

Distributor Name & ARN No.	Sub-Broker Code	Employee Unique Identification No.*	RIA Name & RIA Code*	Date & Time of Receipt

\*Purpose of EUIN is to capture the identification of the sales person/employee/relationship manager of the distributor interacting with the investor, irrespective of whether the transaction is "Execution only" or "Advisory". However, in case of any exceptional cases where there is no such interaction, the investor can keep EUIN box blank and sign the following declaration;  
I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.  
#I/ We hereby give my/ our consent to share/ provide transaction data feed/ unit holding in respect of my/ our investments under Direct Plan to the above mentioned RIA.

First Unitholder/ Guardian/ POA	Second Unitholder	Third Unitholder

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

<b>TRANSACTION CHARGES</b> Please tick (✓)	<input type="checkbox"/> I am a First time investor across Mutual Funds (₹ 150 will be deducted)	OR	<input type="checkbox"/> I am an existing investor in Mutual Funds (₹ 100 will be deducted)
	<small>Applicable for transactions routed through a distributor who has 'opted in' for transaction charges. Upfront commission shall be paid directly by the investor to the AMFI register distributor based on the investors' assessment of various factors including service rendered by the distributor.</small>		

## 1 EXISTING UNITHOLDERS DETAILS

Existing Folio No.  Name of Sole/ First Unit Holder

**Note:** All investor details like mode of holding, nomination, bank details, investor address and contact details, will be captured as per existing information under the given folio. Proceed directly to section 7. For registering different information, please **Do Not** fill-in this section.

## 2 NEW APPLICANT'S DETAILS (Please fill in BLOCK LETTERS with black/blue ink and read the instructions carefully, on page 1 to 4 before filling up the form)

**APPLICATION FOR**  Zero Balance Folio  Investment

**Name of Entity/ Sole/First Applicant**  Mr. Ms.  (as in PAN)

PAN/PEKRN  KYC  Yes  No Mode of Holding (Please ✓)  Single  Joint  Either/ Anyone or Survivor (Default Option : Joint)

Date of Birth/Incorporation (Mandatory)  D D M M Y Y Y Y Proof of Birth (Please ✓)  Passport  Birth Certificate  Others

**Status** (Please ✓)  
 Resident Individual  PSU  AOP/BOI  Minor through Guardian  HUF  Trust /Charities / NGOs  Society  FI  NRI  
 Company/Body Corporate  Sole Proprietor  Defence Establishment  PIO  Bank  FPI (as and when applicable)  Government Body  
 Partnership Firm  Others

(For Non-Individual investors, FATCA, CRS & Ultimate Beneficial Ownership (UBO) Self Certification Form is mandatory, and should be filled separately)

**Non-Individual Investors involved/providing any of the mentioned services**  
 Please (✓) (Applicable only for Non Individuals)  Foreign Exchange/ Money Changer Services  Money Lending/ Pawning  
 Gaming/ Gambling/ Lottery/ Casino Services  None of the above

**Name of Guardian / Contact Person** (Contact Person for non-individual applicant)  Mr. Ms.  (as in PAN)

PAN/PEKRN for Guardian / Contact Person  Date of Birth (Mandatory)  D D M M Y Y Y Y

Relationship with Minor  Father  Mother  Legal Guardian (Refer instructions)

**3 NAME OF THE SECOND APPLICANT**  Mr. Ms.  (as in PAN)

Date of Birth (Mandatory)  D D M M Y Y Y Y PAN/PEKRN  Self-attested copy of PAN/PEKRN along with KYC acknowledgment should be attached

**4 NAME OF THE THIRD APPLICANT**  Mr. Ms.  (as in PAN)

Date of Birth (Mandatory)  D D M M Y Y Y Y PAN/PEKRN  Self-attested copy of PAN/PEKRN along with KYC acknowledgment should be attached

## 5 ADDRESS & CONTACT DETAILS OF FIRST/ SOLE APPLICANT (P.O. Box Address is not sufficient. Refer instruction no. 3)

Correspondence Address (address details will be updated as per your KYC records with CKYC / KRA.)	Overseas Address (Mandatory for NRI / FII Applicants)
HOUSE / FLAT NO. <input type="text"/>	HOUSE / FLAT NO. <input type="text"/>
STREET ADDRESS <input type="text"/>	STREET ADDRESS <input type="text"/>
CITY / TOWN <input type="text"/> STATE <input type="text"/>	CITY / TOWN <input type="text"/> STATE <input type="text"/>
COUNTRY <input type="text"/> PIN CODE <input type="text"/>	COUNTRY <input type="text"/> PIN CODE <input type="text"/>

Tel. (Res.)  Tel. (Off.)  Mobile No.

Mobile No. provided pertains to  Self  Spouse  Dependent Children  Dependent Siblings  Dependent Parents  Guardian  POA  Custodian (for FPIs only)  PMS

Email ID (CAPITAL letters only)

Email ID provided pertains to  Self  Spouse  Dependent Children  Dependent Siblings  Dependent Parents  Guardian  POA  Custodian (for FPIs only)  PMS

I hereby authorise 360 ONE MF (Formerly known as IIFL MF) to send important scheme related information through SMS and Whatsapp.  
 Investors providing Email ID would mandatorily receive E - Statement of Accounts in lieu of physical Statement of Accounts and the annual report or abridged summary on email.  
 I wish to receive physical copy of the scheme wise annual report and abridged summary.

asset 360 ONE <b>ACKNOWLEDGMENT SLIP</b> (To be filled in by the Applicant)		ARN No: <input type="text"/>	Application No. <input type="text"/>
Received from <input type="text"/>	Instrument No. <input type="text"/> Drawn on Bank & Branch <input type="text"/>		Signature, Stamp & Date
Scheme/ Plan/ Option/ Sub-Option <input type="text"/>	Amount Rs. <input type="text"/>		





12 POWER OF ATTORNEY (POA) HOLDER DETAILS		PAN												
First Applicant POA Name														
Second Applicant POA Name														
Third Applicant POA Name														

**13 DECLARATION & SIGNATURES**

I/ We have read, understood and agree to comply with the terms and conditions of the Statement of Additional Information, Scheme Information Documents and Key Information Memorandum of the Scheme(s), Foreign Account Tax Compliance Act and Common Reporting Standards, statutory requirements prescribed by SEBI, AMFI, Prevention of Money Laundering Act, 2002 (PMLA), Privacy Policy of 360 ONE Asset Management Limited (360 ONE AMC) (Formerly known as IIFL Asset Management Limited) available on the website of 360 ONE Mutual Fund [www.360.one/asset-management/mutualfund/](http://www.360.one/asset-management/mutualfund/) and all applicable rules and regulations and hereby confirm that I/We have not received nor been induced by any rebate or gifts, directly or indirectly, to make this investment. The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. For NRIs / PIOs / FPIs only: I / We confirm that I am / we are Non-Resident Indians / Person(s) of Indian Origin / Foreign Portfolio Investors but not (i) United States persons as per applicable Regulations or (ii) residents of Canada, and I / we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary / FCNR Account maintained in accordance with applicable RBI guidelines.

I/We hereby accord my/our consent and hereby authorize 360 ONE AMC/Fund for (i) collecting, receiving, possessing, storing, dealing, handling or disclosure of my/ our Personal Data to the third party or another body corporate or any person acting under a lawful contract with 360 ONE AMC, in accordance with the Privacy Policy. (ii) validating/authenticating with Unique Identification Authority of India ("UIDAI") by itself or through its Registrar and Transfer Agent ("RTA"). I hereby authorize the representatives of 360 ONE Asset Management Limited and its Associates to contact me through any mode of communication. (iii) I/We hereby accord my/our consent to 360 ONE AMC for receiving the promotional information/ material via email, SMS, Whatsapp, calls etc. on the mobile number and email provided by me/us in this Application Form.

<b>First Unitholder/ Guardian/ POA</b>	<b>Second Unitholder</b>	<b>Third Unitholder</b>
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