (only empanelled Distributors/Brokers will be permitted to distribute Units) (refer instruction 'h')							BDA / CA Code
ARN/RIA Code [^]	Name of Financial Advisor	Sub ARN Code	Sub-Code / Bank Branch Code	M O Code	EUI No. [@]	UTI RM No.	

[^] By mentioning RIA code, I/we authorise you to share with the Investment Adviser the details of my/our transactions.

Upfront Commission shall be paid directly by the investor to the AMFI/NISM certified UTI MF registered distributors based on the investors' assessment of various factors including the service rendered by the distributor.

[@] I/We confirm that the EUI box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned or notwithstanding the advice of in-appropriateness, if any, provided by such distributor personnel and the distributor has not charged any advisory fees for this transaction. Please tick and sign below when EUI box is left blank. (refer instruction 'w').

Signature of Donor/Authorised Signatory (In case of non-individual Donor)

Signature of Guardian
(only if Donor and Guardian are different)

TRANSACTION CHARGES TO BE PAID TO THE DISTRIBUTOR (Please tick any one of the below) (Refer Instruction 'i')

<input type="checkbox"/> I AM A FIRST TIME INVESTOR IN MUTUAL FUNDS	OR	<input type="checkbox"/> I AM AN EXISTING INVESTOR IN MUTUAL FUNDS
₹ 150 will be deducted as transaction charges per Subscription of ₹ 10,000 and above		₹ 100 will be deducted as transaction charges per subscription of ₹ 10,000 and above

Existing Unit Holder information If you have an existing folio no. with PAN & KYC validation, please mention your Folio Number here:

DONOR'S DETAILS: (KYC Mandatory) Mr Ms Mrs M/s

Name: F I R S T M I D D L E L A S T

Address:

City*:

State: Country*: Zip/Pin*:

PAN/ PEKRN\$ Enclosed copy of PAN Card KYC Compliance Proof* Aadhaar Card No.

Relation with the donee child: Father Mother Other, please specify _____
(If the Donor is Guardian, relation should be mandatory)

BANK PARTICULARS OF DONOR (Under scholarship option, if the Donor wishes to redeem, redemption amount will be credited to this account)

Bank Name	Branch
Address	MICR Code <input type="text"/>
City <input type="text"/> *Pin <input type="text"/>	(this is a 9-digit number next to your cheque number)
Account type (please ✓) <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE	IFS Code <input type="text"/>
Account No. <input type="text"/>	(this is a 11-digit number)

BENEFICIARY CHILD'S DETAILS Master Kumari (Not exceeding 18 years of the age)

Name: F I R S T M I D D L E L A S T

Address:

City*:

State: Country*: Zip/Pin*:

Date of Birth* d d m m y y y y Mandatory PAN/ PEKRN\$ Enclosed copy of PAN Card (if available)

BANK PARTICULARS OF BENEFICIARY CHILD (if available)
{Under growth option, redemption amount will be credited to this account and in case of Scholarship option, scholarship payment will be credited to this account}

Bank Name	Branch
Address	MICR Code <input type="text"/>
City <input type="text"/> *Pin <input type="text"/>	(this is a 9-digit number next to your cheque number)
Account type (please ✓) <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE	IFS Code <input type="text"/>
Account No. <input type="text"/>	(this is a 11-digit number)

PAYMENT DETAILS (Please ensure that the cheque complies to the CTS 2010 standard) (Refer Instruction 'y')

#Cheque/DD/NEFT/*RTGS Ref. No. / Unique Serial No. (For Cash) Cash Account type Savings Current NRE
(please ✓) NRO DD issued from abroad

Account No.

Date Amt. of investment (i) One Time Mandate (OTM) if already registered (Applicable for existing investors)

Bank DD Charges if any (ii) # Please mention the application No. on the reverse of the cheque / DD, NEFT / RTGS advice. Cheque / DD must be drawn in favour of "The Name of the Scheme" & crossed "A/c Payee Only"

Branch Net amount paid (i-ii)

Amt. in words ♦ Investment amount shall be ₹ 2 lacs and above in case of payments through RTGS.

DETAILS UNDER FATCA (FOREIGN TAX COMPLIANCE ACT) AND CRS (COMMON REPORTING STANDARD) (Refer Instruction 'z')

Information to be provided by the Applicant

Are you a tax resident of any country other than India ?

If **No**, please tick here: First Applicant / Donor

If **Yes**, please tick here: First Applicant / Donor, please fill in the Particulars in the prescribed Form for FATCA/CRS and attach it with this Application Form.

GENERAL INFORMATION - Please (✓) wherever applicable

Category of Beneficiary Child	<input type="checkbox"/> Resident Indian	<input type="checkbox"/> Non Resident Indian
Status of Donor	<input type="checkbox"/> Individual	<input type="checkbox"/> Trust
	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Others (Please specify) _____
Category of Donor	<input type="checkbox"/> Resident Indian	<input type="checkbox"/> Non Resident Indian
Occupation of Donor :	<input type="checkbox"/> Business	<input type="checkbox"/> Agriculture
	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Professional
	<input type="checkbox"/> Housewife	<input type="checkbox"/> Retired
	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service
	<input type="checkbox"/> Government Service	<input type="checkbox"/> Forex Dealer
	<input type="checkbox"/> Others (Please specify) _____	
Status of Guardian	<input type="checkbox"/> Individual	<input type="checkbox"/> Trust
In case of Growth Option and Dividend Option	<input type="checkbox"/> Body Corporate	<input type="checkbox"/> Others (Please specify) _____
Category of Guardian	<input type="checkbox"/> Resident Indian	<input type="checkbox"/> Non-Resident Indian
Occupation of Guardian:	<input type="checkbox"/> Business	<input type="checkbox"/> Agriculture
	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Professional
	<input type="checkbox"/> Housewife	<input type="checkbox"/> Retired
	<input type="checkbox"/> Private Sector Service	<input type="checkbox"/> Public Sector Service
	<input type="checkbox"/> Government Service	<input type="checkbox"/> Forex Dealer
	<input type="checkbox"/> Others (Please specify) _____	



Haq, ek behtar zindagi ka.

Received from Mr / Ms / M/s

An application under

along with Cheque[§]/DD[§]/NEFT/RTGS Ref. No./Unique Serial No. (For Cash)

Drawn on (Bank)

for ₹ (in figures)

[§] Cheques and drafts are subject to realisation.

ACKNOWLEDGEMENT
(To be filled in by the Applicant)

Sr. No. 2016/

(scheme name)

dated

Stamp of UTI AMC Office/
Authorised Collection Centre

OTHER DETAILS (MANDATORY)

FOR INDIVIDUALS ONLY

DONOR

(A) Gross Annual Income Details Please tick (✓)

Below 1 Lac 1-5 lacs 5-10 Lacs 10-25 Lacs >25 Lacs - 1 Crore >1 Crore

[OR]

Net-worth in ₹ _____ (Net worth should not be older than 1 year) as on (date) DD/MM/YYYY

(B) Please tick if applicable: Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP) (for definition of PEP, please refer instruction 'x')

(C) Any other information: _____

GUARDIAN

(A) Gross Annual Income Details

Below 1 Lac 1-5 lacs 5-10 Lacs 10-25 Lacs >25 Lacs - 1 Crore >1 Crore

[OR]

Net-worth in ₹ _____ (Net worth should not be older than 1 year) as on (date) DD/MM/YYYY

(B) Please tick if applicable: Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)

(C) Any other information: _____

CHILD

(Optional)

(A) Gross Annual Income Details

Below 1 Lac 1-5 lacs 5-10 Lacs 10-25 Lacs >25 Lacs - 1 Crore >1 Crore

[OR]

Net-worth in ₹ _____ (Net worth should not be older than 1 year) as on (date) DD/MM/YYYY

(B) Please tick if applicable: Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)

(C) Any other information: _____

FOR NON-INDIVIDUALS DONOR ONLY

(A) Gross Annual Income Details

Below 1 Lac 1-5 lacs 5-10 Lacs 10-25 Lacs >25 Lacs - 1 Crore >1 Crore

[OR]

Net-worth in ₹ _____ (Net worth should not be older than 1 year) as on (date) DD/MM/YYYY

(B) Is the entity involved in / providing any or the following services

- Foreign Exchange / Money Changer Services YES NO - Gaming / Gambling/Lottery Services (e.g. casinos, betting syndicates) YES NO
- Money Lending / Pawning YES NO

(C) Any other information: _____

DECLARATION AND SIGNATURE OF APPLICANT/S

• I/We have read and understood the contents of the Scheme Information Documents, Statement of Additional Information and Key Information Memoranda, addenda issued till date and apply to the trustee of UTI Mutual fund as indicated above. I/We agree to abide by the terms and conditions, rules and regulations of the schemes as on the date of investment. I/We undertake to confirm that this investment has been duly authorised by appropriate authorities in terms of all relevant documents and procedural requirements. • I/We have not received nor been induced by any rebate or gifts, directly or indirectly in making investments. I/We agree that in case of scholarship option the first named child shall get the scholarship as per the installments selected herein above for which, the scheme will make the payment directly to the child. • The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing schemes of various Mutual funds from amongst which the scheme is being recommended to me/us. • I/We hereby authorize UTI MF/UTI AMC to share my data furnished in the form to my distributor and other service providers of the UTI MF for the purpose of servicing, issue of account statement/consolidated statement of account etc and cross selling of products/schemes of the UTI MF. • I/We confirm that we are Non-Residents of Indian Nationality/Origin and that the funds are remitted from abroad through approved banking channels or from my/our NRE/NRO account. I/We undertake to provide further details of source of funds and any such other relevant documents, if called for by UTI Mutual fund. (Applicable to NRIs.) • I hereby solemnly declare that I am the father/mother/guardian of the minor child in whose name the application is made. The date of birth stated by me is true and correct. I do not have any documents in support of the date of birth and relationship with minor child. (strike out if this declaration is not applicable).

OPTION FOR DESPATCH OF STATEMENT OF ACCOUNT (SoA)

Through email[∞] SoA in Physical Form At my Overseas address as mentioned above[∞] To be dispatched to my resident relative's address in India as mentioned above[∞]

[∞] Please send the Account Statement, Abridged Annual Report, Transaction confirmation, communication of change of address, change of bank details etc. through email only at the below email ID.

@ Applicable to NRIs

Mobile No. _____ Tel. (R) STD CODE _____ Tel. (O) STD CODE _____

*E-mail _____ Alternate E-mail _____

Signature of Donor/Authorised Signatory
(In case of non-individual Donor)/POA^{^^}

Signature of Guardian
(only if Donor and Guardian are different)

Signature of Minor Child
(Optional)

^{^^} Power of Attorney (POA) Registration No. _____ (if already registered) (Refer instruction 'aa')

Notes :

1. If the application is incomplete and any other requirement is not fulfilled, the application is liable to be rejected.
2. Consolidated Account Statement (CAS) will be sent within 10 days of the following month of the transaction.
3. **Please ensure that all KYC Compliance Proof and PAN details are given, failing which your application will be rejected. PAN not applicable for Micro SIP.**
4. All communication relating to issue of Statement of Account, Change in name, Address or Bank particulars, Nomination, Redemption, Death Claims etc., may please be addressed to the Registrar :

M/s. Karvy Computershare Private Limited, Narayani Mansion, H.No.1-90-2/10/E, Vittalrao Nagar, Madhapur, Hyderabad – 500 081.
Tel. 040-23312454, Fax: 040-23115503 • E-mail: uti@karvy.com

Sign. here ↓

UTI SMaRT FORM

(UTI Single Mandate Registration & Transaction Form)



Haq, ek behtar zindagi ka.

UMRN F o r o f f i c e u s e Date

Sponsor Bank Code C I T I O O O P I G W Utility Code C I T I O O O O 2 0 0 0 0 0 0 0 3 7

Tick (✓)
 CREATE
 MODIFY
 CANCEL
 I/We hereby authorize UTI Mutual Fund to debit (tick✓) SB CA CC SB-NRE SB-NRO Other

Bank a/c number

with Bank Name of Customers Bank IFSC or MICR

an amount of Rupees ₹

FREQUENCY Mthly Qtrly H-Yrly Yrly As & when presented DEBIT TYPES Fixed Amount Maximum Amount

Reference 1 Folio Number Mobile No.

Reference 2 Application Number Email ID

I Agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

PERIOD
 From
 To
 Or Until Cancelled
 Signature Primary Account holder _____ Signature of Account holder _____ Signature of Account holder _____
 1. Name as in Bank records 2. Name as in Bank records 3. Name as in Bank records

This is to confirm that the declaration has been carefully read, understood and made by me/us. I am authorizing the User entity/Corporate to debit my account based on the instruction as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/corporate or the bank where I have authorized the debit.

UTI SMaRT FORM FOR ELECTRONIC FACILITY

(Applicable for KYC complied Individual Investors)



Haq, ek behtar zindagi ka.

DATE: REGISTRATION CHANGE CANCELLATION

ARN	EUIN	Sub ARN Code	Sub Code	MO Code	UTI RM NO.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Upfront commission shall be paid directly by the investor to the AMFI / NISM certified UTI MF registered distributors based on the investors' assessment of various factors including the service rendered by the distributor. I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned or notwithstanding the advice of in-appropriateness, if any, provided by such distributor personnel and the distributor has not charged any advisory fees for this transaction.

*FOLIO / APPLN NO. FOLIO UNDER UTI ULIP#

PAN KYC Complied DATE OF BIRTH OF 1st HOLDER / MINOR

1st HOLDER NAME

I/ We have read and understood the Scheme Information Document, Key Information Memorandum and addenda and agree to abide by the same. I/We hereby authorise UTI MUTUAL FUND and their authorized service providers and my banker, to debit my/our following bank account using the Mandate form. I/We hereby request you to register me/us for availing this facility and carrying out transactions of Purchase/ SIP/Redemption/Switch in my /our above mentioned folio wherever applicable. I/we have read and understood the Terms & Conditions of the facility in which I/we wish to subscribe as available on UTI MF website ([http:// www.utimf.com /customerservice /Pages/default.aspx](http://www.utimf.com/customerservice/Pages/default.aspx)) and also displayed/available at the UFC.

*Mandatory

1st Holder / Guardian as per folio

2nd Unit Holder

3rd Unit Holder

*Folio held in Single and anyone or survivor is only allowed to register- #only renewal contribution can be made using smart form)

UTI SMaRT FORM ACKNOWLEDGEMENT

UTI Mutual Fund, UTI Tower, Bandra-Kurla Complex, Bandra (East), Mumbai - 400 051.



Haq, ek behtar zindagi ka.

Received From

Folio / Application No.

Date

TIME STAMP

The mobile number and email ID provided above will be registered/replaced with the mobile number and email ID in the folio.

Note : All purchases are subject to realisation of Cheques/ receipt of funds.

*CHECK LIST

The Form is complete in all respects.
The form is signed by the holders as per the holding basis
Folio, Mobile Number, email id , PAN and KYC details are submitted.
A Copy of cheque leaf is enclosed.

GUIDELINES TO FILL UTI SMaRT FORM

1. Date: In format DD/MM/YYYY
2. Bank A/c Type: Tick the relevant box
3. Provide CBS Account Number
4. Write name of the bank through which you wish to invest.
5. IFSC / MICR code: Fill respective code
6. Mention Maximum Amount
7. Reference 1: Mention Folio Number
8. Reference 2: Mention Application Number
9. Period: Starting date of UTI SMaRT FORM registration (in format DD/MM/YYYY)
10. Telephone Number
11. Email ID
12. Specimen Signature as Submitted by you with your banker against the particular/given bank account
13. Name: Mention Holder Name as Per Bank Record

UTI SMaRT FORM

(UTI Single Mandate Registration & Transaction Form)



Haq, ek behtar zindagi ka.

UMRN F o r o f f i c e u s e Date

Sponsor Bank Code C I T I O O O P I G W Utility Code C I T I O O O O 2 0 0 0 0 0 0 0 3 7

Tick (✓)
 CREATE
 MODIFY
 CANCEL
 I/We hereby authorize UTI Mutual Fund to debit (tick✓) SB CA CC SB-NRE SB-NRO Other

Bank a/c number

with Bank Name of Customers Bank IFSC or MICR

an amount of Rupees ₹

FREQUENCY Mthly Qtrly H-Yrly Yrly As & when presented DEBIT TYPES Fixed Amount Maximum Amount

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(Applicable for KYC complied Individual Investors)



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7. Reference 1: Mention Folio Number
8. Reference 2: Mention Application Number
9. Period: Starting date of UTI SMaRT FORM registration (in format DD/MM/YYYY)
10. Telephone Number
11. Email ID
12. Specimen Signature as Submitted by you with your banker against the particular/given bank account
13. Name: Mention Holder Name as Per Bank Record