

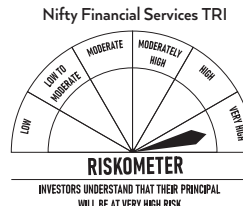
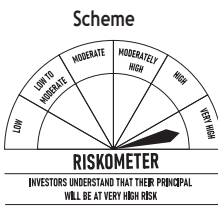
PRODUCT LABELLING & SUITABILITY

Riskometer

This scheme is suitable for investors who are seeking*

- Long term capital growth
- Investment in equity and equity related securities of banking and financial services companies

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



NEW INVESTOR APPLICATION FORM

Please read Product labeling details available on cover page and instructions before filling this Form

Distributor / RIA / PMRN Name and ARN / Code Sub Broker ARN & Name Sub Broker/Branch/RM Internal Code EUIN (Refer note below) For Office use only

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. Commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. I am a First Time Investor in Mutual Fund Industry. I am an Existing Investor in Mutual Fund Industry.

Sole / First Applicant's Signature-Mandatory

1. FIRST APPLICANT'S DETAILS

Name of First Applicant (As per PAN) (Refer Instructions) _____ **Date of Birth** (1st Appl / Minor) (attach proof) DD / MM / YYYY

Name of Guardian (if minor)/POA/Contact Person (As per PAN) (Refer Instructions) _____ **Guardian is:** Father Mother Court Appointed **Date of Birth** (Guardian) DD / MM / YYYY

Existing Folio _____ **PAN** (1st Appl / Guardian) _____

CKYC - KIN _____ **PAN of POA** _____ **KYC attached**

2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS (As per KYC records) NRI Investors should mention their Overseas address (Refer instructions).

Email ID (in capital) _____ **Address Type (Mandatory)**

Mobile +91 _____ **Tel** (STD Code) _____ a. Residential & Business

Contact details belong to family due to investor being, b. Residential

Self Spouse Dependent Child Dependent Parent Dependent Sibling Guardian In case of Minor c. Business

Address _____ d. Registered Office

Landmark _____

City _____ **Pin Code (Mandatory)** _____

3. KYC DETAILS (Mandatory)

3a. Status of Sole/1st Applicant (Please tick ✓) Indian Resident Individual Minor (Resident) Minor (Repatriable) Minor (Non Repatriable) NRI (Repatriable) NRI (Non Repatriable) Sole Proprietorship HUF - Indian HUF - NR Partnership Firm Limited Partnership (LLP) Public Ltd. Co. Private Ltd. Co. Body Corporate Bank FIs Insurance Companies Government Body AOP/BOI NPS Trust Provident Fund Superannuation/Pension Fund Gratuity Fund Mutual Fund FII / FPI-Category I/II/III Others _____

Are you a Non-Profit Organization constituted and registered as a Trust or Society under Societies Registration Act, 1860 for religious or charitable purpose as referred to in Clause (15) of Section 2 of the Income Tax Act, 1961, or a company registered under Section 8 of the Companies Act, 2013. Yes, our NPO Reg. No is _____ No (Mandatory)

3b. Occupation Details (Please tick ✓) Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife Student Forex Dealer Others _____ (Please specify)

3c. Gross Annual Income (Please tick ✓) Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 crore >1 crore

Net-worth in (Mandatory for Non-Individuals) ₹ _____ as on DD / MM / YYYY (Not older than 1 year)

3d. For Individuals (Please tick ✓) Not Applicable I am Politically Exposed Person I am Related to Politically Exposed Person

4. JOINT APPLICANTS (IF ANY) DETAILS

Mode of Holding (Please tick ✓) Joint (Default) Anyone or Survivor **Date of Birth** DD / MM / YYYY

2nd Applicant Name _____ **PAN** _____ **CKYC - KIN** _____

a. Occupation Details (Please tick ✓) Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife Student Forex Dealer Others _____ (Please specify)

b. Gross Annual Income (Please tick ✓) Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 crore >1 crore

c. Others (Please tick ✓) Not Applicable Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)

3rd Applicant Name _____ **Date of Birth** DD / MM / YYYY

PAN _____ **CKYC - KIN** _____

a. Occupation Details (Please tick ✓) Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife Student Forex Dealer Others _____ (Please specify)

b. Gross Annual Income (Please tick ✓) Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 crore >1 crore

c. Others (Please tick ✓) Not Applicable Politically Exposed Person (PEP) Related to a Politically Exposed Person (PEP)

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

DSP MUTUAL FUND

Received from _____ an application for purchase of units. Subject to verification and funds realization.

Scheme	Cheque no.	Amount
DSP Banking & Financial Services Fund		

