

Common Application Form Debt Funds



SUNDARAM BNP PARIBAS
MUTUAL

SERIAL No. **D**

BROKER/AGENT NAME & CODE	SUB-BROKER'S NAME & CODE	COLLECTING CENTRE STAMP & SIGN	DATE & TIME OF RECEIPT	REGISTRAR'S SERIAL NO.

1. Existing Unit holder

- a. Are you making a purchase into an existing folio? (Please ✓) ☐ Yes ☐ No. Folio Number
(If yes, Please note that investment details and mode of holding will be as per existing folio number. • If you have provided a Folio Number please fill in only Section 2a and then proceed to Section 4.)
- b. Do you wish to receive a consolidated account statement? (Please ✓) ☐ Yes ☐ No.
Which folio number do you wish to consolidate under ? Folio Number
(Only folios where the signatories appear in the same order may be consolidated)

2. Unit holder Information (Write in block letters . Leave space between words)

a. Full Name of First/Sole Applicant (as it appears in your bank account) Salutation ☐ Mr. ☐ Ms. ☐ Dr. ☐ Prof

PAN No. Investor MIN No. PA holder MIN No. Date of Birth

Full Name of ☐ Father ☐ Husband ☐ Guardian (in the case of minor) ☐ Contact person (in the case of Corporate) please tick the applicable Salutation ☐ Mr. ☐ Ms. ☐ Dr. ☐ Prof

Full Name of Second Applicant Salutation ☐ Mr. ☐ Ms. ☐ Dr. ☐ Prof

PAN No. Investor MIN No. PA holder MIN No.

Full Name of Third Applicant Salutation ☐ Mr. ☐ Ms. ☐ Dr. ☐ Prof

PAN No. Investor MIN No. PA holder MIN No.

As per SEBI regulations, PAN number must be provided for all unit holders, if the purchase amount is Rs.50,000/- and above, failing which the transaction is liable to be rejected. Please also provide a copy of the PAN card for validation. In case you are not having a PAN then please furnish your declaration in Form 60.

b. Mode of Holding ☐ Single ☐ Joint ☐ Anyone or Survivor (default option – anyone or survivor)

c. Mailing Address ☐ Home ☐ Office (P.O.Box Address is not sufficient)

Location PIN

City

State Country

d. Mailing Address ☐ Home ☐ Office (Overseas address in case of NRIs/FILs)

Location PIN

City

State Country

e. Contact Particulars

Tel: Office Residence

Fax E-mail

Contact Person's Name.....(for non-individuals)

f. Are you applying as ☐ Individual ☐ Partnership ☐ Public Ltd. Co. ☐ On behalf of Minor ☐ HUF ☐ Proprietorship

☐ Trust ☐ Pvt. Ltd. Co. ☐ Society ☐ NRI ☐ Repatriation ☐ Non-Repatriation ☐ Others

g. Do you want a PIN assigned to you? (This PIN will allow you access to your account via the internet) ☐ Yes ☐ No

h. Do you want the account statement ☐ Through e-mail ☐ Post

3. Payment of Dividends and Redemption

Sundaram BNP Paribas Mutual Fund will endeavour to use Warrant/Draft or Direct Credit payment of dividend/redemption but retains the right to use any other mode of payment as deemed appropriate. You may select either Direct Credit option, Warrant or ECS for receiving dividends/redemption in your bank account. Please read Instructions (section 4).

☐ Direct Credit ☐ Warrant/Draft ☐ ECS

Direct Credit of Dividend and Redemption : If you have an account in any of the following banks you can opt for direct credit of dividend and redemption to your bank account.

I authorise Sundaram BNP Paribas Mutual Fund to credit my dividends/redemption amount to my account maintained with the following Bank (Please ✓)

☐ ABN Amro Bank ☐ Citi Bank ☐ ICICI Bank ☐ IDBI Bank ☐ HDFC Bank ☐ HSBC Bank ☐ Kotak Mahindra Bank ☐ Standard Chartered Bank ☐ UTI Bank ☐ Yes Bank

Please attach copy of a Cheque leaf for ECS registration



SUNDARAM BNP PARIBAS
MUTUAL

Second Floor, 46 Whites Road,
Chennai - 600 014
Ph : (044) 28583362, 28583367, 28585606

Acknowledgement

Common Application Form

SERIAL No. **D**

Received From Mr./Mrs./Ms.

Address

An application for units of ☐ SBNPPBS ☐ SBNPPPI ☐ SBNPPGILT ☐ SBNPPMF ☐ SBNPPSD ☐ SBNPPMIP ☐ SBNPPFRF

All future communication in connection with the application should be addressed to the Registrar Computer Age Management Services (P) Ltd., 'Rayala Towers' First Floor, 781-785 Anna Salai, Chennai - 600 002. Tel: (044) 28521596, 28520516 quoting full name of Sole/First applicant, Application Serial No., Date, Name of the Bank and Branch or Centre where it was lodged.

ISC's Signature & Stamp

Cheques/Drafts are subject to realisation

SERIAL No. **D****4. Bank Account Details** Please note it is mandatory as per SEBI regulations for all investors to provide bank account details

Please write the application Serial Number on the reverse of the Cheque/Demand Draft. All communication and payments will be made to the first applicant or to the Karta in case of HUF.

Name of your Bank

Branch / Payable Location

Your Account Number

Bank Address

Account Type ☐ Current ☐ Savings ☐ Cash Credit ☐ NRE ☐ NRO ☐ Others

Please note that cash investments will not be accepted. On the reverse of the Cheque/DD please indicate the name of the investor, scheme and option opted for as well as the application number.

5. Investments Opted forYou can indicate investment option. If you do not indicate an option for investments in the scheme, the Mutual Fund will buy you into the default option of the scheme. For default option, please refer to section 5 of the instructions. **Please issue a separate Cheque/Demand Draft for each investment.****SBNPPBS****Sundaram BNP Paribas Bond Saver**☐ Regular ☐ Institutional

Amount

DD Charges

Net Amount

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

SBNPPIP**Sundaram BNP Paribas Income Plus**

Amount

DD Charges

Net Amount

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

SBNPPGILT**Sundaram BNP Paribas Gilt Fund**

Amount

DD Charges

Net Amount

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

SBNPPMF**Sundaram BNP Paribas Money Fund**☐ Regular ☐ Institutional ☐ Super Institutional

Amount

DD Charges

Net Amount

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

SBNPPSD**Sundaram BNP Paribas Select Debt**☐ Dynamic Asset Plan ☐ Short Term Asset Plan

Amount

DD Charges*

Net Amount*

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

SBNPPMIP**Sundaram BNP Paribas Monthly Income Plan**

Amount

DD Charges*

Net Amount*

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

SBNPPFRF**Sundaram BNP Paribas Floating Rate Fund**

Amount

DD Charges*

Net Amount*

Chq/DD No.

Date

Bank & Branch

Net Amount In words.....

*Please note DD charges will be adjusted by the fund only for the regular plan. Refer section 5 of instructions.

Available only for dividend re-investment option in Short Term Plan-Institutional Option. # Available only in Long Term Plan. \$ Available only in Long Term Plan-Regular Option

Investment Plan (please ✓)☐ Growth ☐ Div. Payout ☐ Div. Re-investment☐ Bonus**Dividend Periodicity** (please ✓)☐ Quarterly ☐ Half-yearly ☐ Annual**Investment Plan** (please ✓)☐ Growth ☐ Div. Payout ☐ Div. Re-investment**Investment Plan** (please ✓)☐ Growth ☐ Div. Payout ☐ Div. Re-investment**Investment Plan** (please ✓)☐ Growth ☐ Div. Re-investment ☐ Div. Payout**Dividend Periodicity** (please ✓)☐ Daily ☐ Weekly ☐ Fortnightly ☐ Monthly*☐ Quarterly

*Monthly payout option introduced w.e.f. 13/10/2005

Investment Plan (please ✓)☐ Growth ☐ Div. Payout ☐ Div. Re-investment**Dividend Periodicity** (please ✓)☐ Weekly* ☐ Fortnightly* ☐ Monthly**☐ Quarterly ☐ Half-yearly ☐ Annual

*only in Short Term Asset Plan Div. Re-investment

**Only for re-investment

Investment Plan (please ✓)☐ Growth ☐ Div. Payout ☐ Div. Re-investment**Dividend Periodicity** (please ✓)☐ Quarterly ☐ Half-yearly ☐ Monthly☐ Short Term Plan☐ Regular☐ Institutional☐ Long Term Plan☐ Regular☐ Institutional**Investment Option** (please ✓)☐ Growth ☐ Div. Re-investment ☐ Div.Payout**Dividend Frequency**☐ Daily* ☐ Weekly* ☐ Monthly ☐ Quarterly#☐ Half-yearly\$ ☐ Annual\$**6. Nomination (available only for individuals)**I/We and
..... do hereby nominate the person more particularly
described hereunder on the day of in
respect of the units bearing Folio No./Application (* strike out which is not
applicable)**Name and Address of the Nominee**

Name:

Address:.....
.....Date of Birth:..... (to be
furnished in case the Nominee is a minor)

(*) The Nominee is a minor whose guardian is.....

Address of the Guardian.....

Signature of the guardian

7. Proof of Identity☐ Passport No.☐ Driving Licence☐ Voter ID Card**8. Declaration and Signatures**

The Trustees

Sundaram BNP Paribas Mutual Fund

Having read and understood the contents of the Offer Document(s) of the scheme(s), I/we
hereby apply for units of Sundaram BNP Paribas Mutual Fund scheme(s) as indicated in
Section 5 above and agree to abide by the terms, conditions, rules and regulations of the
scheme(s). I/We have not received nor been induced by any rebate or gifts, directly or
indirectly in making this investment.

Applicable to NRIs only:

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 normal banking channels or from funds in
my/our Non-Resident External/Ordinary Account/FCNR Account.Please tick ☐ Yes ☐ NoIf yes ☐ Repatriation basis ☐ Non-Repatriation basis**SIGNATURES**

1st Applicant

2nd Applicant

3rd Applicant

Scheme Name	SBNPPBS	SBNPPIP	SBNPPGILT	SBNPPMF	SBNPPSD	SBNPPMIP	SBNPPFRF
Cheque / DD No.							
Date							
Drawn on (Name of Bank and Branch)							
Amount in Rupees							