

Common Application Form for Debt Schemes



HSBC Mutual Fund

Please read the instructions before filling the Application Form

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units)

Application No. : W

Distributor / Broker ARN	Sub-Broker Code	Registrar Serial No.
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1 EXISTING UNIT HOLDER INFORMATION (Please fill in your Folio No. below. Please furnish PAN details in Section 2 & 3 and then proceed to section 4)

Please note that applicant details and mode of holding will be as per existing Folio Number.

Folio No. Name of Sole / First Unit Holder

2 SOLE / FIRST APPLICANT'S PERSONAL DETAILS (Please fill in Block Letters use one box for one alphabet leaving one box blank between two words)

Name Mr Ms M/s

Date of Birth PAN** Enclosed ☐ PAN proof OR ☐ Form 60 ☐ Form 61 (please ☒)

Gender (please ☒) ☐ Male ☐ Female Please attach KYC acknowledgement letter.

Guardian Name (if Sole / First applicant is a Minor) **Contact Person** (in case of Non-individual Investors only) (PAN not required for contact person)

Mr Ms M/s

Date of Birth PAN** Enclosed ☐ PAN proof OR ☐ Form 60 ☐ Form 61 (please ☒)

Gender (please ☒) ☐ Male ☐ Female Please attach KYC acknowledgement letter.

Nationality Country of Residence

Address for Correspondence [P.O. Box Address is not sufficient]

City Pin Code
State Country

Contact Details

Phone O Extn. Fax
R Mobile

☐ I/We wish to receive updates via SMS on my mobile (Please ☒)

e-mail

I/We wish to receive the following documents via e-mail in lieu of physical document(s) (please ☒) ☐ Account Statement ☐ All other Statutory Communications ☐ Marketing Updates

Overseas Address (Mandatory in case of NRI / FII applicant in addition to mailing address)

City
State Country Zip Code

Status (please ☒) ☐ Resident Individual ☐ Minor ☐ Partnership ☐ Company ☐ HUF ☐ FII ☐ NRI ☐ Trust ☐ Society ☐ AOP / BOI ☐ Others

Occupation of Sole / First Applicant (please ☒) ☐ Private Sector Service ☐ Public Sector / Government Service ☐ Business ☐ Professional
☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others (Please specify)

3 JOINT APPLICANTS' DETAILS

Second Applicant

Name Mr Ms M/s

Date of Birth PAN** Enclosed ☐ PAN proof OR ☐ Form 60 ☐ Form 61 (please ☒)

Gender (please ☒) ☐ Male ☐ Female Please attach KYC acknowledgement letter.

Third Applicant

Name Mr Ms M/s

Date of Birth PAN** Enclosed ☐ PAN proof OR ☐ Form 60 ☐ Form 61 (please ☒)

Gender (please ☒) ☐ Male ☐ Female Please attach KYC acknowledgement letter.

Mode of Holding (please ☒) ☐ Single OR ☐ Joint OR ☐ Anyone or Survivor

PoA Holder Details (If the investment is being made by a Constituted Attorney please furnish Name and PAN of PoA holder)

Name Mr Ms M/s

Date of Birth PAN** Enclosed ☐ PAN proof OR ☐ Form 60 ☐ Form 61 (please ☒)

Gender (please ☒) ☐ Male ☐ Female Please attach KYC acknowledgement letter.

** PAN is Mandatory for investments of Rs. 50,000 or more or attach a Form 60 / 61 duly filled up with address proof as specified therein (see instruction 2c).

ACKNOWLEDGEMENT SLIP (To be filled by the investor)

Application No. : W

Received from Mr. / Ms. / M/s

an application for Units of ☐ HIF ☐ HGF ☐ HMIP ☐ HFRF ☐ HCF ☐ HLPF Plan

Option Sub-option alongwith Cheque / DD No.

Dated Drawn on (Bank)

Amount (Rs.)

Signature, Stamp & Date

[illegible]

Scheme Name	<input type="checkbox"/> HIF <input type="checkbox"/> HGF <input type="checkbox"/> HMIP <input type="checkbox"/> HFRF <input type="checkbox"/> HCF <input type="checkbox"/> HLPF	Option	<input type="checkbox"/> Regular <input type="checkbox"/> Institutional <input type="checkbox"/> Institutional Plus
Plan		Dividend Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
Sub-option	<input type="checkbox"/> Growth* <input type="checkbox"/> Dividend Reinvestment <input type="checkbox"/> Dividend Payout		

SYSTEMATIC INVESTMENT PLAN (SIP) is available in all Schemes of HSBC Mutual Fund. Investors can opt for SIP by filling up the SIP Application Form and SIP Auto Debit Form which is available with HSBC Investors Service Centres and CAMS Collection Centres.

Investment Amount (Rs.)	<input type="text"/>	DD charges (Rs.)	<input type="text"/>	Net Amount (Cheque / DD amount) (Rs.)	<input type="text"/>
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Cheque /
DD* No. [] [] [] [] [] [] Dated [] [] [] [] [] A/c.
No. [] [] [] [] [] []

[illegible]

The details of the bank account provided above pertain to my / our own bank account in my / our name ☐ Yes ☐ No. If No, my relationship with the bank account holder is ☐ Spouse ☐ Child ☐ Parent ☐ Relative ☐ Sibling ☐ Friend ☐ Others. **Application Form without this information is liable to be rejected.**

I/We _____ and _____ * do hereby nominate the undermentioned nominee to receive the units allotted to my / our credit in my Folio in the event of my / our death. (* strike out which is not applicable)

[illegible][illegible][illegible]

Signature of Guardian

☐ Daily NAV ☐ Weekly Market Review ☐ Event Updates

Would you like a PIN assigned? ☐ (ref. instruction 2e)

Having read and understood the contents of the Offer Document(s) and Addenda of the Scheme(s) issued till date, I / We hereby apply to the Trustees of HSBC Mutual Fund for units of the Scheme / Plan / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We have understood the details of the Scheme and I / We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We hereby authorise HSBC Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my/our bank(s) / HSBC Mutual Fund's Bank(s) and / or Distributor / Broker / Investment Advisor and to verify my / our bank details provided by me / us. *I/We confirm that I am/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 / FCNR Account. I / We confirm that the details provided by me / us are true and correct. I / We hereby declare that the amount being invested by me/us in the Scheme(s) of HSBC Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.

Date:

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SIGNATURES

Sole / First Applicant

Second
Applicant

Third
Applicant

HSBC MUTUAL FUND INVESTOR SERVICE CENTRES : ● **Ahmedabad :** Tel: 9898377319, 9898377321 ● **Bangalore :** Tel: 080 41186519 ● **Chandigarh :** Tel: 0172 5008119/21 ● **Chennai :** Tel: 044 42008719 ● **Coimbatore :** Tel: 9894477319, 9893477321 ● **Hyderabad :** Tel: 040 66674719/21 ● **Indore :** Tel: 9893477319, 9893477321 ● **Jaipur :** Tel: 9928037319, 9928037321 ● **Kochi :** Tel: 9895477319, 9895477321 ● **Kolkata :** Tel: 033 22139919 ● **Lucknow :** Tel: 9936797319, 9935097321 ● **Mumbai :** Tel: 022 66668819 ● **New Delhi :** Tel: 011 41490719 ● **Pune :** Tel: 020 - 26001119 / 21 ● **Vadodara :** Tel: 9898377319, 9898377321

CAMS COLLECTION CENTRES: Tel.: 1-800-425-2267 *Please contact the nearest Investor Service Centre for an updated list of Official Points of Acceptance and details of HSBC Investor Service Centres and CAMS Investor Service Centres. * ISCs will also be collection centres.*