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	6c. Gross Annual Income (in ₹) [Please (1)]																			
	First Applicant Below			5	-10 Lacs		10-25	Lacs	🗌 > 25 Lac	s - 1 Crore		> 1 Crore (or)										
		rth (Mandatory	for non-individ							is on				D	DM	MY	YY	Y	(Not olde	r than on	e year)	
	Second Applicant Below		1-5 Lacs		-10 Lacs		10-25	Lacs	> 25 Lac	s - 1 Crore		> 1 Crore (or)	Net-wor	th								
	Third Applicant Below		1-5 Lacs		-10 Lacs		10-25	Lacs	> 25 Lac	s - 1 Crore		> 1 Crore (or)	Net-wor	 th								
ŀ	6d. First Applicant						-															
	For Individuals [Please ()] 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																					
	For Non-Individuals providing any of the below mentioned services [Please (🖍)]																					
	Foreign Exchange/Money Changer	Services Gamin	ıg/Gambling/	Lottery/Co	isino Servi	ces Mone	ey Lendin	ng/Pawning	None of the at	ove												
	Second Applicant: (To be fi	led only if the	applicant is a	an individu	ial)] I am Pl	EP			am related	to PEP]	Not App	licable						
	Third Applicant: (To be filled	only if the apr	plicant is an i	ndividual)] I am Pl	EP			am related	to PEP		[Not App	licable						
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	The below information is requi																					
				Reside			Busi					r		e	· r		e	п.			· -	ŀΛ
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	Is the applicant(s)/ guardian's	-				Natio	onalit	y / lax	Residency	other	than In	dia?	Ye	s	Nc)						
	If Yes, please provide the follow	ving inform	mation [n	nandat	ory]																	
	Please indicate all countries in	which you	J are resi	dent fo	or tax p	ourpos	ses ar	nd the a	associated	Tax Re	ference	Numbers	s belo	w.								
Γ	Category	Fir	st Appli	icant	(inclu	dina	Min	or)	Se	cond	Applic	ant/ Gu	Jard	ian			Т	hird	App	lican	t	
ŀ	Place/ City of Birth				(g		•.,				,			-				1.66			
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Page 2	1 · · · · · / · · · · / · · / ·																					
ш	#To also include USA, where	the indivic	dual is a	citizen,	/ gree	n card	l hold	er of U	SA. ^ln	ase Ta	x Identi	fication N	umbe	er is not o	available	e, kir	ndly pro	ovide	its fur	nction	al equ	uivalent
Γ	8. POWER OF ATTORNEY																, ,					
ŀ	Name of PoA Mr. Ms. M/s.															Т						
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202	# Please attach Proof. Refer in:	struction N	io 16, 17	& 18																		
000	9. DEMAT ACCOUNT DETAILS																					
	I would like units to be allotted in DEMAT	mode as per	r the details	below:																		
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Enclosures for Demat option Client Master List (CML) Transaction cum Holding Statement												-					y Instru	UCTIO	n Slip)	
	10. BANK ACCOUNT DETAILS (Please note that as per SEBI regulations, it is mandatory for investors to provide their bank account details) (Refer Instruction 4)													(Refer Ins	truction 4	1)						
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12. PAYMENT DETAILS (Refer Instruction No. 6)												
	Schen	ne 1	Sc	neme 2	Sch	eme 3						
Cheque / DD / RTGS / UMR No. & Date:												
Bank & Branch Name												
Amount in figures ₹ (i)												
DD Charges if any, in figures ₹ (ii)												
Net Amount (i)+ (ii) in figures ₹ in words ₹												
Account Type Please tick (🗸)	ngs 🗌 Current 🗌 NRE 🔲 N	IRO FCNR Others		er Instruction 4 (Mandatory for Credit via not find this on your cheque leaf, please		ppearing on your cheque leaf.						
13. NOMINATION DETAILS - Mandatory	if mode of holding is single (R	efer Instruction 14)										
I/We wish to nominate	I/We DO NOT wis	n to nominate										
,	,											
Please Sign here Please Sign here Please Sign here												
First / Sole Applicant/ Guardian / P	<u> </u>		Applicant / Auth. S	•	Third Applic	•						
Nominee Name	& Address	Guardian Name & Address (In case Nominee is Minor)	Nominee Relationship with 1st Ha	Illiner Allocation (Total = 100%)	wominee / Guardian Signature						
Nominee 1												
Nominee 2												
Nominee 3												
14. DOCUMENTS ENCLOSED (PLE	ASE 🗸)			1	L							
Memorandum & Articles of Association Trust Deed KYC acknowledgement SIP Enrolment Form (For Investment through PDC) Resolution / Authorisation to invest PAN Copy LLP Agreement SIP Enrolment Form (For Investment through NACH / Auto De Power of Attorney Certificate of Incorporation Pathenship Deed SWP/STP/DSD Enrolment Form List of Authorised Signatories with Specimen Signature(s) Bye-Laws HUE Deed Third Party Payment Declaration Form												
15. DECLARATION(S) & SIGNATURE(S)	(Refer Instruction 15)											
To, The Trustee, Taurus Mutual Fund Having read and understood the contents of the Scheme Information Document (SID), Statement of Additional Information (SAI) & Key Information Memorandum (KIM) I/We hereby apply for units of the scheme and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the controvention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Prevention of Money Laundering Act, Prevention of Corruption Act and / or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. <u>Applicable for NRI's only</u> - I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we have remitted funds from abroad through approved banking channels or from funds in my/our Non-Resident External /Non-Resident Ordinary /FCNR account. 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 confirm that details provided by me/us are true and correct. ***I agree to receive all communication i.e. Statement of Account (SOA), Portfolio, Annual / Abridged Reports etc. (including regulatory updates) related to my investment via email. I may voluntarily subscribe to the on-line access for transacting through the internet facility provided by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for ull the costs and consequences thereof.												
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Opt-in (Select this box in order to receive the physic	al copy of the schemewise Annua	I / Abridged Report at the en	d ot tinancial year) 🗌									

Please Sign her

Please Sign here

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First / Sole Applicant/ Guardian / POA Holder / Auth. Sign

Second Applicant / Auth. Sign

Third Applicant Sign