

APPLICATION FORM FOR UNION KBC EQUITY FUND

Application No. 5000075



(Please read the instructions carefully and complete the relevant section legibly in black / dark coloured ink and in BLOCK LETTERS.)

Broker Code/ ARN	Sub-Broker Code/ Lead Generator Code	Branch Code	MO Code	Collection Date	D	D	M	M	Y	Y	Y	Y
				Time Stamping								

Any upfront commission shall be paid directly by the investor to the AMFI registered distributors based on the investors assessment of various factors including the service rendered by the distributor.

1. EXISTING UNIT HOLDER INFORMATION (Please complete Section 1, 6 & 8 only) * Mandatory

Folio No. _____ Application through ASBA [Please shade (●)] Yes No (Refer Section 'G' of instructions)

2. APPLICANT INFORMATION *[Please shade (●)] (Refer Section 'B' and 'C' of instructions) (Please ensure that the details mentioned matches with the KYC details)

Name of First Applicant / Non-individual Investor (First time investors, please fill in all the blocks) _____ Date of Birth (Mandatory in case of minor) D D M M Y Y Y Y

Mr. Ms. M/s.

Name of Guardian (In case of minor) / PoA Holder / Contact Person (In case of Non-individual Investors)

Mr. Ms.

Relationship with Minor (Please attach proof for date of birth and relationship) Mother Father Legal Guardian Designation of Contact Person (For Non-individual Investor)

Name of Second Applicant

Mr. Ms.

Name of Third Applicant

Mr. Ms.

PAN and KYC* [Please shade (●)] (Not applicable for Micro SIP and investor(s) from Sikkim)			Mode of Holding	Status
Applicant Details	PAN *Please attach Proof	Know Your Client (KYC)		
First Applicant		<input type="radio"/> KYC Proof	<input type="radio"/> Single	<input type="radio"/> Resident Individual <input type="radio"/> Minor <input type="radio"/> HUF
Second Applicant		<input type="radio"/> KYC Proof	<input type="radio"/> Joint (Default option)	<input type="radio"/> Sole Proprietor <input type="radio"/> FII <input type="radio"/> Bank
Third Applicant		<input type="radio"/> KYC Proof	<input type="radio"/> Anyone or Survivor	<input type="radio"/> NRI-NRE <input type="radio"/> NRI-NRO <input type="radio"/> PIO-NRE
Guardian/ PoA Holder		<input type="radio"/> KYC Proof		<input type="radio"/> PIO-NRO <input type="radio"/> Society <input type="radio"/> Trust
OCCUPATION <input type="radio"/> Service <input type="radio"/> Housewife <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Retired <input type="radio"/> Student <input type="radio"/> Political Rep. <input type="radio"/> Others (Please Specify)				<input type="radio"/> Partnership Firm <input type="radio"/> Govt. Entity <input type="radio"/> Company (Please Specify)

3. CONTACT INFORMATION (Refer Section 'I' of instructions)

Mailing address of First Applicant / Non-individual Investor (P. O. Box address is not sufficient.)

City _____ State _____ Pin Code _____

Overseas address (Mandatory for NRI/FII. P. O. Box address is not sufficient. Investors residing overseas and with P. O. Box address please provide your Indian address)

City _____ Country _____ Area Code _____

Contact details of First Applicant/ PoA Holder/ Contact Person (Refer Section I of Instructions) (Please ensure to mention Country and Area Code)

Tel. (Off.)	Country/ Area code	Mobile	Country/ Area code
Tel. (Res.)	Country/ Area code	Fax	Country/ Area code
E-mail _____			



4. INVESTOR PROFILE [Please shade (●)]

	Gender	Annual Income (₹)				Annual Savings (₹)			
First Applicant	<input type="radio"/> M <input type="radio"/> F	<input type="radio"/> <2L	<input type="radio"/> 2L-5L	<input type="radio"/> 5L-10L	<input type="radio"/> >10L	<input type="radio"/> <1L	<input type="radio"/> 1L-3L	<input type="radio"/> 3L-5L	<input type="radio"/> >5L
Second Applicant	<input type="radio"/> M <input type="radio"/> F	<input type="radio"/> <2L	<input type="radio"/> 2L-5L	<input type="radio"/> 5L-10L	<input type="radio"/> >10L	<input type="radio"/> <1L	<input type="radio"/> 1L-3L	<input type="radio"/> 3L-5L	<input type="radio"/> >5L
Third Applicant	<input type="radio"/> M <input type="radio"/> F	<input type="radio"/> <2L	<input type="radio"/> 2L-5L	<input type="radio"/> 5L-10L	<input type="radio"/> >10L	<input type="radio"/> <1L	<input type="radio"/> 1L-3L	<input type="radio"/> 3L-5L	<input type="radio"/> >5L
Risk Tolerance	<input type="radio"/> Low <input type="radio"/> Medium <input type="radio"/> High	Investment Horizon		<input type="radio"/> 1-12 months	<input type="radio"/> 12-24months	<input type="radio"/> 24-36 months	<input type="radio"/> 36 months and above		

6A DEBIT MANDATE FOR UNION KBC EQUITY FUND (Lumpsum Investment) (For Union Bank of India account holders only)

Application No. 5000075

To be detached by the Registrar (CAMS Pvt. Ltd.) and presented to Union Bank of India.

To Branch Manager - Union Bank of India

Date ____/____/____

I / We _____

authorise you to debit my / our Account No. _____ ₹ (in figures) _____

₹ (in words) _____ to pay for the purchase of units of Union KBC Equity Fund.

Signature of Account Holder(s) / Authorised Signatory(ies)
(As per Bank records)

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Application No. 5000075



Received from: Mr./ Ms. /M/s _____

an application for units of _____ (Scheme/Option)

Instrument No _____ Amount _____

Collection centre's stamp with date and time of receipt

For Office use only

NFO OPENS ON : May 20, 2011

CLOSES ON : June 03, 2011

5. BANK ACCOUNT DETAILS* [Please shade (●)] (Refer Section 'D' of instructions) (Multiple Bank Accounts Registration form available at www.unionkbc.com)

Bank Name												
Bank A/C No						Bank Branch						
A/C Type	<input type="radio"/> Savings	<input type="radio"/> Current	<input type="radio"/> NRE	<input type="radio"/> NRO	<input type="radio"/> FCNR	<input type="radio"/> Others	(Please Specify)					
Bank City						State					PIN	
IFSC CODE						MICR CODE						
Document Attached	<input type="radio"/> Bank Statement	<input type="radio"/> Cancelled cheque with name pre-printed	<input type="radio"/> Pass Book	In case bank details are not provided in 'Multiple Bank Account Registration Form' as default bank, the above section 5 bank details shall be treated as default bank.								
(IFSC Code is the 11 digit no appearing on your cheque leaf, mandatory for credit via NEFT/ RTGS) (MICR Code is the 9 digit code next to the cheque no)												

6. INVESTMENT AND PAYMENT DETAILS* [Please shade (●)] (Refer Section 'E' and 'F' of instructions) (Third Party payment(s) will not be accepted)

Scheme	U N I O N K B C E Q U I T Y F U N D											
Option	<input type="radio"/> Growth (Default)	<input type="radio"/> Dividend Pay Out	<input type="radio"/> Dividend Reinvestment	<input type="radio"/> Dividend Sweep	(Default option/sub option will be applied incase of no information, ambiguity or discrepancy)							
Dividend Sweep to	U N I O N K B C											
Option						Sub Option						

LUMP SUM	Payment Mode:	<input type="radio"/> Cheque	<input type="radio"/> DD	<input type="radio"/> RTGS	<input type="radio"/> NEFT	<input type="radio"/> Fund Transfer	<input type="radio"/> Debit Mandate (Union Bank of India A/C Holders only)		
	Cheque / DD / RTGS / NEFT No.						Cheque / DD / RTGS / NEFT Date	D D M M Y Y Y Y	
	Amount in ₹ (Figures)							Amount in ₹ (words)	
	Source Bank Name						Source Branch		
	Source Bank A/C No.						Account Type	<input type="radio"/> Savings <input type="radio"/> Current <input type="radio"/> NRE <input type="radio"/> NRO <input type="radio"/> FCNR	
<input type="radio"/>	Cheque Issuer Name	In case the cheque is issued by a person other than the investor							
	Document attached in the case of third party payments	<input type="radio"/> Proof / Bank Certificate for DD	<input type="radio"/> Third Party Declarations						

MICRO SIP	<input type="radio"/> SIP Through Post Dated Cheques (Available only during the Ongoing Offer Period)	<input type="radio"/> SIP Through Auto Debit (Please fill and attach the SIP Auto Debit Form) (Available during NFO and Ongoing Offer Period)				
	SIP Period From	D D M M Y Y Y Y To D D M M Y Y Y Y	SIP Date	<input type="radio"/> 2nd <input type="radio"/> 8th <input type="radio"/> 15th <input type="radio"/> 23rd		
	SIP Frequency	<input type="radio"/> Monthly <input type="radio"/> Quarterly	Instalment Amount in ₹ (Figures)	No. of Instalments		
	Cheque Nos.	From To	Drawn on Bank A/c No.			
SIP	Bank Name				Branch	
	Document Details in case of Micro SIP [^]	Document Description	Document No. (if any)			
<input type="radio"/>	I/We here by declare that we do not have any existing SIPs which together with the current application, in a rolling 12 month period, or in a financial year i.e. April to March, will result in aggregate investments exceeding ₹ 50,000/-.					

7. NOMINATION DETAILS* [Please shade (●)] (Refer Section 'H' of instructions) (In case of multiple nominees, please complete the separate nomination form available on our website)

Please register nomination as requested below I/ We wish to nominate multiple nominees[®] I/ We do not wish to nominate[®]
([®]Please strike out the form below)

I/We hereby nominate the under mentioned Nominee to receive the amounts to my / our credit in the event of my / our death. I/We also understand that all payments and settlements made to such Nominee shall be a valid discharge by the AMC / Mutual Fund / Trustee.

Name of the Nominee : _____ Address : _____

Relationship : _____ Date of Birth (In Case of Minor) ____/____/____

Name of the Guardian (in case of minor): _____ Signature of Nominee/ Guardian (not mandatory) _____

8. DECLARATION & SIGNATURES* (Refer Section 'J' of instructions)

Having read and understood the terms and contents of the Scheme Information Document (SID), Statement of Additional Information (SAI), Key Information Memorandum (KIM), and the relevant addenda, if any of Union KBC Equity Fund, I/We, hereby apply to the Trustees of Union KBC Mutual Fund for Units of the Union KBC Equity Fund and agree to abide by the terms and conditions, rules and regulations of the said Scheme. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/We hereby nominate the above nominee(s) to receive all the amounts to my/our credits in the event of my/our death and have read the instructions for nomination. I understand that acknowledging receipts my/our credit will constitute full discharge of liabilities of Union KBC Mutual Fund. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulations, Rules, Notifications, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. 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. Applicable to NRIs only: I/We confirm that I am / We are Non-Resident(s) of Indian Nationality / Origin and I/We hereby confirm that the funds for subscriptions have been remitted from abroad through normal banking channels or from fund in my/our Non Resident External / Ordinary account/ FCNR account(s).

Signature Sole / First Applicant / Guardian / POA / Authorised Signatory	Signature Second Applicant / POA / Authorised Signatory	Signature Third Applicant / POA / Authorised Signatory
---	--	---

Document Checklist	Individual	Company	Society	Partnership Firms	Investment through POA	Trusts	NRI
PAN Card (not required for Micro SIP/ investor(s) from Sikkim)	✓	✓	✓	✓	✓	✓	✓
KYC Acknowledgement	✓	✓	✓	✓	✓	✓	✓
Resolution/ Authorisation to invest		✓	✓			✓	
List of authorised signatories with specimen signatures		✓	✓	✓	✓	✓	
Memorandum & Articles of Association		✓					
Trust Deed						✓	
Bye-laws			✓				
Partnership Deed				✓			
Notorised POA (signed by investor and POA Holder)					✓		
Bank Account Proof	✓	✓	✓	✓	✓	✓	✓

Please address all future communication(s) in connection with this application to the Registrar & Transfer Agent of the scheme

Computer Age Management Services Pvt. Ltd.,

Unit: Union KBC Mutual Fund

148, Old Mahabalipuram Road, Okkiyam Thuraiyakkam, Chennai - 600097.



Union KBC Asset Management Company Pvt. Ltd.

7th Floor, Piramal Tower, Peninsula Corporate Park, Ganpatrao Kadam Marg, Lower Parel (W), Mumbai - 400013.

Toll Free : 1800 200 2267 | Tel No. : 022 24833333

Website: www.unionkbc.com | Email : investorcare@unionkbc.com

SYSTEMATIC INVESTMENT PLAN (SIP) - AUTO DEBIT FORM

Registration Cum Mandate Form For ECS (Debit Clearing) / Direct Debit

(Please read the instructions overleaf carefully and complete the relevant section legibly in black / dark coloured ink and in BLOCK LETTERS.)

Broker Code/ ARN	Sub-Broker Code/ Lead Generator Code	Branch Code	MO Code	Collection Date
				D D M M Y Y Y Y
				Time Stamping

Any upfront commission shall be paid directly by the investor to the AMFI registered distributors based on the investors assessment of various factors including the service rendered by the distributor.

1. APPLICANT INFORMATION [Please shade (●)] (Refer Section 'A and B' of Instructions)

Folio No.	(For Existing Unit Holders)	OR	Application No. 5000075	(For New Investors)
Name of First Applicant/ Unit Holder [Please shade (●)]			Permanent Account Number (PAN)	

2. INVESTMENT DETAILS [Please shade (●)] (Refer Section 'C' of Instructions) *Please allow minimum 30 days for ECS/ Direct Debit/ Standing Instructions to register and start.*

New SIP Registration SIP Renewal Change in SIP Bank Mandate Micro SIP

Scheme	U N I O N	K B C		
Option	Sub Option		Dividend Frequency	
SIP Period From	D D M M Y Y Y Y	To	D D M M Y Y Y Y	SIP Date
				<input type="radio"/> 2nd <input type="radio"/> 8th <input type="radio"/> 15th <input type="radio"/> 23rd
SIP Frequency	<input type="radio"/> Monthly <input type="radio"/> Quarterly		SIP Amount in ₹ (Figures)	
First SIP Cheque/DD No	Cheque/DD Amount in ₹		Dated	
				D D M M Y Y Y Y
Document attached in the case of third party payments		<input type="radio"/> Proof / Bank Certificate for DD <input type="radio"/> Third Party Declarations		
Document Details in case of Micro SIP	Document Description			
	Document No.(if any)			

3. BANK ACCOUNT DETAILS (as per Bank records) [Please shade (●)] (Refer Section 'D' of Instructions)

I/We hereby, authorise Union KBC Mutual Fund and their authorised service providers, to debit my/our following bank account through ECS (Debit Clearing)/Auto debit to account for collection of SIP payments.

Bank Account Number	(please provide Core Banking Account Number only)			
Account Type	<input type="radio"/> Savings	<input type="radio"/> Current	<input type="radio"/> NRE	<input type="radio"/> NRO
		<input type="radio"/> FCNR	<input type="radio"/> Others (Please Specify)	
Name of Sole/ First Bank Account Holder				
Name of Second Bank Account Holder				
Name of Third Bank Account Holder				
Name of Bank				
Branch & City				PIN
IFSC CODE	MICR CODE		Mandatory to submit a cancelled cheque leaf of the bank account mentioned here	
(IFSC Code is the 11 digit no appearing on your cheque leaf, mandatory for credit via NEFT/ RTGS) (MICR Code is the 9 digit code next to the cheque no)				

4. DECLARATION & SIGNATURES (Refer Section 'E' of Instructions)

I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above to debit my/our account directly or through participation in ECS. If the transaction is delayed or not effected for reasons of incomplete or incorrect information, I / We would not hold the user institution responsible. I / We will also inform AMC, about any changes in my/our bank account. I/We do not have any existing SIP/Micro SIPs which together with the current Micro SIP application will result in aggregate investments exceeding ₹ 50,000 in a year (applicable to Micro SIP investors only). 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 have read and agreed to the terms and conditions mentioned in SID/KIM.

Signature Sole / First Applicant / Guardian / POA / Authorised Signatory	Signature Second Applicant / POA / Authorised Signatory	Signature Third Applicant/ POA / Authorised Signatory
--	---	---

5. AUTO DEBIT AUTHORISATION BY BANK ACCOUNT HOLDER (Refer Section 'F' of Instructions)

The Branch Manager

Bank	Branch
A/C No	

This is to inform that I/We have registered for the RBIs Electronics Clearing Service (Debit Clearing)/Auto debit-facility and that my payment towards my SIP installments of Union KBC Mutual Fund shall be made from my/our above mention bank account with your bank. I/We authorise the representative carrying this ECS/Auto debit form to get it verified and executed. I/We hereby authorise you to debit verification charges if any from my account.

Signature First Account holder's (As in Bank Records)	Signature Second Account holder's (As in Bank Records)	Signature Third Account holder's (As in Bank Records)
--	---	--

FOR BANK USE ONLY

I/We hereby certify that the particulars furnished above are correct as per our records and we hereby declare that the copy of this form, duly completed, has been submitted to us.

Recorded on	D D M M Y Y Y Y	Recorded by
Branch		

Bank Stamp and Signature of Authorised Bank Official

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Application No. 5000075

SIP through ECS /Auto Debit Form

Folio No./ Application No.	
----------------------------	--

Received from: Mr./ Ms. /M/s _____ Dated ___/___/___

First Cheque No. _____ Dated ___/___/___ Amount (₹) _____

Scheme / Option / Frequency _____

Amount (₹) _____ SIP Period _____ Date of Commencement ___/___/___

Collection centre's stamp with
date and time of receipt

For Office use only