

Minor Attains Majority Request Form



SUNDARAM MUTUAL
— Sundaram Finance Group —

Folio Number(s):	Folio 1	Folio 2	Folio 3

First Name

Middle Name

Last Name

This is to inform you that I, (Name as per PAN card*), have attained the age of majority and you are requested to remove the Registered Guardian (Name) for the referred folios, kindly update my details provided below for which supporting documents are being enclosed.

I am submitting the following documents herewith:

1. Self-Attested KYC Acknowledgment.
2. Self-Attested Pan Card Copy (for date of birth and identification proof).
3. Bank Details (to update missing information or New Bank details)
4. **FATCA** (Foreign Account Tax Compliance Act) & **Additional KYC Details**.
5. Signature Attestation

1. Investor Details (Erstwhile Minor) - Mandatory

Date of Birth	D	D	M	M	Y	Y	Y	Y	<input type="checkbox"/> Yes, I am submitting a KYC Acknowledgment
PAN & KYC									<input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI (Repatriable) <input type="checkbox"/> NRI (Non-Repatriable)
Tax Status									

2. Go Green Services: To Update Contact Details and Family Code

E-Mail*																																				
STD													Telephone											Mobile*												

*Please tick (✓) the Family Code for the Mobile Number and Email ID provided

*Mandatory

- EMAIL:** Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian
- MOBILE:** Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian

Default Communication mode is E-mail only, if you wish to receive following document(s) via physical mode:

Please tick (✓) Annual Report Other Statutory Information

3. Bank Details (Cancelled original cheque of the new bank account with name and account number pre-printed is required to be enclosed.)

Bank Name						IFSC/RTGS Code#					
Account No.						Account Type					
Bank Branch & City											

*(11 character code printed on a cheque / passbook)

4. Additional KYC Information (Please tick (✓) whichever is applicable) - Mandatory

OCCUPATION	Private Sector Service	Public Sector Government Service	Business	Professional	Agriculturist	Retired	Student	Forex Dealer	Others	Others
1st Holder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specify

GROSS ANNUAL INCOME	Below 1 Lac	1-5 Lacs	5-10 Lacs	10-25 Lacs	> 25 Lacs - 1 Crore	> 1 Crore
1st Holder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PEP Status: a Politically Exposed Person Related to a Politically Exposed Person Neither (Not Applicable)

5. FATCA-CRS DETAILS (Mandatory)

Category	First Applicant
1. Are you a Tax Resident of Country other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is your Country of Birth/ citizenship other than India?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Is your Residence address / Mailing address / Telephone No. other than in India?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you have answered YES to any of above, please provide the below 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	<input type="checkbox"/> Residential or Business <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> 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 of such country separately.

6. Nomination Details - Mandatory

I / We wish to nominate. (Proportion (%) in which units will be shared by each nominee should aggregate to 100%. In case of single nominee default proportion will be 100%.)

	Nominee Name and Address	Nominee PAN	Relationship with applicant	If nominee is minor*		Allocation (%)	Nominee Signature
				Guardian Name	Date of Birth		
1							
2							
3							

*In case of each Minor as Nominee, please mention Guardian's relationship with Minor as Mother / Father / Legal Guardian & Attach proof like Birth Certificate / School Leaving Certificate / Passport / Others.

I / We DO NOT wish to nominate

Nomination Declaration: I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in nonappointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

7. Declaration and Signature of the Applicant - Mandatory

I have attached herewith all the relevant / required documents as indicated.

I confirm that the information provided above is true and correct to the best of my knowledge and belief.

I undertake to keep Sundaram Mutual Fund / its AMC/RTA informed about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required by the AMC / RTAs.

I hereby authorize Sundaram Mutual Fund and its AMC/RTA to share/disclose any of the information provided by me/us, including any changes in respect thereof to the Mutual Fund's Bankers or my Distributor / Investment Advisor and to such other service providers as may be necessary for any operational reason, including to verify/validate my / our bank account details. I / We also authorize Sundaram Mutual Fund & its AMC/RTA to provide/share any of the information provided by me/us including my holdings in the Mutual Fund to any governmental or statutory or judicial authorities/agencies as required by law without any obligation of informing me/us of the same.

Place _____ Date _____ Signature of Applicant _____

8. Signature Attestation

My signature hereinbelow has been attested by the Guardian on record My bankers Notary / JMFC

Signature of First Holder (Major)	Attestation by Guardian**	Attestation by Registered Bank/ Notary/ Judicial Magistrate First Class
Name of the first holder	Registered Guardian's Name	Seal with attester's name, designation and employee number

Mutual fund investments are subject to market risks, read all scheme related documents carefully before investing.

Please refer the instructions given below

Instruction: Update of PAN/KYC

In case of Registration of PAN / KYC (Know Your Client), Mutual funds shall collect the following supporting documents:

- Self-attested PAN Copy in case of registration of PAN.
- Self-attested KYC acknowledgement copy in case of registration of KYC. For those who are not KYC compliant, please refer the below links to download KYC forms: https://www.sundarammutual.com/pdf2/kyc/CKYC_Individual_Form_June_2021_V1.pdf

Instruction: To Update Contact Details and Family Code

Go Green E-Update Services: By providing details of your email address and mobile number with family code, you will receive your account statement and important alerts by paperless mode, in an efficient and timely manner. You would also be contributing to the environment. The investor is deemed to be aware of security risks including interception of documents and availability of content to third parties.

Instruction: Bank Details

For Change of Bank Mandate, the investor should submit:

Existing Bank details (any one of the below) #	New Bank Details (any one of the below)
(1) Cancelled original cheque (bearing account number and name on the face of the cheque);	(1) Cancelled original cheque of the new bank account with name and account number printed thereon;
(2) Self-attested copy of bank statement;	(2) Self-attested copy of bank statement;
(3) Self-attested old Bank passbook with entries for 3 months prior to closure date;	(3) Self-attested bank passbook with current entries not older than 3 months;
(4) Original letter by the existing Bank on their letter head duly signed and stamped by branch manager/authorised officials;	(4) Original letter by the Bank on their letter head duly signed and stamped by branch manager/authorised officials.
(5) In case such bank account is already closed, a duly signed and stamped original letter from the bank confirming the closure of bank account. (copy enclosed)	

#In case of non-availability of above documents, investor should give declaration. Please download the Declaration form from our website: https://www.sundarammutual.com/pdf2/2018/App_form/COB_Declaration.pdf

#In addition, the investor should provide a self attested copy of any one of the ID proof with address viz. PAN, Passport, driving license etc.

Remarks:

- Separate forms need to be filled for separate folios of the investor.
- In the event of a request being invalid/incomplete/ signature mismatch etc the request will be liable for rejection.

Cooling Period:

Redemption pay-out will be processed after a 10 days' cooling period whenever any change of bank mandate request is received simultaneously with, or just prior to submission of, a redemption request, as a matter of precaution against unauthorized/fraudulent transactions.

Instruction: FATCA CRS Details

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 documents and attach this to the form.

Instruction: Nominee Details

Please indicate a nominee who should be entitled to the benefits of your investment in the event of an untoward development. Where a folio has joint holders, all holders should sign the request for nomination even if the mode of holding is not "joint." Every new nomination for a folio/account will overwrite the existing nomination. Nomination is not applicable in case of non-individuals or when the account/folio is held on behalf of a minor. Nomination forms cannot be signed by Power of Attorney Holders.

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Know Your Client Application Form

(For Individuals)



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Appln. No.:		KYC No.:			Appln. Type: <input type="radio"/> New <input type="radio"/> Update	
CKYC ID NO						
<input type="radio"/> PAN <input type="radio"/> PAN Exempt (Form 60)		PAN:			EX NO :	
PAN EXEMPT REASON						PHOTOGRAPH
<input type="radio"/> PERSONAL DETAILS						
APPLICANT NAME*						
MAIDEN NAME (If any)						
FATHER / SPOUSE NAME*						
MOTHER NAME						Signature / Thumb Impression
DATE OF BIRTH*		/ /	GENDER*		<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender	
CITIZENSHIP*		<input type="radio"/> Indian <input type="radio"/> Others	MARITAL STATUS*		<input type="radio"/> Married <input type="radio"/> Unmarried <input type="radio"/> Others	
RESIDENT STATUS*		<input type="radio"/> Resident <input type="radio"/> Non Resident <input type="radio"/> Foreign National <input type="radio"/> Person of Indian Origin				
OCCUPATION		<input type="radio"/> S – Service <input type="radio"/> Pvt. Sector <input type="radio"/> Public Sector <input type="radio"/> Govt. Sector <input type="radio"/> O – Others <input type="radio"/> Professional <input type="radio"/> Self Employed <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> B – Business <input type="radio"/> X – Not Categorized				
<input type="radio"/> IDENTITY AND ADDRESS DETAILS* (Any one of the below documents to be submitted)						
OFFICIALLY VALID DOCUMENT DETAILS	<input type="radio"/> Passport					
	<input type="radio"/> Voter ID					
	<input type="radio"/> Driving License					
	<input type="radio"/> MNREGA Job Card					
	<input type="radio"/> NPR Letter					
	<input type="radio"/> Proof of Possession of Aadhaar					
	<input type="radio"/> Online E-KYC Authentication**					
	<input type="radio"/> Offline Verification of Aadhaar**					
PERMANENT / OVERSEAS ADDRESS*						
ADDRESS TYPE		<input type="radio"/> Residence/Business <input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Regd. Office <input type="radio"/> Unspecified				
ADDRESS LINE 1*						
ADDRESS LINE 2						
ADDRESS LINE 3						
CITY*				PINCODE / ZIP*		
DISTRICT*						
STATE / U T*				STATE CODE*		
COUNTRY*				COUNTRY CODE*		
CURRENT ADDRESS (TO BE PROVIDED IF DIFFERENT FROM ABOVE ADDRESS)						
SAME ADDRESS AS AVAILABLE IN OFFICIALLY VALID DOCUMENT PROVIDED ABOVE* <input type="radio"/> YES <input type="radio"/> NO						
PROOF OF ADDRESS FOR CURRENT ADDRESS@	<input type="radio"/> Passport					
	<input type="radio"/> Voter ID					
	<input type="radio"/> Driving License					
	<input type="radio"/> MNREGA Job Card					
	<input type="radio"/> NPR Letter					
	<input type="radio"/> Proof of Possession of Aadhaar					
	<input type="radio"/> Online E-KYC Authentication**					
	<input type="radio"/> Offline Verification of Aadhaar**					
	<input type="radio"/> Deemed Proof of Address		<input type="radio"/> Utility Bill & <input type="radio"/> Property / Municipal Tax Receipt <input type="radio"/> Pension / Family Pension Payment Orders # <input type="radio"/> Letter of Allotment of Accommodation §			

Know Your Client Application Form

(For Individuals)



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ADDRESS TYPE	<input type="radio"/> Residence/Business <input type="radio"/> Residence <input type="radio"/> Business <input type="radio"/> Regd. Office <input type="radio"/> Unspecified		
ADDRESS LINE 1 [®]			
ADDRESS LINE 2			
ADDRESS LINE 3			
CITY [®]		PINCODE / ZIP [®]	
DISTRICT [®]			
STATE / U T [®]		STATE CODE [®]	
COUNTRY [®]		COUNTRY CODE [®]	
<input type="radio"/> CONTACT INFORMATION			
MOBILE NO		FAX NO	
TELEPHONE (RES)		TELEPHONE (OFF)	
EMAIL ID			
APPLICANT DECLARATION AND CONSENT*			
<p>I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.</p> <p>I hereby consent to receiving information from SEBI Registered KYC Registration Agency / Central KYC Registry through SMS/Email on the above registered number/email address.</p> <p>I hereby consent to</p> <ol style="list-style-type: none"> use images of officially valid documents uploaded, digitally signed e-Aadhaar letter downloaded from UIDAI website and / or data received from UIDAI through Aadhaar authentication mechanism as proof of identity and / or address and consider signature uploaded as specimen signature and as part of my KYC information. process and register / update my KYC details provided through this application with SEBI KRA and / or Central KRA system(s), store documents / information uploaded as applicable under PML Act & Rules, SEBI KRA Regulations, 2011 and other any Act, Rules, Regulations, Guidelines, Circulars, etc. issued by Statutory / Regulatory authorities from time to time <p>I have no objection for the KRA in retaining my KYC details shared by me. I understand and am informed that the information / documents provided by me shall be stored by the KRA and / or the intermediary downloading my KYC information from SEBI KRA / Central KYC Registry and shall be used only for the purpose of completing my KYC formalities only and the information shall not be shared with any other third party.</p> <p>I also understand that the KYC information registered with KRA / Central KRA system(s) would be utilized as mentioned in the SEBI KRA Regulations, 2011 / Central KYC Registry Operating Guidelines, 2016.</p>			
DATE			
PLACE			
GEO COORDINATES		SIGNATURE / THUMB IMPRESSION OF APPLICANT	
ATTESTATION / FOR OFFICE USE ONLY			
DOCUMENTS RECEIVED	<input type="radio"/> Certified Copies <input type="radio"/> EKYC Data from UIDAI <input type="radio"/> Offline PDF / XML Verification <input type="radio"/> Digital KYC <input type="radio"/> Data from Digi Locker		
KYC VERIFICATION / IPV CARRIED OUT BY			
EMPLOYEE NAME		IPV DATE	
EMP. DESIGNATION		EMP. BRANCH	
EMPLOYEE CODE		FI CODE	
FI NAME			
EMPLOYEE SIGNATURE		FI SEAL	

* Mandatory and required information

** These documents are applicable only for online KYC

[®] Mandatory if same address as available in officially valid document provided above flag is 'NO'

[&] Utility bill which is not more than two months old of any service provider (electricity, telephone, post-paid mobile phone, piped gas, water bill)

[#] Pension or family pension payment orders (PPOs) issued to retired employees by Government Departments or Public Sector Undertakings, if they contain address

[§] Letter of Allotment of accommodation from employer issued by State Government or Central Government Departments, statutory or regulatory bodies, public sector undertakings, scheduled commercial banks, financial institutions and listed companies and leave and license agreements with such employers allotting official accommodation.