



# IIFL Nifty ETF

(An open ended Index Exchange Traded Fund)

## APPLICATION FORM

Application No. \_\_\_\_\_

Please read the instructions before filling the Application Form

### 1. DISTRIBUTOR INFORMATION & APPLICATION RECEIPT DATE

|                            |                 |                                     |                        |
|----------------------------|-----------------|-------------------------------------|------------------------|
| Distributor Name & ARN No. | Sub-Broker Code | Employee Unique Identification No.* | 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."

|                                 |                  |                 |
|---------------------------------|------------------|-----------------|
| First/ Sole Applicant/ Guardian | Second Applicant | Third Applicant |
|---------------------------------|------------------|-----------------|

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.

### 2. TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/ AGENTS ONLY

In case the subscription amount is Rs.10,000/- or more and the Distributor has opted to receive Transaction charges Rs.150/- (for first time Mutual Fund investor) or Rs.100/- (for investor other than first time Mutual Fund investor) will be deducted from the subscription amount and paid to the Distributor. Units will be issued against the balance amount invested. Investors are advised to confirm if he/she is a First Time Mutual Fund Investor by selecting [please ✓] one of the options:-

First Time Mutual Fund Investor  Existing Investor (Note: If this section is left blank, it is assumed that the Applicant(s) is not a First Time Investor and Transaction Charges shall be accordingly deducted)

### 3. EXISTING UNITHOLDERS DETAILS (Please note that the applicant details and mode of holding will be as per the existing Folio Number) [Refer Instructions]

Existing Folio No. \_\_\_\_\_ Name of Sole/ First Unit Holder \_\_\_\_\_

In case of Applicant(s) who already have a Folio in IIFL Mutual Fund, they can provide their folio number & first holder name in Section (3) and proceed to Section (6) of the Form.

### 4. NEW APPLICANT'S DETAILS (Please fill in BLOCK LETTERS with black/blue ink, use one box for one alphabet leaving one box blank between two words)

NAME OF FIRST / SOLE APPLICANT  Mr.  Ms [Note: No Joint holding permitted in case of minor applicant]

Date of Birth (Mandatory for Minor Applicant - \*Enclose Supporting Document) 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 PAN \_\_\_\_\_

Guardian (Mandatory for Minor Applicant)  Mr.  Ms \_\_\_\_\_

Date of Birth 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 PAN \_\_\_\_\_ Relationship with Minor Applicant  Father  Mother  Legal Guardian [Note: \*Enclose Supporting Document]

#### FIRST/ SOLE APPLICANT OTHER DETAILS (Mandatory)

##### a. Status of First/ Sole Applicant [Please tick (✓)] Individual Non - Individual

Resident Individual  NRI-Repatriation  NRI-Non Repatriation  Partnership  Trust  HUF  AOP  PIO  Company  FILs  Minor through guardian  BOI  OCI  Body Corporate  LLP  Society/ Club  Foreign National Resident in India  QFI  FPI  Sole Proprietorship  Non Profit Organisation  Others \_\_\_\_\_

##### b. Occupation Details [Please tick (✓)]

Service  Private Sector  Public Sector  Government Service  Student  Professional  Housewife  Business  Retired  Agriculture  Proprietorship  Others \_\_\_\_\_

##### c. Gross Annual Income (Rs.) [Please tick (✓)] Below 1 Lac 1 - 5 Lacs 5 - 10 Lacs 10 - 25 Lacs >25 Lacs - 1 Crore >1 Crore OR

Net-worth (Mandatory for Non-Individuals) ₹ \_\_\_\_\_ as on 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 (Not older than 1 year)

##### d. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)

I am PEP  I am Related to PEP  Not Applicable

##### e. Non-Individual Investors involved/ providing any of the mentioned services

Foreign Exchange/ Money Changer Services  Gaming/ Gambling/ Lottery/ Casino Services  Money Lending/ Pawning  None of the above

ADDRESS OF FIRST/ SOLE APPLICANT [P.O. Box Address is not sufficient]

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Pin Code \_\_\_\_\_

OVERSEAS ADDRESS (in case the First Applicant is NRI/FII/PIO) [P.O. Box Address is not sufficient] {Refer Instructions}

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

#### CONTACT DETAILS OF FIRST/ SOLE APPLICANT (Please ensure that you fill in the contact details for us to serve you better)

|                 |                                                                                                    |
|-----------------|----------------------------------------------------------------------------------------------------|
| Name _____      | Phone (O) _____                                                                                    |
| Phone (R) _____ | Mobile _____ <input type="checkbox"/> I/We wish to receive updates via SMS on my mobile (Please ✓) |
| Fax _____       | e-mail _____                                                                                       |

I/We wish to receive the following documents via physical in lieu of e-mail document(s) [Please ✓]  Account Statement  Newsletter  Annual Report  All Statutory Returns / Information

MODE OF HOLDING (Please ✓)  Single  Jointly  Either/ Anyone or Survivor (Default Option : Joint)

NAME OF THE SECOND APPLICANT  Mr.  Ms \_\_\_\_\_

Date of Birth 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 PAN \_\_\_\_\_ Kindly ensure that Copy of PAN & KYC Acknowledgement Letter are enclosed to your Application Form

a. Occupation Details [Please tick (✓)]  Service  Private Sector  Public Sector  Government Service  Student  Professional  Housewife  Business  Retired  Agriculture  Proprietorship  Others \_\_\_\_\_ (please specify)

##### b. Gross Annual Income ₹ Below 1 Lac 1 - 5 Lacs 5 - 10 Lacs 10 - 25 Lacs >25 Lacs - 1 Crore >1 Crore OR Net worth ₹ \_\_\_\_\_

##### c. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Karta/ Trustee/ Whole time Directors)

I am PEP  I am Related to PEP  Not Applicable

... continued overleaf

|                     |                                                               |                       |
|---------------------|---------------------------------------------------------------|-----------------------|
|                     | <b>ACKNOWLEDGMENT SLIP (To be filled in by the Applicant)</b> | <b>IIFL Nifty ETF</b> |
| Received from _____ | ARN No: _____                                                 | Application No: _____ |

Cheque/ DD/ RTGS/ NEFT No. \_\_\_\_\_ Dated: 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Drawn on Bank & Branch \_\_\_\_\_

Scheme/ Plan/ Option/ Sub-Option \_\_\_\_\_

Amount Rs. \_\_\_\_\_

Signature, Stamp & Date

Please Note : All purchases are subject to realisation of payment instrument. This acknowledgment slip is for your reference only. Information on the form will be considered final.

NAME OF THE THIRD APPLICANT  Mr.  Ms \_\_\_\_\_

Date of Birth 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

 PAN \_\_\_\_\_ Kindly ensure that Copy of PAN & KYC Acknowledgement Letter are enclosed to your Application Form

a. Occupation Details [Please tick (✓)]  Service  Private Sector  Public Sector  Government Service  Student  Professional  Housewife  Business  Retired  Agriculture  Proprietorship  Others \_\_\_\_\_ (please specify)

b. Gross Annual Income ₹  Below 1 Lac  1 - 5 Lacs  5 - 10 Lacs  10 - 25 Lacs  >25 Lacs - 1 Crore  >1 Crore OR Net worth ₹ \_\_\_\_\_

c. Politically Exposed Person (PEP) Status (Also applicable for authorised signatories/ Promoters/ Kartal Trustee/ Whole time Directors)

I am PEP  I am Related to PEP  Not Applicable

**5. BANK ACCOUNT DETAILS (Mandatory) [Refer Instructions]** (Details of bank account in which redemption, dividend or other payments to be credited.)

Bank Name (Do not abbreviate) \_\_\_\_\_

Account No. \_\_\_\_\_ Branch / City \_\_\_\_\_

Branch Address \_\_\_\_\_

Pin Code 

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

 Account Type (Please ✓) For Residents  Savings  Current For Non-Resident  NRO  NRE  Others \_\_\_\_\_

MICR Code\* \_\_\_\_\_ RTGS/ NEFT / IFSC\* Code \_\_\_\_\_ (IFSC/ NEFT code required for Direct credit)

Please also provide a cancelled cheque leaf of the same bank account as mentioned above in case the bank account details differ from investment bank account details given in Section (7). IIFL Mutual Fund shall not be held responsible for delays or errors in processing your request if the information provided is incomplete or inaccurate. [\* indicates - Mandatory]

**6. PAYMENT DETAILS (Mandatory) [Refer Instructions]** (Details of account from which investment has been done.)

(I) Investment Amount\* \_\_\_\_\_ (II) DD Charges \_\_\_\_\_ Net Amount (I)+(II) \_\_\_\_\_

Mode of Payment (Please ✓)  Cheque  DD  RTGS  NEFT  ECS  Funds Transfer \*Cheque/ DD / RTGS / NEFT No. \_\_\_\_\_

Account Type (Please ✓)  Savings  Current  NRE  NRO  FCNR  NRSR Dated 

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Payment from Bank A/c. No. \_\_\_\_\_ Name of 1st Bank A/c holder \_\_\_\_\_

Drawn on Bank \_\_\_\_\_ Name of 2nd Bank A/c holder \_\_\_\_\_

Branch & City \_\_\_\_\_ Name of 3rd Bank A/c holder \_\_\_\_\_

Third Party Payment  No  Yes (If YES then please attach 'Third Party Declaration Form' as available on our website www.iiflmf.com)

Please enclose relevant documents as indicated below as per the Mode of Payment: (Please ✓) RTGS/ NEFT / ECS / Bank Transfer  Instruction to the Bank from the Unit holder to Debit the Account.  DD/ Pay Order/ Banker's Cheque and the like -  Declaration/ Acknowledgement from Bank  Copy of Passbook/ Bank Statement

\* Please mention the Application No., PAN and Name of the First Unit holder on the reverse of the Payment Instrument. To prevent fraudulent practices Investors are urged to make the Payment Instruments favouring "Name of the Scheme A/c. First Investor Name" OR "Name of the Scheme A/c. Permanent Account Number" OR "Name of the Scheme A/c. Folio Number" and the same should be crossed "Account Payee Only" \* To be filled in by investors residing at the location, where the AMC Branches/ CAMS Investor Service Centres are not located.

**7. Investment and Transaction Details (Refer instructions)**

IIFL Nifty ETF Subscription through (Please ✓)  Cash  Basket

In case of Cash subscription

Number of units \_\_\_\_\_ in words \_\_\_\_\_

In case of Basket subscription, kindly fill the following details, if cash component is payable by the Investor.

Cash Component per Creation unit \_\_\_\_\_ in words \_\_\_\_\_

Total Cash Component \_\_\_\_\_ in words \_\_\_\_\_

**8. NOMINATION - (Please Refer Instructions)**

The Nomination details will be as provided in your demat account.

**9. DOCUMENTS ENCLOSED (Please ✓)**

MOA & AOA  Trust Deed  Bye-Laws  Partnership Deed  Resolution/ Authorisation to invest  List of Authorised Signatories with Specimen Signature(s)  POA

**10. Demat Account Details (Optional) (Refer instructions)**

| NSDL                                                                                                                  | CDSL                          |   |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------|---|--|--|--|--|--|--|--|
| DP Name: _____                                                                                                        | DP Name: _____                |   |  |  |  |  |  |  |  |
| DP ID*: <table border="1"><tr><td>I</td><td>N</td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | I                             | N |  |  |  |  |  |  |  |
| I                                                                                                                     | N                             |   |  |  |  |  |  |  |  |
| Beneficiary Account No. _____                                                                                         | Beneficiary Account No. _____ |   |  |  |  |  |  |  |  |

The Applicant may note that in case the DP ID, Client ID and PAN Number mentioned in the Form do not match with DP ID, Client ID and PAN Number disclosed in Depository Data Base the Application is liable to be rejected.



**IIFL Mutual Fund**  
IIFL Centre, 6th Floor, Kamala City,  
Senapati Bapat Marg, Lower Parel, Mumbai - 400 013

For investment related enquiries, Investor Grievance please contact  
**IIFL Mutual Fund**  
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