

9. INVESTMENT & PAYMENT DETAILS* The name of the first/ sole applicant must be pre-printed on the cheque. (Please refer instruction no. 7)

| Scheme Name | Plan | Option |
|------------------------------|--|---|
| Bajaj Finserv Flexi Cap Fund | <input type="checkbox"/> Regular Plan <input type="checkbox"/> Direct Plan | <input type="checkbox"/> Growth (Default) <input type="checkbox"/> IDCW Payout <input type="checkbox"/> IDCW Reinvestment (Default for IDCW) |

| | | |
|--|--|---|
| Payment Type (Please ✓) | <input type="checkbox"/> Non-Third Party | <input type="checkbox"/> Third Party Payment (Please fill third party declaration form) |
| Mode of Payment | <input type="checkbox"/> Lumpsum | <input type="checkbox"/> SIP* |
| Amount (INR) | | |
| Mode of Payment (Please ✓) <input type="checkbox"/> Cheque / DD <input type="checkbox"/> NEFT / RTGS | Cheque / DD No. / UTR No. | Cheque / DD No. / UTR No. |
| Drawn on Bank and A/c no | | |
| Date | | |

Cheque/DD should be drawn in favour of scheme name "Bajaj Finserv Flexi Cap Fund"

*If you wish to register SIP, kindly fill the relevant SIP Registration & OTM Debit Mandate Form.

Reason for investment House Children's Education Children's Marriage Car Retirement Others (please specify) _____

Investment horizon Please (✓) anyone 5 Years 10 Years 15 Years 20 Years 25 Years

10. UNIT HOLDING OPTION PHYSICAL MODE (Default) DEMAT MODE* (Please refer instruction no. 8)

*Demat Account details are mandatory if the investor wishes to hold the units in Demat Mode. Please ensure that the sequence of names as given in the order of the applicants matches as per the Depository Details. In case of any ambiguity or validation failure with the depository details, AMC will allot units in the Physical Mode.

| | | | | | | | |
|--|----|---------------------|--|---|--|--|--|
| National Securities Depository Limited | | | | Central Depository Services (India) Limited | | | |
| DP Name | | | | DP Name | | | |
| DP ID | IN | Beneficiary A/c No. | | Beneficiary A/c No. | | | |

Enclosures - Please (✓) Client Masters List (CML) Transaction cum Holding Statement Delivery Instruction Slip (DIS)

11. FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor) (Please refer instruction no. 9)

Non-Individual investors should mandatorily fill separate FATCA and Ultimate Beneficial Ownership (UBO) Form. The below information is required for all applicants/guardian

| Particulars | Place/City of Birth | Country of Birth | Country of Citizenship / Nationality |
|----------------------------|---------------------|------------------|--|
| First Applicant / Guardian | | | <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____ |
| Second Applicant | | | <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____ |
| Third Applicant | | | <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Others (Please specify) _____ |

Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? Yes No [Please tick (✓)]

If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen/Resident/Green Card Holder/Tax Resident in the respective countries.

| Particulars | Country of Tax Residency | Tax Identification Number or Functional Equivalent | Identification Type (TIN or other please specify) | If TIN is not available please tick (✓) the reason A, B or C (as defined below) |
|----------------------------|--------------------------|--|---|--|
| First Applicant / Guardian | | | | Reason: A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |
| Second Applicant | | | | Reason: A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |
| Third Applicant | | | | Reason: A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |

Reason A ⇒ The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents.

Reason B ⇒ No TIN required (Select this reason only if the authorities of the respective country of tax residence do not require the TIN to be collected)

Reason C ⇒ Others, please state the reason thereof: _____

| | | |
|---|--|--|
| *Address Type of Sole/1st Holder: <input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business | *Address Type of 2nd Holder: <input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business | *Address Type of 3rd Holder: <input type="checkbox"/> Residential <input type="checkbox"/> Registered Office <input type="checkbox"/> Business |
|---|--|--|

*If the address type is not ticked the default will be considered as residential.

12. NOMINATION DETAILS* (To be filled in by individuals singly or jointly. Mandatory only for Investors who opt to hold units in Non-Demat) (Please refer instruction no. 10)

I/We do hereby nominate the person(s) more particularly described here under to receive the Units held in my/our Folio in the event of my/our death.
(Please fill the nominee details in the table given below)

I/We hereby confirm that I/We do not wish to appoint any nominee(s) for my mutual fund units held in my/our mutual fund folio. I/We understand the implications/issues involved in non-appointment of any nominee(s) and am/are further aware that in case of my demise/ death of all the unit holders in the folio, my/our legal heir(s) would need to submit all the requisite documents issued by the Court or such other competent authority, as may be required by the Mutual Fund/AMC for settlement of death claim/transmission of units in favour of the legal heir(s), based on the value of the units held in the mutual fund folio.

If you do not wish to nominate (Opt Out of Nomination), it is mandatory to sign as per the mode of holding in signature space provided below i.e. in Nomination Details section

| Name and PAN of Nominee(s) | Relationship with Applicant | Date of Birth | Guardian Name | Guardian's relationship with nominee | Signature of Nominee/ Guardian of Nominee (Optional) | Proportion (%) in which the units will be shared by each Nominee (should aggregate to 100%) |
|----------------------------|-----------------------------|---------------|---------------|--------------------------------------|--|---|
| | | | | | | |
| Nominee 1 | | DD/MM/YYYY | | | | |
| Nominee 2 | | DD/MM/YYYY | | | | |
| Nominee 3 | | DD/MM/YYYY | | | | |

Signature(s) All Unit holders to mandatorily sign irrespective of the mode of holding.

Sign of 1st Applicant / Guardian

Sign of 2nd Applicant

Sign of 3rd Applicant

13. CONFIRMATION CLAUSE

I/We hereby confirm to have read, understood and agree to the privacy policy available on www.bajajamc.com. I/We accord my/our consent to the AMC/Fund for collecting, receiving, possessing, storing, dealing, handling or disclosure of my/our personal data and hereby authorise to disclose it to the third party or another body corporate or any person acting under a contract with the AMC or the Fund.

14. DECLARATION AND SIGNATURES

(Please refer instruction no. 11)

I/We hereby confirm and declare as under:- I/We have read and understood the contents of the Statement of Additional Information of Bajaj Finserv Mutual Fund and the Scheme Information Document(s)/Key Information memorandum of Bajaj Finserv Flexi Cap Fund and Addenda thereto, issued from time to time and the instructions. I/We, hereby apply to the Trustee of Bajaj Finserv Mutual Fund for allotment of units of the Scheme(s) of Bajaj Finserv Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/We declare that I am/We are authorised to make this investment and the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. 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(s) is/are being recommended to me/us. I/We declare that the information given in this application form is correct, complete and truly stated. In the event of my/our not fulfilling the KYC process to the satisfaction of the AMC/Bajaj Finserv Mutual Fund, I/We hereby authorise the AMC/Bajaj Finserv Mutual Fund to redeem the units against the funds invested by me/us at the applicable NAV as on the date of such redemption. I/We agree that Bajaj Finserv Mutual Fund can debit from my Folio Transaction Charges as applicable. I/We agree to notify Bajaj Finserv Asset Management Limited immediately in the event the information in the self-certification changes. For investors investing in Direct Plan: I/We hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product/scheme/plan. Applicable to Micro Investors: I/We hereby declare that I/We do not have any existing Micro investments which together with the current application will result in aggregate investments exceeding Rs. 50,000 in a year. Applicable to NRIs: I/We confirm that I am/We are Non-Resident(s) 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 (s) . FATCA and CRS Declaration: I/We hereby acknowledge and confirm that the information provided in this form is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We shall be liable for it. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required at your end. I/We hereby authorise you to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/us to Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees ("the Authorised Parties") or any Indian or foreign governmental or statutory or judicial authorities/agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax /revenue authorities and other investigation agencies without any obligation of advising me/us of the same.

Please ✓ : if the EUIN space is left blank: I / We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Signature(s) should be as it appears in the Folio / on the Application Form and in the same order. In case the mode of holding is joint, all Unit holders are required to sign.

Sign of 1st Applicant / Guardian / Authorised Signatory / POA

Sign of 2nd Applicant / Authorised Signatory / POA

Sign of 3rd Applicant / Authorised Signatory / POA

Points to remember

| Please ensure that: | Documents | Individuals | Companies | Societies | Partnership Firms | Investments through PoA | Trust | NRI | FII(s)/ FPI | Sole Proprietor | Minor | HUF |
|---|--|-------------|-----------|-----------|-------------------|-------------------------|-------|-----|-------------|-----------------|-------|-----|
| | | | | | | | | | | | | |
| 1. Your Application Form is complete in all respects & signed by all applicants. | Resolution / Authorisation to invest | | ✓ | ✓ | ✓ | | ✓ | | ✓ | | | |
| 2. Name, Address and Contact Details are mentioned in full. Email id & Mobile number should be provided along with the declaration whether it belongs to Self or a Family member. | HUF / Trust Deed | | | | | | ✓ | | | | | ✓ |
| 3. Bank Account Details are entered completely and correctly. IFSC Code & 9 digit MICR Code of your Bank is mentioned in the Application Form. | Bye - Laws | | | ✓ | | | | | | | | |
| 4. Permanent Account Number (PAN) Mandatory for all Investors (Indian & NRI) Irrespective of the Investment amount. | Partnership Deed | | | | ✓ | | | | | | | |
| 5. Know Your Client (KYC) Mandatory for irrespective of the amount of investment (please refer the guideline 4(e) for more information) | SEBI Registration / Designated Depository Participant Registration Certificate 2 | | | | | | | | ✓ | | | |
| 6. Your Investment Cheque / DD is drawn in favour of < Scheme Name > dated and signed. For e.g "Bajaj Finserv Flexi Cap Fund" | Proof of Date of birth | | | | | | | | | | ✓ | |
| 7. Application Number is mentioned on the reverse of the cheque. | Notarised Power of Attorney | | | | | ✓ | | | | | | |
| 8. A cancelled Cheque leaf of your Bank is enclosed in case your investment cheque is not from the bank account that you have furnished in the Application Form. | Foreign Inward Remittance Certificate, in case payment is made by DD from NRE / FCNR a/c, where applicable | | | | | | | ✓ | | | | |
| 9. Documents as listed are submitted along with the Application form (as applicable to your specific case) | KYC Acknowledgement | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| | Demat Account Details (Client Master List Copy)3 | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| | FATCA CRS/UBO Declaration | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

1. Self attestation is mandatory 2. Copy of SEBI registration certificate (for FII) or Designated Depository Participant registration certificate (for FPI) should be provided 3. In case Units are applied in Electronic (Demat) mode.