

THIRD PARTY PAYMENT DECLARATION FORM

This Form should be completed in **English** and in **BLOCK LETTERS** only.
(Please read the Third Party Rules and Instructions carefully before completing this Form)

Sponsors: The Investment Trust of India Limited and Fortune Credit Capital Limited
Trustee Company: ITI Mutual Fund Trustee Private Limited

Investment Manager: ITI Asset Management Limited
Naman Midtown, 'A' - Wing, 21st Floor, Senapati Bapat Marg, Prabhadevi, Mumbai - 400 013. CIN : U67100MH2008PLC177677



Declaration Form No. _____

FOR OFFICE USE ONLY		
Date of Receipt	Folio No.	Branch Trans. No.

1. BENEFICIAL INVESTOR INFORMATION (Refer Instruction No. 2)

Folio No. (For existing investor) Application No.

NAME OF FIRST/SOLE APPLICANT (BENEFICIAL INVESTOR)
Mr. Ms. M/s.

2. THIRD PARTY INFORMATION (Refer Instruction No. 3)

NAME OF THIRD PARTY (PERSON MAKING THE PAYMENT)
Mr. Ms. M/s.

Nationality Aadhar Card No.

PAN/PEKRN# KIN# Proof Attach

#Mandatory for any amount. Please attach PAN Proof. ** Refer instruction No. 5.

NAME OF CONTACT PERSON & DESIGNATION (in case of non-Individual Third Party)
Mr. Ms.

Designation

MAILING ADDRESS (P.O. Box Address may not be sufficient)

City State Pin Code

CONTACT DETAILS
Tel. No. (O) (R) Fax

Mobile No. Email ID

RELATIONSHIP OF THIRD PARTY WITH THE BENEFICIAL INVESTOR (Refer Instruction No. 3) [Please tick (✓) as applicable]				
Status of the Beneficial Investor	<input type="radio"/> Minor	<input type="radio"/> FII <input type="radio"/> Client	<input type="radio"/> Employee(s)	<input type="radio"/> Agent / Distributor / Dealer
Relationship of Third Party with the Beneficial Investor	<input type="radio"/> Father <input type="radio"/> Mother <input type="radio"/> Court Appointed Legal Guardian (Please attach proof of relationship, if not already submitted) <input type="radio"/> Grand Parent <input type="radio"/> Related Person (Please specify relationship) (Maximum investment - Rs. 50,000/- per transaction)	Custodian - SEBI Registration No. of Custodian Registration Valid Till <input type="text"/>	Employer	Principal
Declaration by Third Party	I / We declare that the payment made on behalf of minor is in consideration of natural love and affection or as a gift.	I / We declare that the payment is made on behalf of FII / Client and the source of this payment is from funds provided to us by FII / Client.	I / We declare that the payment is made on behalf of employee(s) under Systematic Investment Plans or as lump sum / one-time subscription, through Payroll Deductions.	I / We declare that the payment is made on behalf of Agent / Distributor / Dealer under Systematic Investment Plans or as lumpsum / one-time subscription, in lieu of commission or incentive payable for sale of goods / services.

3. THIRD PARTY OTHER DETAILS (Mandatory)

Gross Annual Income (₹)* (Please ✓)

Below 1 Lac 1-5 Lacs 5-10 Lacs
 10-25 Lacs 25 Lacs-1Crore >1Crore

OR Net worth (Mandatory for Non-Individuals) ₹
as on (not older than 1 year)

Occupation* (Please ✓)

Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired
 Housewife Student Defence Proprietorship Others

Legal Status* (Please ✓)

Resident Individual NRI-Repatriable NRI-Non Repatriable PIO / OCI HUF Minor (through Guardian) LLP FII
 Sole- Proprietorship Partnership Firm Company Bank Financial Institution Other Body Corporate Trust AOP / BOI
 Charitable / Religious / Non-profit Organisation Others

For Individual	Mandatory for Non-Individual Investor
• I am Politically Exposed Person (PEP) <input type="radio"/> Yes <input type="radio"/> No • I am Related to PEP <input type="radio"/> Yes <input type="radio"/> No	Is the entity involved/providing any of the following services • For Foreign Exchange / Money Changer Services <input type="radio"/> Yes <input type="radio"/> No • Gaming / Gambling / Lottery Services (e.g. casinos, betting syndicates) <input type="radio"/> Yes <input type="radio"/> No • Money Lending / Pawning <input type="radio"/> Yes <input type="radio"/> No

4. THIRD PARTY PAYMENT DETAILS (Refer Instruction No. 4)

Mode of Payment [Please tick (✓)]	Mandatory Enclosure(s)*
<input type="radio"/> Cheque	In case the account number and account holder name of the third party is not pre-printed on the cheque then a copy of the bank passbook / statement of bank account or letter from the bank certifying that the third party maintains a bank account.
<input type="radio"/> Pay Order <input type="radio"/> Demand Draft <input type="radio"/> Banker's Cheque	Certificate from the Issuing Banker stating the Bank Account Holder's Name and Bank Account Number debited for issue of the instrument or Copy of the acknowledgement from the bank, wherein the instructions to debit carry the bank account details and name of the third party as an account holder are available or Copy of the passbook/bank statement evidencing the debit for issuance of the instrument.
<input type="radio"/> RTGS <input type="radio"/> NEFT <input type="radio"/> Fund Transfer	Copy of the Instruction to the Bank stating the Bank Account Number which has been debited.

* ITI Mutual Fund / ITI Asset Management Ltd. reserves the right to seek information and /or obtain such other additional documents/information from the Third Party for establishing the identity of the Third Party.

Amount in Figures (₹) Amount in words

Instrument No. Date Pay- in Bank Account No.

Bank Name Branch City

Account Type (Please ✓) Current Savings NRO NRE FCNR Others

5. DECLARATIONS & SIGNATURE(S)

THIRD PARTY DECLARATION

I/We hereby confirm and declared that I/We have read and understood the Third Party Payment rules, as given below and agree to comply and be bound by the same.

The information provided is true and correct and ITI Mutual Fund ('Fund')/ITI Asset Management Ltd. ('AMC') is entitled to verify the same directly or indirectly. I/We agree to furnish such further information as Fund/AMC may require from me/us. I/We agree that if any of the declarations furnished by me/us are found to be incorrect or incomplete, the Fund/AMC shall have the absolute discretion to reject/not process the Application Form received from the Beneficial Investor(s) and refund the subscription monies accordingly.

I/We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and is not held or designed for the purpose of contravention or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India. I/We shall be solely liable/responsible for any claim, loss and/or damage of whatsoever nature that the Fund/AMC may suffer as a result of accepting the aforesaid payment from me/us towards processing the transaction in favour of the Beneficial Investor(s) as detailed in the Application Form.

Applicable to NRIs only:

I/We confirm that I am/We are Non-Residents of Indian Nationality /Origin and that the funds are remitted from abroad through approved banking channels or from my /our NRE /NRO /FCNR Account. I/We confirm that the details provided by me / us are true and correct.

Please (✓) Yes No

If yes, (✓) Repatriation basis Non-repatriation basis

Date



Signature of the Third Party

BENEFICIAL INVESTOR(S) DECLARATION

I/We confirm having read and understood the Third Party Payment rules and instructions. I/We confirm that the information declared herein by the Third Party is true and correct and have no objection to the funds received from the Third Party. The Fund reserves the right in its sole discretion to reject/not process the Application Form and refund the payment received from the aforesaid. The Fund or the AMC will not be liable for any damages or losses or any claims of whatsoever nature arising out of any delay or failure to process this transaction.

Applicable to Guardian receiving funds on behalf of Minor only:

I/We confirm that /We are the guardian of the Minor registered in folio and have no objection to the funds received towards Subscription of Units in this Scheme(s) on behalf of the minor.

SIGNATURE(S)

Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
Place <input type="text"/>	First / Sole Applicant / Guardian	Second Applicant	Third Applicant

Toll Free Number:
1800-266-9603

Non Toll Free Number:
022-66214999

Email:
mfassist@itiorg.com

Website:
www.itimf.com