TAX STATUS CHANGE FORM

For existing unitholders holding units in physical mode. The relevant section to be filled-in are indicated in the title of respective section. Please fill in the information below in English and in BLOCK Letters.

Bank of India Mutual Fund

Date: D D M M Y Y Y Y

IMPORTANT: Please strike off the unused section(s) to prevent any unauthorised use

A. UNIT HOLDER'S INFORMATION (Mandatory)

Folio No(s). ______ ______ PAN No. ______

Sole/1st Applicant Mr. Ms. M/s. ______

B. CHANGE IN TAX STATUS

☐ RI to NRI ☐ NRI to RI

C. OVERSEAS ADDRESS (in case of RI to NRI) - Mandatory

Address ______

______ City ______

State ______ PIN ______ Country ______

D. CHANGE OF BANK MANDATE/MODE OF PAYMENT

Mandatory to attach proof as given in the instruction. For unit holders opting to hold units in demat form. Please ensure that the bank account linked with the demat account is mentioned here.

Account Number ______ Account Type ○ Savings ○ Current ○ NRE ○ NRO ○ FCNR

Name of Bank ______

Branch Name ______ Branch City ______

9 Digit MICR code ______ 11 Digit IFSC code ______

Enclosed (Please) ☐ **Bank Account Details Provided.**

E. NEW CONTACT DETAILS

Tel. ______ Mobile ______

Email: ______

F. INVESTOR(S) DECLARATION & SIGNATURE (S)

I/We have read and understood the contents of Scheme Information Document(s)/Key Information Memorandum(s) & Statement of Additional Information(s) of the Scheme(s) and agreed to abide by the terms, conditions, rules and regulations of the Scheme(s) on the date of this transaction. I/We have further read, understood and hereby agree to abide by the provisions under Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) under FATCA & CRS provision of the Central Board of Direct Taxes notified Rules 114 F to 114H, as part of the Income-tax Rules,1962. 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. I/We hereby confirm that I/we have not been offered/communicated any indicative portfolio and/or any indicative yield for this month. I/we hereby declare and confirm that the information provided in this form is true and correct and is duly supported by the document proof enclosed alongwith the form. In case of non submission of any of the documents or if the documents are not found to be in order, the AMC is reserves to right to not register the application submitted. The AMC/Mutual Fund shall not be liable and/or responsible for any loss or damage that I/we may incur if the Form is rejected. I/We interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. I/we declare that the email address provided in the form belongs to me/us or to spouse, dependent children or dependent parents (applicable to individual investors only).

SIGNATURE OF SOLE / FIRST APPLICANT	SIGNATURE OF SECOND APPLICANT	SIGNATURE OF THIRD APPLICANT

Bank of India Mutual Fund

ACKNOWLEDGEMENT - TAX STATUS CHANGE FORM

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Folio No. ______

Sole/1st Applicant Mr. Ms. M/s. ______

SIGN & STAMP

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.