

DSP

For Product Labelling & Suitability (Including Risk-o-Meter of Benchmark) and PRC
Matrix For Debt Schemes available on cover pages

Application No.:

Distributor / RIA / PMRN Name and ARN / Cod	le Sub Broker ARN & Name Sub	Broker/Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
/We confirm that the EUIN box is intent	ionally left blank by me/us as this i	s an "execution-only" tra	nsaction without any interaction	n or advice by the distributor personnel concer
ommission shall be paid directly by the inve actors including the service rendered by the		based on the investors' asses	ssment of various	
☐ I am a First Time Investor in Mutua	al Fund Industry. 🔲 I am an	Existing Investor in Muti	ual Fund Industry.	ole / First Applicant's Signature Mandatory
. FIRST APPLICANT'S DETAILS				D. (CD) II
Name of First Applicant (As per F	PAN) (Refer Instructions)			Date of Birth (1st Appl / Minor) (attach pro
Name of Guardian (if minor)/PC	DA/Contact Person (As per PAN) (Refer Instructions)		Date of Birth (Guardian)
				D D / M M / Y Y Y
Existing Folio	PAN (1st Appl / Gua	rdian)		Guardian is:
210/2 1001				Father Mother Court Appoint
CKYC - KIN	PAN of	f POA	KYC attached	
		10/6		
Email ID	ESPONDENCE ADDRESS (AS I	per KYC records) N	I Investors should mention	their Overseas address (Refer instruction
(in capital)				Address Type (Mandatory a. Residential & Business
Mobile +91	Tel (STD Code)		☐ b. Residential
Address				☐ c. Business☐ d. Registered Office
				d. Registered Office
Landmark	D'			
City	Pin (State	
3. KYC DETAILS (Mandatory)				
IS Are you a Non-Profit Organizat: Bb. Occupation Details (Please ○ Agriculturist ○ Retired ○ House	tick ✓) ○ Private Sector Serv	vice O Public Sector Se		ce O Business O Professional
3c. Gross Annual Income (Pleas Net-worth in (Mandatory for				5 Lacs-1 crore O > 1 crore M / Y Y Y W (Not older than 1 ye
3d. For Individuals (Please tick				
4. JOINT APPLICANTS (IF ANY)		Politically Exposed Pers	on O rain Related to Politi	Latty Exposed Ferson
Mode of Holding (Please tick		☐ Anyone or S	Survivor	Date of Birth
2nd Applicant Name				D D / M M / Y Y
(As per PAN) (Refer Instructions)	CKAC KIN			
PAN	CKYC - KIN			
a. Occupation Details (Please 1	tick 🗸) O Private Sector Service	Public Sector Service	ce O Government Service O	Rusiness O Professional
Agriculturist O Retired O Ho				
b. Gross Annual Income (Pleas	The state of the s			
C. Others (Please tick ✓) ○ No	ot Applicable O Politically Expo	sed Person (PEP) ORel	ated to a Politically Exposed	Person (PEP)
Brd Applicant Name			Date of	Birth D D / M M / Y Y Y
As per PAN) (Refer Instructions) PAN	CKYC - KIN			
a. Occupation Details (Please to Agriculturist O Retired O Ho	tick 🗸) O Private Sector Service ousewife O Student O Forex	e O Public Sector Service	ce O Government Service O	Business O Professional
b. Gross Annual Income (Pleas				
C. Others (Please tick ✓) ONO	ot Applicable O Politically Expo	sed Person (PEP) O Rel	ated to a Politically Exposed	Person (PEP)
ACKNOWLEDGEMENT SLIP (To be	filled in by the investor)			DSP MUTUAL FUND
deceived, subject to realisation and verificati	on an application for purchase of Units	as mentionedin the application	on form.	Application No.
Scheme	Cheque no.	Amount		

									_												
Sole	/First Appli	cant/Gu	ardian						2nd A	Applic	cant						☐ 3rc	l Applica	nt		DA .
Place & Countr	y of Birth	PLAC	Ε 0	COUNTRY	/ P	Place 8	t Count	try of	Birth	ו	PLACE		COUNTR	RY	Place	e & Co	ountry	of Birth	PLA	CE	COUNTRY
Nationality □I							ality 🗆												.S. □ Oth		
Please indicate al If TIN is not availab	le or mentione	d. please	mention re	eason as:	'A' if th																s of the country
of tax residence ent	Tax Identi	not requir	e the TIN t	to be disc ification	losed.					entific			ification					I	ntificatio		entification
Country #	Num			'Reason*		Cour	ntry #			ımber			/Reaso		Co	untry	#	1	ımber		pe/Reason*
1					1										1						
2					2									2	2						
3					3									3	3						
BANK ACCO	JNT DETAI	LS (Ava	il Multi	ple Ban	k Reg	gistra	tion Fac	cility)												
ank Name																					
ank A/C No.													A/C	Туре	□ Sa	vings	☐ Cur	rent 🗌	NRE 🗌 NF	RO 🗆 F	CNR Othe
ity				ı	Pin						IF	SC cod	de: (11	digit	t)						
INVESTMEN	T AND PAY	/MENT	DETAIL	S (Defa	ault r	olan/	option	/sub	optic	on wil	ll be ar	oplied	incas	e of r	no in	forma	ation.	ambigu	uity or di	scren	ancy)
heque/DD shoul							•					•									
One time Lun	npsum Inves	tment [SIP: S	ystema	tic In	vestn	ent Pla	an.I⊠	₹Att	ach C	OTM for	m, if	not alr	eady	regi	stere					rst SIP
	Full So	heme/	Plan/O	ption/9	Sub O	Option	ו					,	Amour	nt (₹)					tails belo		
DSP -	Schen			Plan	(Optio	n/Sub	Opti	ion									•	Mode: [•
ncp	Schen					Optio	n/Sub	Opti	ion												Funds trans
DSP -	эспеп			Plan		optio	uD	Opti									_)/RTGS/NI	ĿFΓDe	tails:
DSP -	Schen	ne		Plan		Optio	n/Sub	Opti	ion									f. No ite		M /	v v v
otal		Amoun	t in wo	ords								Amo	unt in	r Figu	ures				-		
	D	_		D.	u lm A	/c NI-					۸/	Type !	Cond	ngs [٦٢	ont F	_	_	es, if any □FCNR □		urc .
syment from I	Dank A/C N	υ.									A/C.	ype	∟ Javi	ııgs ∟	_cui1	CIIL L	ı NKE l		CNK _	Joule	.13
	n to nomina	te. 🔲 I	/We DO	NOT wis	sh to i	nomin	ate and	d sign						for D						ry)	
			/We DO		Relati w	onshi rith	р	d sign	here		If Nom	inee i	s a Mir			Applica Da	ant Sig	nature	(Mandato	N	lominee ignature
Nomir	n to nomina		/We DO		Relati w	onshi	р	d sign	here			inee i	s a Mir			Applica Da	ant Sig	nature	(Mandato	N	lominee ignature
Nomir	n to nomina		/We DO		Relati w	onshi rith	р	d sign	here		If Nom	inee i	s a Mir			Applica Da	ant Sig	nature	(Mandato	N	
Nomir	n to nomina		/We DO		Relati w	onshi rith	p		here	Guard	If Nom	inee i	s a Mir	nor*	1st A	Applica Da B	ant Sig	Allo	(Mandato	N	
Nomir	n to nomina		/We DO		Relati w	onshi rith	p *In Gu	case	of ean's re	Guard ach Melation	If Nomlian Naminor as	inee ime &	PAN nee, pl	nor*	1st A	Da B tion Fathe	ant Sig	Allo	(Mandato ocation (%) al 100%	N Si	
Nomir	n to nomina		/We DO		Relati w	onshi rith	p *In Gu	case ardia gal Gu	here of ean's re	Guard ach Melation	If Nom	inee ime &	PAN nee, pl	nor*	1st A	Da B tion Fathe	ant Sig	Allo	(Mandato	N Si	
Nomir 1 2 3 3ddress	n to nomina nee Name/s	& PAN		R	Relati w appl	onshi vith licant	*In Gua Leg	case ardia gal Gu Passp	of ean's reuardia	ach Melation	If Nom	Nomir vith Mi	PAN nee, pl	nor*	1st A	Da B tion Fathe	ant Sig	Allo	(Mandato ocation (%) al 100%	N Si	
Nomir Nomir Nomir Nomir	n to nomina nee Name/s oof of date NG OPTION	& PAN of birth	of minor	R like Birt	Relati w appl	onshi vith licant	*In Gu Leg / I	case ardia gal Gu Passp	of ean's reuardia	ach Melation	If Nom lian Nam linor as inship w Attach ers. ificate,	Nomir inth Mi proof	PAN nee, planor as like Bi	ease Moth rth Co	1st A	Da B tion Fathe cate	ant Sig	Allo Tota	(Mandato ocation (%) al 100%	N Si	ignature
Nomir Nomir Nomir Nomir	n to nomina nee Name/s oof of date NG OPTION Statement	& PAN of birth	of minor	R	Relati w appl	onshi vith licant	*In Gu Leg / I	case ardia gal Gu Passp	of ean's reuardia	ach Melation	If Nom lian Nam lian Nam linor as nship w Attach ers. ificate, Deposi	Nomirrith Mi proof	nee, pl nor as like Bi ort etc.	ease Moth	menth meer / I	Dapplica Dapplica B tion Fathe Cate A	ant Signite of Sirth	Allo Tota ol Leavi	(Mandato ocation (%) al 100%	N Si Ticate	ignature
Nomir 2 3 ddress lease attach pr UNIT HOLDI In Account	n to nomina nee Name/s oof of date NG OPTION Statement	& PAN of birth	of minor	like Birt	Relatii w appl th Cer	onshi vith licant	*In Gu Leg / I	case ardia gal Gu Passp	of ean's reuardia	ach Melation	If Nom lian Nam lian Nam linor as nship w Attach ers. ificate, Deposi	Nomirrith Mi proof	PAN nee, planor as like Bi	ease Moth	menth meer / I	Dapplica Dapplica B tion Fathe Cate A	ant Signite of Sirth	Allo Tota ol Leavi	(Mandato ocation (%) al 100% ling Certificate dose for decilient Maste	Sicate	ignature
Nomir No	oof of date NG OPTION Statement ult):	of birth o	of minor Demat n	like Birt	Relation was applied to the control of the control	ionshi rith licant	*In Gua Leg / I tte, School	case ardial gal Gu Passp ool Le	of eaving	ach Melation Other	If Nom lian Nam lian	Nomirith Mi	nee, pl nor as like Bi ort etc.	ease Moth	menth meer / I	Dapplica Dapplica B tion Fathe Cate A	ant Signite of Sirth	Allo Tota ol Leavi	(Mandato ocation (%) al 100% ing Certification lose for detection descriptions	Sicate	tion:
Nomir No	oof of date NG OPTION Statement ult):	of birth o	of minor Demat n	like Birt	Relation was applied to the control of the control	ionshi rith licant	*In Gua Leg / I tte, School	case ardial gal Gu Passp ool Le	of eaving	ach Melation Other	If Nom lian Nam lian	Nomirith Mi	nee, pl nor as like Bi ort etc.	ease Moth	menth meer / I	Dapplica Dapplica B tion Fathe Cate A	ant Signite of Sirth	Allo Tota ol Leavi	(Mandato ocation (%) al 100% ing Certification lose for detection descriptions	Sicate	tion:
Nomir No	oof of date NG OPTION Statement ult): receive physi	of birth of l:	of minor Demat n of the ani	r like Birt	Relating was applied to the control of the control	onshi rith licant	*In Guu Leg / I tte, School	case ardial gal Gu Passp pool Le	of each of eac	ach Melation Othee	If Nom lian Nam lian	Nomirrith Mi proof	nee, pl nor as like Bi ort etc.	ease Moth	ment mer / I ertific	Da B B B B B B B B B B B B B B B B B B B	te of firth	Total Col Leavi	(Mandato ocation (%) al 100% ing Certif lose for det client Master ransaction/ IS Copy	N Si	tion:
Nomir Nomir Nomir Nomir Nomir Nomir Nomir Nomir Nomir	oof of date NG OPTION Statement ult): receive physi	of birth of l:	of minor Demat n of the ani	r like Birt	Relating was applied to the control of the control	onshi rith licant	*In Guu Leg / I tte, School	case ardial gal Gu Passp pool Le	of each of eac	ach Melation Othee	If Nom lian Nam lian	Nomirrith Mi proof	nee, pl nor as like Bi ort etc.	ease Moth	ment mer / I ertific	Da B B B B B B B B B B B B B B B B B B B	te of firth	Total Col Leavi	(Mandato ocation (%) al 100% ing Certif lose for det client Master ransaction/ IS Copy	N Si	tion:
Nomir No	oof of date NG OPTION Statement ult): receive physi	of birth of l:	of minor Demat n of the ani	r like Birt	Relating was applied to the control of the control	onshi rith licant	*In Guu Leg / I tte, School	case ardial gal Gu Passp pool Le	of each of eac	ach Melation Othee	If Nom lian Nam lian	Nomirrith Mi proof	nee, pl nor as like Bi ort etc.	ease Moth	ment mer / I ertific	Da B B B B B B B B B B B B B B B B B B B	te of firth	Total Col Leavi	(Mandato ocation (%) al 100% ing Certif lose for det client Master ransaction/ IS Copy	N Si	tion:
Nomir No	oof of date NG OPTION Statement ult): receive physi	of birth of l:	of minor Demat n of the ani	r like Birt	Relating was applied to the control of the control	onshi rith licant	*In Guu Leg / I tte, School	case ardial gal Gu Passp pool Le	of each of eac	ach Melation Othee	If Nom lian Nam lian	Nomirrith Mi proof	nee, pl nor as like Bi ort etc.	ease Moth	ment mer / I ertific	Da B B B B B B B B B B B B B B B B B B B	te of firth	Total Col Leavi	(Mandato ocation (%) al 100% ing Certif lose for det client Master ransaction/ IS Copy	N Si	tion:
Nomin	oof of date NG OPTION Statement ult): TON & SIG Perstood the concretely apply to the concretely apply to the sin of the apply to the apply to the sin of the apply to the sin	of birth of limits and limits and limits of limits of the Truste plication of any	of minor Demat n of the ani	r like Birt	Relati wappl th Cer SDL: on Docu- on Docu- on d for Ur A and t	rtifica	*In Gua Leg / I tte, School	case ardiangal Gu Passp pool Le	of each of eac	ach Melation Othee	If Nom lian Nam lian	Nomine i Nomin in Nom	nee, pl nor as like Bi ort etc. rticipan ccount N the foli	nor* Lease Moth rth Co. t (DP) lumber ion Mer truction in the terruction in the Government of the terruction of the terruction in the terruction of the terruction in the terruction of the te	menter / I ertification (NSD)	Da B B B B B B B B B B B B B B B B B B B	te of firth	Total Col Leavi	(Mandato ocation (%) al 100% ing Certifications Copy denda issue- egulations. Inits) and he tet sources cy Authority.	mat opi er List Holding d by DSS	tion: g Statement P Mutual Fund fave understood cept the same is not designed
Nomin	oof of date NG OPTION Statement ult): TON & SIG Perstood the concretely apply to the concretely apply to the sin of the apply to the apply to the sin of the apply to the sin	of birth of limits and	of minor Demat n ES e Scheme e of DSP M orm, inclu by me/us c Act, Regul	r like Birt	Relati wappl th Cer SDL: on Docu- on Docu- on d for Ur A and t	rtifica	*In Guu Leg / I tte, School	case ardiangal Gu Passp pool Le	of each of eac	ach Melation Othee	If Nom lian Nam lian	Nomine i Nomin in Nom	nee, pl nor as like Bi ort etc.	nor* Lease Moth rth Co. t (DP) lumber ion Mer truction in the terruction in the Government of the terruction of the terruction in the terruction of the terruction in the terruction of the te	menter / I ertification (NSD)	Da B B B B B B B B B B B B B B B B B B B	te of firth	Total Col Leavi	(Mandato ocation (%) al 100% ing Certif lose for det client Master ransaction/ IS Copy	mat opi er List Holding d by DSS	tion: g Statement P Mutual Fund fave understood cept the same is not designed
Nomin No	oof of date NG OPTION Statement ult): TON & SIG Perstood the correctly apply to the correct	of birth of limits of the the Truste of the the the truste of the the the truste of the the truste of truste of the truste of truste of the truste of tr	of minor Demat n ES e Scheme e of DSP M orm, inclu by me/us c Act, Regul	r like Birt	Relating Wapping Apping	ritifica I N ritiged ument a initis of it in the control of the	*In Gua Leg / I tte, School	case ardia gal Gu Passp ool Le ment o nt Sche ment o nt Sche ss, ternroomple	of ean's requardid out / eaving	ach Melation an & A Othe g Certification and the g	If Nom lian Nam lian	Nomine i Nomin in Nom	nee, planor as like Bi bort etc. rticipan count N the foli nformation abide by with insisting the position of the position	nor* Lease Moth rth Co. t (DP) lon Merential with the control of the control o	menther / lertifil	Dapplica Dappli	ant Sig	Allo Tota ol Leavi ans and adules and adules and document hegitima y Statuton	(Mandato ocation (%) al 100% ing Certifications Copy denda issue- egulations. Inits) and he tet sources cy Authority.	Si S	tion: g Statement P Mutual Fund fave understood cept the same lis not designed
1 2 3 3 Address Please attach pr . UNIT HOLDII In Account Mode (default) In Account Mode (defa	oof of date NG OPTION Statement ult): TION & SIG Perstood the concereby apply to the ents of the application or evaluation or evaluation or evaluation.	of birth of literation in cal copy of his literation in his literation of any uardian and an and an	of minor Demat n ES e Scheme e of DSP M orm, inclu by me/us Act, Regul	r like Birtinode: NS CE nual repc Informatia utual Funding FATCro on this FATCro lation, Rule	Relating Wapping Apping	ritifica I N ritiged ument a initis of it in the control of the	*In Gual Leg / I i te, School I i i i i i i i i i i i i i i i i i i	case ardial gal Gu Passpool Le	of earn's requarding ort / mail in fadditions of the faddition of the fadd	ach Melation an & A Other g Certification and the g	If Nom lian Nam lian	Nominine i Nomininth Mi proof Passpottory	nee, plenor as like Bi ort etc. rticipan count Ne count	ease Moth rth Co. t (DP) Number of the terruction in the Government of the terruction of the terruction in the Government of the terruction in the Government of the terruction of the terructi	mentler / lertific	Da B B b b b b b b b b b b b b b b b b b	te of firth r / / Scho	Allo Tota ol Leavi In a sand addules and red document of the legitima y Statutory	(Mandato pocation (%) al 100% ling Certification ling Certification ling Copy denda issue- gulations. Inits) and he tes sources, cay Authority.	mat option of the control of the con	tion: g Statement P Mutual Fund fave understood cept the same lis not designed
Nomir 1 2 3 Address Please attach pr . UNIT HOLDI	oof of date NG OPTION Statement ult): receive physi TION & SIG restood the con ereby applicant / G eners of the apo vention or eva-	of birth of literal li	of minor Demat n of the and ES e Scheme e of DSP M orm, including the scheme of Act, Regult s per PAR are corri	node: NS CE nual repo Informatia utual Funding FATC on this fort ation, Rule	Relating Wappin appin ap	rtifica rtifica ument tilicas reiden en e	*In Guarder School Summar and Stater he relevant ect, and of, Direction plicant	case ardial Passp pool Le ment o nt Schee sts, term comple ons or a	of earn's requardid ort / eaving mail in fAddit in faddi	ach Melation an & A Other g Certification and the A Ce	If Nom lian Nam lian	Nominine i Nomininin Nominin N	nee, ple nor as like Bi ort etc. rticipan count Necount Necou	ease Moth rth Co. t (DP) Number ion Mertruction in e Gove	ment with the control of the control	Da B B B B B B B B B B B B B B B B B B B	te of irth r / / Scho	Allo Tota ol Leavi Encl C In D In D	(Mandato ocation (%) al 100% ing Certifi lose for det cransaction/ DIS Copy denda issue egulations. Ints) and he te sources cy yauthority. POA hole ents provi n payment	mat opinion of the state of the	tion: g Statement P Mutual Fund f ave understood cept the same is not designed any 0-4499 investor nan
Nomir No	oof of date NG OPTION Statement ult): receive physi TION & SIG restood the con ereby applicant of the apo restood the con ereby applicant of the ap	of birth of limits and the limits of the control of the limits and	of minor Demat n of the and ES e Scheme e of DSP M orm, including the scheme of t	node: NS CE Informaticutual Function, Rule N only rectly me h applica	Relating wapping apping	rtifica rtifica ument tilicas reiden en e	*In Guarder School Summar and Stater he releval unirement ect, and ch, Direction plicant www.	case ardial department of the control of the contro	of earn's requardidate. I// mn.coome namk de	ach Melation an & A Other g Certification and the second and the s	If Nom lian Nat lian	Nomirrith Mi proof Passpoorting Aciary Aciar	nee, ple nor as like Bi ort etc. rticipan count Necount Necou	ease Moth rth Co. t (DP) Number ion Mertruction in e Gove	menther / lertifil ID (NSD) moranns and the Scenmen	DL only) dum, Ind d cond schem it of ind	ant Sigure of the struction of the struc	Allo Tota ol Leavi ons and adules and red d docume h legitima y Statutor 208-44	(Mandato ocation (%) al 100% ing Certifi lose for det cransaction/ DIS Copy denda issue egulations. Ints) and he te sources cy yauthority. POA hole ents provi n payment	Siricate mat optor List (Holding) d by DSIS (Holding) der, iff	tion: g Statement P Mutual Fund fave understood cept the same lis not designed any 0-4499 investor nanue or if