

Combo Application Form for Sundaram Low Duration Fund & Sundaram Long Term Tax Advantage Fund Series V*

(*A fund with a 3 year lock-in period & a maximum tenure of 10 years. Investment upto Rs.1,50,000/- made by Individual / HUF (along with other prescribed investments) will only qualify for deduction from the gross total income under Section 80 C of the Income Tax Act, 1961 as per current tax laws.)

Channel Partner / Agent Information									Serial No: LDF & SLTTAF-S V							
Distributor's ARN & Name	Sub-broker's (code)	ARN	Sub-broke (intern		(Employee U	EUIN* inique Idendification Numl		ed Investment (RIA) Code		IS	SC's	3 S	ign	atı	ire	
ARN-105519				irm that the ELIIN i	nev has been inte	entionally left blank		T	ime	S	tan	npi	ing			
* Declaration for "Execution only" transaction (only where EUIN box is left blank) \(\) 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 inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.							Transaction charges For ₹ 10,000 and above:									
First/Sole Applicant/ Guardian		Second Applicant				Third Applicant			Upfr inve on t	ront costor to	ing Inves ommissi o the AN vestors' services	on sha IFI-reg asses	ll be p istered sment	aid dire distribu	ectly b utors b ious fa	by the based actors
1. Existing Investor Information (Please fill in your Folio No. and then proceed to Section 3) Please note that applicant details and mode of holding will be as per existing Folio Number. CKYC compliant Yes No (if no, please provide CKYC form & proof/additional documents. If yes, please provide 14 digit CKYC Number)																
2. New Investor Information (refer instruction 2)																
Name of First/Sole Applicant Gender □ Male □ Female □ Others Name and DoB as per Aadhaar card																
Permanent Account Numbe	r (PAN)*			Aadha	ar Card No					Date	of Birth*	D	M	MY	Υ	YY
Central KYC Number	r										CKYC	Proof	attach	ed (M	anda	tory)
Name of Guardian (in case of First / Sole Applicant is a Minor)/Contact Person-Designation (in case of non-individual Investors) / POA Holder Name																
Permanent Account Number	(PAN)*				Aadhaa	ar Card No.					Re	ationsh	ip			
Central KYC Numbe	r	TIT			<u> </u>	CKYC Proof attac	hed (Mandatory)	Mobile*	Ī				Ī		ī	
Father's name (mano	latory if PAN no	ot provide	d)													
0-0	The Festive	-\ Di		44 D	-4-314	First / Cala	A U									
Go Green Services (S	ave The Futur	ej: Please	provide C	ontact D	etaiis o	i First / Sole	Applicant									
STD Code		Telepho	one					Mobile								
Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode: Please tick (✓) ☐ Account Statement ☐ Annual Report ☐ Other Statutory Information																
Mode of Holding [Please (✓)] ☐ Single ☐ Joint ☐ Anyone or Survivor																
Address of First / So	le Applicant															
TOWN		CITY/ DIST	TRICT			ST	ATE			PIN	CODE					
Overseas Address (ir	case of NRIs	'Flls) (M an	datory)													
Name of Second Applicant Gender* Male Female Others Name and DoB as per Aadhaar card PIN CODE*																
Permanent Account Number	r (PAN)*			Aadha	ar Card No).				Date	of Birth*	DI	M C	MY	Υ	YY
Central KYC Numbe	r					CKYC Proof attac	hed (Mandatory)	Mobile*						\perp		
Name of Third Applicant Gender* Male Female Others Name and DoB as per Aadhaar card PIN CODE*																
Permanent Account Numbe	r (PAN)*			Aadha	ar Card No					Date	of Birth*	D	M	MY	Y	YY
Central KYC Numbe	r					CKYC Proof attac	hed (Mandatory)	Mobile*								

To be submitted along with the application form: 1. Your FATCA-CRS Details (Foreign Account Tax Compliance Act) & KYC Additional Details (if not already submitted), and 2. Ultimate Beneficial Owner(s) (UBO) information(for non-individuals only). Please quote the Central KYC (CKYC) number in the boxes provided above or submit your filled-in CKYC Form incase of new investor and additional CYKC form incase of existing investors, irrespective of the investment amount. The forms are available on our website.

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3. KYC details (Mandatory)	☐ Individual ☐ Non-Indivi	dual (Please attach mandatory Ultimate Be	neficial Ownership (UBO) declaration form)			
Status of First/Sole Applicant [Please (/)]	Occupation Details [Please (/)]	Gross Annual Income (in ₹) [Please (√)]	PEP Status			
Listed Company	(To be filled only if the applicant is an individual)	First Applicant	First Applicant			
Unlisted Company	First Applicant	☐ Below 1 Lac ☐ 1-5 Lacs	For Individuals [Please (V)] Politically Exposed			
Individual	 □ Private Sector Service □ Public Sector Service □ Government Service □ Business 	e ☐ 5-10 Lacs ☐ 10-25 Lacs	Person (PEP) Status (Also applicable for authorised signatories/Promoters/Karta/Trustee/Whole time Directors)			
Minor through guardian	□ Professional □ Agriculturist	☐ > 25 Lacs - 1 Crore ☐ > 1 Crore (or)	□ I am PEP			
HUF	☐ Retired ☐ Housewife	Net-worth (Mandatory for non-individuals) ₹	☐ I am related to PEP ☐ Not Applicable			
Partnership	☐ Student ☐ Forex Dealer	as on	For Non-Individuals providing any of the below			
Society/Club	Others (please specify)		mentioned services [Please (/)]			
Company	Second Applicant ☐ Private Sector Service ☐ Public Sector Service	`	☐ Foreign Exchange/Money Changer Services			
Body Corporate	Government Service Business	Second Applicant	☐ Gaming/Gambling/Lottery/Casino Services ☐ Money Lending/Pawning			
☐ Trust	□ Professional □ Agriculturist	□ Below 1 Lac □ 1-5 Lacs	□ None of the above			
□ Mutual Fund	☐ Retired ☐ Housewife	5-10 Lacs 10-25 Lacs	Second Applicant			
FPI	☐ Student ☐ Forex Dealer	□ >-10 Lacs □ 10-25 Lacs □ 10-25 Lacs	(To be filled only if the applicant is an individual)			
	Others(please specify)		□ I am PEP			
NRI-Repatriable	Third Applicant ☐ Private Sector Service ☐ Public Sector Service	> 1 Crore (or) Net-worth	☐ I am related to PEP			
NRI-Non-Repatriable	Government Service Business	This of position	Not Applicable Third Applicant			
FII/Sub account of FII	□ Professional □ Agriculturist	☐ Below 1 Lac ☐ 1-5 Lacs	(To be filled only if the applicant is an individual)			
Fund of Funds in India	☐ Retired ☐ Housewife	☐ 5-10 Lacs ☐ 10-25 Lacs	□ I am PEP			
QFI	☐ Student ☐ Forex Dealer	□ > 25 Lacs - 1 Crore	☐ I am related to PEP			
Others(please specify	Others (please specify)	☐ > 1 Crore (or) Net-worth	☐ Not Applicable			
4. FATCA-CRS DETAILS Fo	or Individuals & HUF (Mandatory)	Non Individual investors should mandate	orily fill separate FATCA-CRS Annexure			
	red for all applicant(s) / guardian / PoA					
Category	First Applicant/Guardian	Second Applicant	Third Applicant			
Are you a Tax Resident of Country other than India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No			
2. Is your Country of Birth/ citizenship other than India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No			
3. Is your Residence address / Mailing address / Telephone No. other than in India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No			
Is the PoA holder / person to whom signatory authority is given, covered under any of the categories 1, 2 or 3 above?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No			
If you have answered YES to	any of above, please provide the below	v details				
Country of Tax Residence						
Nationality						
Tax Identification Number ^{\$} or Reason for not providing TIN						
Identification Type (TIN or Other, please specify)						
Residence address for tax purposes (include City, State, Country & Pin code)						
Address Type	□ Residential or Business □ Residential □ Business □ Registered Office	□ Residential or Business □ Residential □ Business □ Registered Office	☐ Residential or Business☐ Residential ☐ Business☐ Registered Office			
City of birth						
Country of birth						

\$ In case any of applicant being resident/ tax payer in more than one country, provide tax identification number for each such country separately.

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FATCA-CRS Instructions

Details under FATCA-CRS/Foreign Tax Laws: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income Tax Rules 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities/appointed agencies. If you have any questions about your tax residency, please contact your tax advisor. Should there be any *change in any information provided by you, please ensure you advise us* promptly, *i.e., within 30 days*. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

If you are a US citizen or resident or greencard holder, please include United States in the Country of Tax Residence field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

\$ It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet

available or has not yet been issued, please provide an explanation with supporting doucments and attach this to the form. 5. Bank Account Details of First/Sole Applicant (as per SEBI Regulations it is mandatory) Account No Name of the Bank Branch **Branch Address** Bank City (redemption will be payable at this location) Cheque MICR No Account Type [Please (✓)] Savings
Current NRE* NRO* FCNR* Others.... RTGS / NEFT / IFSC Code *If the payment is by DD or source of fund is not clear on the Cheque leaf, please provide a copy of FIRC. 6. Mode of payment of redemption/dividend proceeds via Direct credit/NEFT/Other Mode Direct Credit is now available with: Axis Bank, BNP Paribas Bank, Citibank, Deutsche Bank, HDFC Bank, HSBC Bank, ICICI Bank, IDBI Bank, IndusInd Bank, Kotak Mahindra Bank, SBI, Standard Chartered Bank, YES Bank. If your bank falls in this list your Redemption/ Dividend proceeds will be directly credited to your account. Alternatively, you will receive the payment through NEFT mode based on the bank details available. Otherwise, payment will be made by way of a cheque/demand draft/warrant. Purchase - Cheque should be in favour of "Sundaram Low Duration Fund" For availing switch benefit to Sundaram Long Term Tax Advantage Fund Series V, please submit this Sundaram Low Duration Fund Purchase cum switch form before 17/09/2018 Sundaram Low Duration Fund Plans: Regular - Growth Direct - Growth ☐ RTGS/NEFT (Ref.No.....) Mode of payment: ☐ Cheque ☐ DD ☐ Fund Transfer Bank (on which Cheque is drawn or by which Demand Draft is issued) **Amount (figures)** Amount (in words) Cheque/DD Date Cheque/DD No (attach a cancelled cheque leaf) In case of third party payment, please furnish the duly filled-in third party declaration, form available at www.sundarammutual.com. □ Switch - Switches will happen on the Closing date of NFO - Sundaram Long Term Tax Advantage Fund Series V From: Sundaram Low Duration Fund To: Sundaram Long Term Tax Advantage Fund Series V Plans: Regular-Growth ☐ Regular ☐ Direct Direct-Growth Options:
Growth Dividend Payout Dividend Sweep# ☐ Regular Growth ☐ Direct Growth #Dividend Sweep Option (Target Fund) I hereby request you to switch all units allotted in Sundaram Low Duration Fund to the extent of amount invested through this application form, subject to the terms & conditions of Sundaram Long Term Tax Advantage Fund Series V. Turn overleaf for Declaration & ≤Signature (Mandatory) → → → Time Stamp/Seal Request Date: Acknowledgement Application No:... Folio No: .. We acknowledge with thanks the receipt of Combo application form for investment in Sundaram Low Duration

Sundaram Asset Management

SLTTAF-S V

Fund and switch to Sundaram Long Term Tax Advantage Fund Series V*.

(*A fund with a 3 year lock-in period & a maximum tenure of 10 years. Investment upto Rs.1,50,000/- made by Individual / HUF (along with other prescribed investments) will only qualify for deduction from the gross total income under Section 80 C of the Income Tax Act. 1961 as per current tax laws.)

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7. Nominee (available only for individua	ls) (refer instruction 10)	☐ I wish to nominate the follo	wing person(s)					
1st Nominee	2nd Nominee		3rd Nominee					
Name:Relationship:								
Address:								
1								
Proportion (%)* in which units will be shared nominee	d by first Proportion (%)* i nomineeIf nominee is a n		Proportion (%)* in which units will be shared by first nominee					
Name of Guardian:	Name of Guard	an:	Name of Guardian:					
Address of Guardian:		ian:	Address of Guardian:					
Proportion (%) in which units will be shared by each nominee s I do not wish to choose a nominee. Si	00 0	Sole Applicant / Guardian 2:	nd Applicant 3rd Applicant					
apply for units under the scheme(s) as indicated in the for Auto Debit • have not received nor been induced with the current application will result in the total inv	contents of the Statement of A he application form • agree to a by any rebate or gifts, directly restments exceeding ₹ 50,000 nissions (in the form of trail com	dditional Information/Scheme Information abide by the terms, conditions, rules and n or indirectly in making this investment • d in a financial year or a rolling period of two	Document/addenda issued to the SID and KIM till date • hereby egulations of the scheme(s) • agree to the terms and conditions o not have any existing Micro SIPs/investments which together elve months (applicable for PAN exempt category of investors). In for the different competing Schemes of various Mutual Funds					
	om funds in my/our Non-Resid		reby confirm that the funds for subscription have been remitted bunt on a \square Repatriation Basis \square Non-Repatriation Basis. I/We					
Management, its sponsor, their employees, authoris above particulars being false, incorrect or incomple Management to disclose, share, remit in any form, n by me/us, to any Indian or foreign governmental or	ed agents, service providers, re te or in case of my/our not inti node or manner, all/any of the i r statutory or judicial authoritie	presentatives of the distributors liable for mating/delay in intimating any changes to nformation provided by me/ us, including s/agencies, the tax/revenue authorities, o	e and belief. I/ We further agree not to hold Sundaram Asset any consequences/losses/costs/damages in case of any of the the above particulars. I/We hereby authorise Sundaram Asset all changes, updates to such information as and when provided ther investigation agencies and SEBI registered intermediaries in that may be required in connection with this application.					
Certification: I/We have understood the information requirements of this Form (read along with the FATCA-CRS Instructions), stated in pages 1-24 and hereby certify that the information provided by me/us on this Form is true, correct, and complete. I/We also confirm that I/We have read and understood the FATCA-CRS Terms and Conditions and hereby accept the same.								
We agree to indemnify Sundaram Asset Managem or U.S. federal income tax purposes. or in respect of			incomplete information regarding my/our "U.S. person" status					
☐ (Applicable only for investments through under Direct Plan under the above mentioned A		ion: I/We, the above-named person/s I	nave invested in the Scheme(s) of Sundaram Mutual Fund					
I/We hereby give you my/our consent to share/ Schemes managed by you, to the below mention AMFI Registration Number:	•	-	pect of my/our investments under Direct Plan of all Correction – Advisor): ARN - SEBI Registration No.					
Name:								
Address:								
City PIN:								
E-Mail ID:								
Tel.No:								
Name of First / Sole Applicant / Gua	rdian Nam	e of Second Applicant	Name of Third Applicant					
Signature of First / Sole Applicant / Guardian Signature of Second Applicant Signature of Third Applicant								
Date:////	·		Place:					
	_	Particulars						
Scheme Name / Plan / Option	Cheque/DD/Payment Instrumen Number/Date	Drawn on (Name of Bank & Branch)	Amount in figures (₹) & Amount in words					
Sundaram Low Duration Fund Plans □ Regular - Growth □ Direct - Growth								