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Scheme



FORM 1 - APPLICATION FORM FOR LUMPSUM AND/OR SIP INVESTMENTS

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State						Cour	ntry						Pin	Code							(If yes,	fill an	d attac	h FAT	CA & C	CRS ind	dividual	form av	ailable	at www	.principa	Yes alindia.co	1 VO pm)	
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From																			Date	D	D	M	M	Y	Y									
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2	Sc	neme				Pla	an/Opt	ion							Amo	ount													Sta	mp &	Signa	ture		

Amount

3 BANK DETAILS F	OR PAY-OUT (Mandatory. Refer C and avail of Mu	tiple Bank Registrat	tion Facility.	Please attac	h cancelled	cheque co	ру.)					
Bank Name												
Bank A/c No.					Type	Savi	ngs 🗌 Cu	rrent	🗌 NRO 🗌 NRE 🗌 FCM	NR 🗌 NRSR 🗌	Others Specify	
Branch Name				City						Pin		
IFSC / NEFT Code (11 digit)*			MICI	R Code (9	digit)*				*M	entioned on your che	que leaf	
4 PAYMENT DETAI	LS (Applicable for both lumpsum & SIP investment)											
Payment Account Non Third Party Payment Third Party Payment (Please attach declaration form available at www.principalindia.com)												
Payment mode	Instrument/ Reference No.		n declaration unt (₹)	Torm availat	die at www.	.principalin	1018.com)	Acc	ount No.		Account type	
Cheque/ DD									Savings			
RTGS/ NEFT		DD Char	noc (if ar	av)				Donk	& Branch		Current	
		DD Gliai	yes (ii di	iy)				вапк	a Branch		NRO	
Funds Transfer											NRE	
5 INVESTMENT DE	TAILS (In case of discrepancy, Default plan/option will	he applied) Ref Inst	ruction A. B	& C								
i-Name		to your goal							Goal Value (₹)			
		to your goar									ress of your goals t statements easily	
5A - INVESTMENT TYP	PE 🔲 ONLY LUMPSUM (Fill 5A) 📘	ONLY SIP*	LUN	IPSUM 8	& SIP*	*Fill 5/	A, B and at	tach S	IP Auto Debit/ NACH form	I		
3-in-1 Inves	t in upto 3 schemes with a single cheque.											
	Scheme Names		Plan	Opt	tion	S	ub Option		Dividend Frequency (if applicable)	Amount	Amount in figure (₹)	
		Reg	ular Direct	t Dividend	Growth	Payout	Reinvest S	weep	Tick any one*	Lu	mpsum	
1. Principal									0 HY A			
2. Principal									🗌 Q 🗌 HY 🗌 A			
3. Principal									□ D □ W □ M □ Q □ HY □ A			
Total (Amount in words)												
Dividend Sweep into	Scheme							Pla	an	Option		
	Scheme							Pla	an	Option	*D-Daily, W-Weekly, M-Monthly, Q-Quartly,	
	Scheme							Pla	an	Option	HY-Half Yearly & A-Annual	

5B - SIP REGISTRATION DETAILS

My Date ^{\$}	SIP DETA	ILS (Applicable to scheme number mentioned in S	5A table. Refer SIP instruc	tions point A)	-	-		Perpetual	
	Scheme No.	SIP Amount (₹) (Minimum amount ₹ 500/ 2,000. Refer KIM)	SIP Date(s) [#] ([*] Default date 10th)	SIP Frequency	Start Date	End Date	Perpetual	100	A better way to plan for your dreams
Choose your	1.			Monthly Quarterly	MMYY	MMYY		No hassle	plan for your dreams
favourite day	2.			Monthly Quarterly	MMYY	MMYY		to Renew	SUPER
	3.			Monthly Quarterly	MMYY	MMYY		your SIPs	SIP
	Total (Amou	int in words)		•					
)
		Booster* Meet y	our life goals faster			Pause	Why	Stop when you c	an Pause?

TOP-U	P DETAILS (Applicable t	o scheme number mentioned in t	PAUSE DETAILS (Applicable to scheme number mentioned in 5A table. Refer SIP instructions point C)						
Scheme No.	Top up Amount (Min. ₹ 500 & Multiple of ₹1/·)	Frequency (HY -Half Yearly Y -Yearly (Default))	Top Up Start Month/Year	Cap Month/Year	Cap Amount	SIP Cy	cle Date	SIP Pause Period Start from	SIP Pause Period End on
1.		HY Y	M M / Y Y	M M / Y Y		D	D	MM / YY	MM / YY
2.		HY Y	M M / Y Y	M M / Y Y		D	D	MM / YY	MM / YY
3.		HY Y	M M / Y Y	M M / Y Y		D	D	MM / YY	MM / YY

QUICK CHECKLIST

KYC acknowledgement letter (Compulsory for MICRO Investments)

Self attested PAN card

 $\hfill\square$ Email ID and mobile number provided for regular updates

 $\hfill \ensuremath{\square}$ SIP Auto Debit/ NACH form is filled & attached for SIP investments

N card

🔲 Relationship proof between Guardian and Minor (if application is in the name of a Minor) attached

updates 🗌 Additional documents attached for Third Party payments. Refer instructions

🗆 Plan/ Option/ Sub Option name mentioned along with scheme name 👘 FATCA & CRS Declaration for non individual/ Entity is attached (mandatory)

6 DEN	6 DEMAT ACCOUNT DETAILS (Optional) (Refer instruction No. B(13))											
(Please ens	Please ensure that the sequence of names as mentioned in the application from matches with that of the account held with the Depositary Participant. Attach copy of DP statement.)											
NSDL	DP NAME	DP ID Beneficiary Account No.										
CSDL	DP NAME	Beneficiary Account No.										

7 NOMINATION DETAILS (Single or joint applicants are advised to avail Nomination facility. Ref Instruction E).										
I/We wish	to nominate. I/We DO NOT wish to nominate and sign here	Sole / First Applicant / Guardian	Second Applicant	Third Applicant						
	Nominee Name	Guardian Name (In case of N	Allocation %	Nominee/ Guardian Signature						
Nominee 1										
Nominee 2										
Nominee 3										
Address			Total = 100%							

8 DECLARATION & SIGNATURES

INDIVIDUAL / NON-INDIVIDUAL DECLARATION: I/We have read and understood the contents of the Scheme Information Document/s to the Scheme(s) including the sections on "Prevention of Money Laundering and Know Your Customers". I / We hereby apply to the Trustees of the Principal Mutual Fund (the Mutual Fund) for units of the Scheme as induced by any rebate or gifts, directly or indirectly, in making this investment. I/We have net received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We further declare that the amount invested by melus in the Schemes() is derived through legitimate sources and is on held or designed for the purpose of contravention of any act, rules, and regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time. I/We further confirm that I/we have the express authority from the relevant constitution to invest in the units of the Scheme and the Principal Asset Management PvL. Ltd. [AMC], its Trustee and the Mutual Fund would not be responsible if the investment is ultra vires the relevant constitution. I/We further confirm that I/we have the expression or any other Borney Constitution to invest in the units action are one of the Schemes) including the scheme and the Constitution or any other rude. [Pwelley Borney Constitution to invest in the units action are other endocing Borney Constitution to invest in the units action are other endocing Borney Constitution to invest in the units are found to be failed for by the AMC I Principal Mutual Fund for any regulatory requirements] for borney Constitution called for by the AMC I Principal Mutual Fund to the information provided by me turns out to be fails or in the units are found to be held in contravention of any requirements]. Fund for any regulatory is prohibition is submitted for the where the antipaction called for by the AMC I Principal Mutual Fund the investment are made in Direct Pl

I/We consent to and authorize the AMC to share all information (including without limitation personal information or sensitive personal data or information as defined in the 'Privacy Policy' hosted on your website www.principalindia.com) provided by me/us for transacting in Principal Mutual Fund with any of its Associates/Group Companies/ Affiliates, as well as to non-affiliated third parties such as, but not limited to, attorneys, accountants, auditors and persons or entities that are assessing our compliance with industry standards. I/We hereby declare and agree that I am/we are not a "U.S. person" for U.S. federal income tax purposes and that I am/we are not acting for, or on behalf of a U.S. person.

I/ We hereby agree to keep the information provided to AMC updated and to provide any additional information/ documentation that may be required by AMC in connection with this application. Also, I hereby confirm that the information provided in this Application Form is true, correct, and complete to the best of my knowledge and belief and that I shall be solely liable and responsible for the information submitted herewith. I also confirm that I have read and understood the FATCA & CRS Terms and Conditions given under Instructions and hereby accept the same.

IWe hereby provide my/our consent in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder, and regulations made thereunder) and PMLA. I/We hereby provide my consent for sharing/disclosing of my/our Aadhaar number including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in the folios linked to my/our PAN.

Applicable to NRIs only: 1/We confirm that I am I we are Non-Residents of Indian Nationality / Origin and I / We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from funds in my/our Non-Residents External / Ordinary Account / FCNR Account.

Declaration for SIP registration: Having read, understood and agreed to the contents of OTM Facility, the Scheme Information Document. Statement of Additional Information, Key information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of Principal Mutual Fund mentioned within, I hereby declare that the particulars given in the form are correct and express my willingness to make payments towards SIP instalments referred above through participation in NACH/ECS/Direct Debit. The ARN holder, where applicable, has disclosed to me/us all the commissions (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.

FATCA/ CRS Declaration for Non-individual: I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm 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 given under Instructions and hereby accept the same.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	Power of Attorney Holder
Date: D D M M Y Y Pla	ce :		

Mutual Fund



SIP AUTO DEBIT/ NACH FORM

Attention: No need to attach One Time Mandate again, if already registered / submitted earlier.

Princ	cipal® UMRN	Bank use			Date D D M M Y Y Y Y
Tick (√)	Sponsor Bank Code	CITIOOOPIGW	Utility Code	CITIO	0002000000037
CREATE 🖌	I/We hereby authorize	Principal Mutual Fund	to debit (tick \checkmark)	SB CA CC SE	3-NRE SB-NRO Other
MODIFY X CANCEL X	Bank A/c number				
with Bank	Name of customers	bank IFSC		or N	MICR
an amount of	Rupees	in words			₹ in figures
FREQUENCY	Hthly Otly	H-Yrly 🗌 Yrly 🖌 As & when prese	nted	DEBIT TYPE 🔀 Fixed	Amount 🖌 Maximum Amount
Reference 1			Phone No.		
Reference 2			Email ID		
l agree for the del	,	bank whom I am authorizing to debit my accounts as per	latest schedule of charges	of the bank.	
From	PERIOD D D M Y Y Y				
То	3 1 1 2 2 0 9 9	Signature of 1st Account hold	er Signatu	re of 2nd Account holder	Signature of 3rd Account holder
	X Until Cancelled	1Name as in bank records	1 0 011	ne as in bank records	3Name as in bank records
This is to confirm I have understood	that the declaration has been carefully reached that I am authorized to cancel / amend th	ad, understood & made by me / us. I am authorizing the L is mandate by appropriately communicating the cancellat	Jser Entity / Corporate to a tion / amendment request t	lebit my account, based on the instruc to the User entity / Corporate or the ba	tions as agreed and signed by me. ank where I have authorized the debit.