

Sr. No.

## APPLICATION FORM FOR DEBT SCHEMES

DBS CHOLA MONTHLY INCOME PLAN, DBS CHOLA TRIPLE ACE,  
DBS CHOLA FREEDOM INCOME SHORT TERM FUND, DBS CHOLA FLOATING RATE FUND,  
DBS CHOLA LIQUID FUND, DBS CHOLA GILT FUND, DBS CHOLA SHORT TERM FLOATING RATE FUND

**DBS Chola**  
MUTUAL FUND

Investors must read the instructions on page no. 21 before completing this form.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## 1. AGENT INFORMATION

## FOR OFFICE USE ONLY

Agent's Code  
(AMFI registered only)

Sub Agent Code

## 2. EXISTING UNITHOLDER INFORMATION

Folio No.

## 3. UNITHOLDER INFORMATION

Name of First/Sole Applicant	Mr. Ms. M/s.	
Contact Person (In case of non-individual Investors)	Mr. Ms.	
Date of Birth (dd/mm/yyyy)		Telephone: Office <input type="text"/> Resi. <input type="text"/> Mobile <input type="text"/>
Fax.	<input type="text"/>	E-mail <input type="text"/>
*PAN No. (Mandatory if amount invested is Rs. 50,000 or more)	<input type="text"/>	Circle/Ward/District <input type="text"/>
Name of the Second Applicant	Mr. Ms. M/s.	
*PAN (Mandatory if amount invested is Rs. 50,000 or more)	<input type="text"/>	Circle/Ward/District <input type="text"/>
Name of the Third Applicant	Mr. Ms. M/s.	
*PAN No. (Mandatory if amount invested is Rs. 50,000 or more)	<input type="text"/>	Circle/Ward/District <input type="text"/>
Name of the Guardian (In case of minor)	Mr. Ms. M/s.	Date of Birth of Minor <input type="text"/>
Mailing Address of First/Sole Applicant	<input type="text"/>	
	Pin <input type="text"/>	

\*Note: Please note that it is mandatory to mention PAN and to submit a copy of PAN Card of all the Applicants if the amount invested is Rs. 50,000/- or more or else Form 60/61 has to be submitted along with the Application.

## Mode of holding

- ☐ Single  
☐ Joint  
☐ Anyone or Survivor

## Status

- ☐ Individual  
☐ HUF  
☐ Minor through guardian  
☐ Others \_\_\_\_\_
- ☐ Partnership  
☐ NRI/FII  
☐ Body Corporate
- ☐ Society/Club  
☐ Trust

## Occupation (of sole/First Applicant)

- ☐ Service  
☐ Professional  
☐ Business  
☐ Agriculture
- ☐ Student  
☐ Housewife  
☐ Retired  
☐ Others

## 4. BANK ACCOUNT DETAILS (Please note that, as per SEBI Regulations it is mandatory for investors to provide bank account details)

Name of the Bank	<input type="text"/>	Branch	<input type="text"/>
Account No.	<input type="text"/>	Branch Address	<input type="text"/>
Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE	<input type="checkbox"/> FCNR <input type="checkbox"/> NRO	
Account to Account transfer facility for redemptions available : (please tick, any one) <input type="checkbox"/> HDFC Bank <input type="checkbox"/> ICICI Bank <input type="checkbox"/> Citibank* <input type="checkbox"/> SCB* <input type="checkbox"/> IDBI Bank*			

\* available only for DBS Chola Liquid Fund &amp; DBS Chola Short Term Floating Rate Fund

## 5. E-MAIL COMMUNICATION

- a) I/We wish to receive the Account Statement via e-mail instead of physical document ☐ Yes ☐ No  
b) If yes, please specify the frequency ☐ Monthly\* ☐ Weekly\*\* ☐ After Every Transaction  
\* On the first day of the month \*\* On Monday of every week

## 6. For Investors who wish to opt for NOMINATION

Nomination form is enclosed ☐ Yes ☐ No (Please fill up the form on Page No. 20 & submit the same alongwith the Application Form)

## 7. ELECTRONIC CLEARING SERVICES (ECS) FOR DIVIDEND PAYMENTS\*\*

You may choose to receive dividends in your bank account through the Electronic Clearing Service. Unitholders who do not opt for the ECS facility will receive dividends by cheques payable at par/DD.

☐ I/We authorise Chola Mutual Fund to credit my/our dividend through ECS.

The 9-digit MICR Code number of my/our Bank & Branch is:  (the 9 digit code appears on your cheque next to the cheque number)

\*\* Please enclose xerox copy of your cheque leaf.

## 8. For Investors who wish to opt for:

Form is enclosed ☐ SIP ☐ SWP ☐ STP

## ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Sr. No.

DBS CHOLA MUTUAL FUND

Head Office: 27th Floor, Unit 1, World Trade Centre, Centre One, Cuffe Parade, Mumbai-400 005 India.

Date :








Received from Mr./Ms./M/s. \_\_\_\_\_ an application for Units along with details as given below:

Scheme	Plan/Option	Amount	Cheque/DD No.	Cheque Date	Drawn On	Bank	Branch

Please Note: All Purchases are subject to realisation of cheques/demand drafts.

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## 9. INVESTMENT DETAILS

 <b>DBS CHOLA LIQUID FUND</b> <i>An Open-Ended High Liquidity Income Scheme</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Liquid Fund"</b> <input type="checkbox"/> Institutional Plus Plan <input type="checkbox"/> Regular Plan <input type="checkbox"/> Daily Dividend Re-investment Plan (DDRIP) Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Weekly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative
 <b>DBS CHOLA FLOATING RATE FUND</b> <i>An Open-Ended Income Scheme</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Floating Rate Fund"</b> Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative
 <b>DBS CHOLA TRIPLE ACE</b> <i>An Open-Ended Pure Income Scheme</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Triple Ace"</b> <input type="checkbox"/> Regular Plan Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Quarterly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Semiannual Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative <input type="checkbox"/> Bonus
 <b>DBS CHOLA FREEDOM INCOME SHORT TERM FUND</b> <i>An Open-Ended Short Term Income Fund</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Freedom Income Short Term Fund"</b> <input type="checkbox"/> Institutional Plus Plan <input type="checkbox"/> Regular Plan Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Quarterly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Semiannual Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative <input type="checkbox"/> Bonus
 <b>DBS CHOLA GILT FUND</b> <i>An Open-Ended dedicated Gilts (Govt Securities) Scheme</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Gilt Fund"</b> <input type="checkbox"/> Investment Plan Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Quarterly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative
 <b>DBS CHOLA MONTHLY INCOME PLAN</b> <i>An Open-Ended Income Scheme with no assured returns</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Monthly Income Plan"</b> <input type="checkbox"/> Regular Plan Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Monthly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Quarterly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative <input type="checkbox"/> Bonus
 <b>DBS CHOLA SHORT TERM FLOATING RATE FUND</b> <i>An Open-Ended High Liquidity Income Scheme</i>	The Cheque/DD should be drawn favouring <b>"DBS Chola Short Term Floating Rate Fund"</b> Cheque/DD no. _____ Drawn on (Bank/Branch) _____ Cheque/DD Date _____ DD Charges if any _____ Amount in words (Rs.) _____ Amount in Figures (Rs.) _____	<b>Investment Option</b> <input type="checkbox"/> Daily Dividend <input type="radio"/> Reinvest <input type="checkbox"/> Weekly Dividend <input type="radio"/> Reinvest <input type="checkbox"/> Monthly Dividend <input type="radio"/> Payout <input type="radio"/> Reinvest <input type="checkbox"/> Cumulative

In case the investment detail is not ticked, the default plan would be **Regular** & option would be **Cumulative**.  
 In case of **Dividend** default option would be **Reinvestment** unless otherwise specified.

## 10. DECLARATIONS & SIGNATURE(S)

I/We have read and understood the contents of the offer document of the scheme(s) of DBS Chola Mutual Fund. I/We hereby apply to the trustee of DBS Chola Mutual Fund for units of respective schemes of DBS Chola Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant scheme(s). I/We hereby declare and confirm that the amount invested in the scheme(s) indicated above is in no way in contravention of any Act, rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/We confirm that the funds invested in the Scheme, legally belong to me/us. If the Fund is not satisfied with regard to the completion of the "Know Your Customer" process for me/us, I/We hereby authorize the Mutual Fund to redeem the funds invested in the Scheme at the applicable NAV prevailing on the date of such redemption and initiate such other action that may be required by the Law.

### Applicants other than Individuals/HUF:

I/We certify that as per the Memorandum and Articles of Association of the Company, bye-laws, trust deed, Partnership Deed and resolutions passed by the Company / firm / trust. I/We are authorized to enter into this transaction for and on behalf of the Company / firm / trust.

Please (✓) ☐ Yes ☐ No

For NRIs only: I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External/Non-Resident Ordinary/FNDR account.

I/We confirm that details provided by me/us are true and correct.

<b>SIGNATURE(S)</b>	First / Sole Applicant	
	Second Applicant	
	Third Applicant	

## DBS CHOLAMANDALAM ASSET MANAGEMENT LIMITED - BRANCHES

★ Ahmedabad 9898046210 ★ Bangalore 41811055/41811056 • Baroda 9898598644

★ Chandigarh 9815884100 ★ Chennai 25307405 ★ Cochin 9895553190 ★ Coimbatore 9894945345 ★ Hyderabad 55737001

• Jaipur 9829422699 ★ Kolkata 22837370 • Lucknow 9839958537 • Madurai 9842117174 • Mangalore 9342255286

★ Mumbai 66574000/22025074 ★ New Delhi 23353048 ★ Pune 25510468 • Salem 9841955359 • Trichy 9865966013

★ Applications would be accepted only at these locations.

**Toll Free No.: 1-800-22-2300**