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# COMMON APPLICATION FORM FOR DEBT AND LIQUID SCHEMES

**ING Vysya**  
MUTUAL FUND

Investors must read the instructions before completing this form.

1. AGENT INFORMATION		2. EXISTING UNIT HOLDER INFORMATION	FOR OFFICE USE ONLY
Agent's Code/Name AMFI registered members only)	Sub Agent Code	Folio No.	Receipt Date & Time

## 3. UNIT HOLDER INFORMATION (Please fill in BLOCK Letters)

Name of First/Sole Applicant Contact Person (In case of non-individual investors) (Refer instructions) Name of the Guardian (In case of minor) Mailing Address of First/Sole Applicant	Mr.	Ms.	Mrs.		Date of Birth		MIN No.											
	Mr.	Ms.	Mrs.															
PAN No. (Refer instructions) (Compulsory for application of Rs. 50,000/- & Above) Telephone	Mr.	Ms.	Mrs.		Date of Birth of Minor		MIN No. of guardian											
	Mr.	Ms.	Mrs.															
Name of Second Applicant Mailing Address of Second Applicant	Address 1																	
	Address 2																	
PAN No. (Refer instructions) (Compulsory for application of Rs. 50,000/- & Above) Telephone	State				Country				PINCODE									
									Circle/Ward/District									
Name of Third Applicant Mailing Address of Third Applicant	Residence				Office				Fax				Mobile				Email	
PAN No. (Refer instructions) (Compulsory for application of Rs. 50,000/- & Above) Telephone	Mr.	Ms.	Mrs.		Date of Birth		MIN No.											
	Mr.	Ms.	Mrs.															
Overseas Address (in case of NRIs/FILs) Name of Power of Attorney	Address																	
	State																	
Telephone	State				Country				PINCODE									
									Circle/Ward/District									
PAN No. (Refer instructions) (Compulsory for application of Rs. 50,000/- & Above) Telephone	Residence				Office				Fax				Mobile				Email	
Overseas Address (in case of NRIs/FILs) Name of Power of Attorney	Mr.	Ms.	Mrs.		Date of Birth		MIN No.											
	Mr.	Ms.	Mrs.															
Telephone	Address																	
	State																	
PAN No. (Refer instructions) (Compulsory for application of Rs. 50,000/- & Above) Telephone	State				Country				PINCODE									
									Circle/Ward/District									
Overseas Address (in case of NRIs/FILs) Name of Power of Attorney	Residence				Office				Fax				Mobile				Email	
Telephone	Mr.	Ms.	Mrs.		Date of Birth		MIN No.											
	Mr.	Ms.	Mrs.															
PAN No. (Refer instructions) (Compulsory for application of Rs. 50,000/- & Above) Telephone	Address																	
	State																	
Overseas Address (in case of NRIs/FILs) Name of Power of Attorney	State				Country				PINCODE									
									Circle/Ward/District									
Telephone	Residence				Office				Fax				Mobile				Email	

\*\* In case of more than one applicant, if choice is not indicated the mode of holding will be treated as joint. Application form without nationality details is liable to be rejected.

<b>Mode of holding** (Please ✓)</b> <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor		<b>Status (Please ✓) (Mandatory)</b> <input type="checkbox"/> Resident Individual <input type="checkbox"/> Partnership Firm <input type="checkbox"/> Proprietorship		<input type="checkbox"/> HUF <input type="checkbox"/> Bank / F.I. <input type="checkbox"/> Company		<input type="checkbox"/> Society/Club <input type="checkbox"/> NRI Non-Repatriable <input type="checkbox"/> On behalf of minor		<input type="checkbox"/> NRI Repatriable <input type="checkbox"/> Trust <input type="checkbox"/> Others		<b>Nationality</b> First Applicant Second Applicant Third Applicant	

Application form without nationality details is liable to be rejected.

<b>Occupation (of sole/First Applicant) (Please ✓) (Mandatory)</b> <input type="checkbox"/> Teacher <input type="checkbox"/> Indian Private Company Employee						<input type="checkbox"/> Agriculture <input type="checkbox"/> Politically Exposed Person						<input type="checkbox"/> Housewife <input type="checkbox"/> Other Business						<input type="checkbox"/> Jeweller <input type="checkbox"/> Other Professional						<input type="checkbox"/> Student <input type="checkbox"/> Other Service						<input type="checkbox"/> Retired					
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<b>4. ANNUAL INCOME OF SOLE/FIRST APPLICANT (Please ✓) (INDIVIDUAL)</b> : <input type="checkbox"/> Less than 5 Lacs <input type="checkbox"/> 5 Lacs - 25 Lacs <input type="checkbox"/> 25 Lacs - 1 Crore <input type="checkbox"/> 1 Crore - 5 Crore <input type="checkbox"/> 5 Crore & Above <b>(NON-INDIVIDUAL)</b> : <input type="checkbox"/> < 50 Lacs <input type="checkbox"/> 50 Lacs - 2.5 Crore <input type="checkbox"/> 2.5 Crore - 10 Crore <input type="checkbox"/> 10 Crore - 50 Crore <input type="checkbox"/> 50 Crore & Above
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## 5. BANK ACCOUNT DETAILS (Please note that, as per SEBI Regulations it is mandatory for investors to provide bank account details)

Name of the Bank											Branch										
Account No.											Branch Address										
Account Type	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO										City										
MICR Code (9 Digit)											IFSC Code (11 Digit)										
If the Bank Account is held with any of the following Bank, the payment of Dividend/Redemption would be made directly into your Bank Account Standard Chartered Bank, HDFC Bank, UTI Bank, ING Vysya Bank Ltd., HSBC Ltd., Citibank N. A., ICICI Bank Ltd., IDBI Bank Ltd., Saraswat Co-op. Bank, Deutsche Bank, Indusind Bank, Centurion Bank. ING Vysya Mutual Fund retains the right to use any other mode of payment as deemed appropriate. I/We understand that ING Vysya Mutual Fund shall not be responsible if the direct credit could not be carried out because of the incomplete or incorrect information. If "mandatory details" are not provided, application is liable to be rejected.																					

<b>6. E-MAIL COMMUNICATION (Please ✓)</b> a) I/We wish to receive the Account Statement via e-mail instead of physical document <input type="checkbox"/> Yes <input type="checkbox"/> No b) If yes, please specify the frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly E-mail Address										
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<b>7. ATTACHMENT WITH THE APPLICATION FORM :</b> PAN Card copy attached <input type="checkbox"/> Yes <input type="checkbox"/> No • Form 60 or 61 <input type="checkbox"/> Yes <input type="checkbox"/> No • Proof of Address <input type="checkbox"/> Yes <input type="checkbox"/> No • MIN Acknowledgement <input type="checkbox"/> Yes <input type="checkbox"/> No
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**ING Vysya**  
MUTUAL FUND

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

**ING Vysya Mutual Fund**  
101 Windsor, Off. C.S.T. Road, Vidyanaagri Marg, Kalina, Santacruz (East), Mumbai 400098.

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

Name of the Scheme	Option	Amount Invested	Cheque/DD No.	Cheque/DD Date	Bank	Branch

**Please Note:** All Purchases are subject to realisation of cheque(s)/demand draft(s).

Collection Centre Date & Stamp
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# 8. INVESTMENT DETAILS (Third party cheques are not allowed)

Choice of Scheme (Please ✓ the ☐ to select plan and option, ✓ the ☐ to select dividend option)

<b>ING VYSYA LIQUID FUND</b>	The Cheque/DD should be favouring "ING Vysya Liquid Fund" Plan <input type="checkbox"/> Regular <input type="checkbox"/> Institutional <input type="checkbox"/> Super-Institutional
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA FLOATING RATE FUND</b>	The Cheque/DD should be favouring "ING Vysya Floating Rate Fund"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA INCOME FUND SHORT TERM PLAN</b>	The Cheque/DD should be favouring "ING Vysya Income Fund - Short Term Plan"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA INCOME FUND</b>	The Cheque/DD should be favouring "ING Vysya Income Fund"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA SELECT DEBT FUND</b>	The Cheque/DD should be favouring "ING Vysya Select Debt Fund"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA MIP FUND PLAN A</b>	The Cheque/DD should be favouring "ING Vysya MIP Fund - Plan A"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA MIP FUND PLAN B</b>	The Cheque/DD should be favouring "ING Vysya MIP Fund- Plan B"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA GILT FUND PF DYNAMIC PLAN</b>	The Cheque/DD should be favouring "ING Vysya GILT Fund-PF Dynamic Plan"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA GILT FUND REGULAR PLAN</b>	The Cheque/DD should be favouring "ING Vysya GILT Fund - PF Dynamic Plan"
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
<b>ING VYSYA LIQUID PLUS FUND</b>	The Cheque/DD should be favouring "ING Vysya Liquid Plus Fund" Plan <input type="checkbox"/> Regular <input type="checkbox"/> Institutional
<b>Choice of Option</b>	<input type="checkbox"/> Growth Option <input type="checkbox"/> Bonus Option <input type="checkbox"/> Daily Dividend Reinvestment Option <input type="checkbox"/> Weekly Dividend Reinvestment Option <input type="checkbox"/> Monthly Dividend Reinvestment Option <input type="checkbox"/> Monthly Dividend Payout Option <input type="checkbox"/> Quarterly Dividend Reinvestment Option <input type="checkbox"/> Quarterly Dividend Payout Option

# INVESTMENT DETAILS (Third party cheques are not allowed)

Cheque/DD No. \_\_\_\_\_ Cheque/DD Date \_\_\_\_\_ Account Type ☐ NRI ☐ NRO ☐ FCNR ☐ SAVINGS

1) Gross Amount Paid (a) \_\_\_\_\_ 2) DD charges (b) \_\_\_\_\_ 3) Net Amount Invested (c) (a-b=c): (figures) \_\_\_\_\_

(Words) \_\_\_\_\_ Drawn on Bank \_\_\_\_\_ Branch \_\_\_\_\_

I/We undertake that the detail of the payment instrument mentioned above pertain to my/our own bank account in my/our name and is not a third party cheque except guardian incase of minor. The AMC reserves the right to reject the applicaiton in case of third party cheque.

# 9. NOMINATION DETAILS

I/We hereby nominate the under mentioned nominee to receive the amount to my/our credit on my/our death. I/We also understand that all payments and settlements made to such nominee shall be a valid discharge by the AMC / Mutual Fund / Trustees.

## Name and Address of Nominee

Name : \_\_\_\_\_ Address : \_\_\_\_\_

Date of Birth (to be furnished in case the nominee is minor)\* \_\_\_\_\_

\*Name of Guardian : \_\_\_\_\_ Address of Guardian : \_\_\_\_\_

Relationship with Minor : \_\_\_\_\_ Signature of Guardian : \_\_\_\_\_

# 10. For Investors who wish to opt for SIP/SWP/STP, please refer to "Facilities Form" overleaf

Systematic Transfer Plan (STP)/Systematic Investment Plan (SIP)/Systematic Withdrawal Plan (SWP) form is enclosed ☐ Yes ☐ No

# 11. DECLARATIONS & SIGNATURE(S)

I/We have read and understood the contents of the Offer Document of the scheme(s) of ING Vysya Mutual Fund. I/ We hereby apply to the Trustee of ING Vysya Mutual Fund for Units of respective schemes of ING Vysya Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s).

\*I/We confirm that I am/We are Non-resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from my/our Non-resident External/Ordinary Account/FCNR/NRSR Account.

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 hereby agree to provide the AMC with necessary additional proofs/documents that may be required for the purpose of compliance with Prevention of Money Laundering Act.

\* Applicable to NRIs only

First / Sole Applicant	
Second Applicant	
Third Applicant	

For any queries please contact customer care no. 1800 22 0042 or SMS ING to 7333

or

email us at [information@ingvysyamf.com](mailto:information@ingvysyamf.com)

or

visit us at [www.ingvysyamf.com](http://www.ingvysyamf.com)