

KEY PARTNER/AGENT INFORMATION (Investors Applying under direct plan should mention "DIRECT" in ARN Column)

Distributor/ RIA Code	Sub Agent ARN	Sub Agent Code/Bank Branch Code/ Internal Code	*Employee Unique Identification Number (EUIN)
ARN-			

* EUIN Declaration (Only where EUIN box is left blank) - EUIN Declaration: 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 in-appropriateness, if any, provided by the employee/ relationship manager/sales person of the distributor/sub broker and the distributor has not charged any advisory fees on this transaction. (Refer Instruction No XII)

Signature of Sole/First Applicant/Guardian	Signature of Second Applicant	Signature of Third Applicant
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1. EXISTING INVESTOR FOLIO NUMBER

2. MODE OF HOLDING [Please tick (✓)]

☐ Single ☐ Joint (Default) ☐ Any one or Survivor

3. TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY (Please Refer Instruction No.V) [Please tick (✓)]

☐ I am a First time investor across Mutual Funds OR ☐ I am an existing investor in Mutual Funds

In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invested.

4. APPLICANT DETAILS (Mention name as per your PAN / Income Tax Department (ITD)) (Mandatory to mention Date of Birth for all holders)

Sole/First Applicant	Mr. /Ms./M/s	DOB	D	D	M	M	Y	Y	Y	Y
Name of Guardian if first applicant is minor/ Contact Person for non individuals		Mr. /Ms./M/s								
Date of Birth of Guardian	D	D	M	M	Y	Y	Y	Y	Y	Y
Guardian's Relationship with Minor		Proof of Date of Birth and Guardian's Relationship with Minor								
<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed Guardian		<input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> Others (Please specify)								
PAN / PEKRN		CKYC ID (CKIN)								
LEI No.:		Valid upto:								
STATUS	<input type="checkbox"/> Resident Individual <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Public Limited Company <input type="checkbox"/> FPI Category I <input type="checkbox"/> Banks <input type="checkbox"/> Body Corporate <input type="checkbox"/> Trust/Society/ NGOs* (Enter Registration No. of Darpan Portal)									
	<input type="checkbox"/> NRI <input type="checkbox"/> HUF <input type="checkbox"/> Private Limited Company <input type="checkbox"/> FPI Category II <input type="checkbox"/> Defence Establishment <input type="checkbox"/> AOP/BOI <input type="checkbox"/> Non Profit Organization/Charities* (Enter Registration No. of Darpan Portal)									
	<input type="checkbox"/> On Behalf of Minor <input type="checkbox"/> Financial Institutions <input type="checkbox"/> Partnership Firm/LLP <input type="checkbox"/> FPI Category III <input type="checkbox"/> Government Body <input type="checkbox"/> Mutual Fund FOF Schemes <input type="checkbox"/> Others (Please specify)									
Are you involved / providing any of the mentioned services : (Applicable only for Non Individuals) <input type="checkbox"/> Foreign Exchange/ Money Changer Services <input type="checkbox"/> Gaming / Gambling / Lottery / Casino Services <input type="checkbox"/> Money Lending / Pawning <input type="checkbox"/> None of the above										

Correspondence Address (Address details will be updated as per your KYC records with CKYC / KRA)				Overseas Address (Mandatory for NRI / FPI Applicants & PIO's)			
House/Flat No.				House/Flat No.			
Street Address				Street Address			
City/Town	State	City/Town	State	City/Town	State	City/Town	State
Country	Pin Code	Country	Pin Code	Country	ZIP Code	Country	ZIP Code
Tel. (Res.)	(STD Code)	Tel. (Off.)	(Country Code)	Tel. (Off.)	(Country Code)	Fax	(Country Code)
Mobile No.		Email ID (CAPITAL Letters Only)		Mobile No.		Email ID (CAPITAL Letters Only)	
Email ID belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian in case of minor <input type="checkbox"/> Others				Mobile No. belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian in case of minor <input type="checkbox"/> Others			

Investors providing Email Id would mandatorily receive Statement of Accounts/ Annual Report / Abridged Summary/ Statutory & other documents on email. Please register your Mobile No & Email Id with us to get transaction alerts via SMS & Email, respectively. I hereby declare that I shall immediately update any change in Mobile Number/Email ID. ☐ I wish to receive scheme wise annual report or abridged summary through Physical mode (Applicable only for investors who have not specified the Email ID).

Second Applicant	Mr. /Ms./M/s	DOB	D	D	M	M	Y	Y	Y	Y
PAN / PEKRN		CKYC ID (CKIN)								
Mobile No.		Email ID (CAPITAL Letters Only)								
Email ID belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian in case of minor <input type="checkbox"/> Others				Mobile No. belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian in case of minor <input type="checkbox"/> Others						

Third Applicant	Mr. /Ms./M/s	DOB	D	D	M	M	Y	Y	Y	Y
PAN / PEKRN		CKYC ID (CKIN)								
Mobile No.		Email ID (CAPITAL Letters Only)								
Email ID belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian in case of minor <input type="checkbox"/> Others				Mobile No. belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Children <input type="checkbox"/> Dependent Siblings <input type="checkbox"/> Dependent Parents <input type="checkbox"/> Guardian in case of minor <input type="checkbox"/> Others						

HELIOS MUTUAL FUND - ACKNOWLEDGEMENT SLIP

Name of the Investor Mr/Ms/M/s : _____
 Scheme Name, Plan & Option: _____ Plan: _____ Option: _____
 Amount (₹) : _____
 All purchases are subject to realization of payment instrument. Please retain this slip, duly acknowledged by the official collection center till you received your account statement.

FOLIO NO. _____
 PAN NO. _____
 APPLICATION NO. _____

12. NOMINATION FOR UNITS IN NON-DEMAT MODE (Nomination shall be optional for jointly held Mutual Fund Folios) (Refer instruction No.VI for details)

☐ A) I/We wish to nominate as under:

OR

☐ B) 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 implications / issues involved in non-appointment of any nominee(s) and am / are further aware that in case of my demise / death of all the unit holders in the folio, my / our legal heir(s) would need to submit all the requisite documents issued by the Court or such other competent authority, as may be required by the Mutual Fund / AMC for settlement of death claim / transmission of units in favour of the legal heir(s), based on the value of the units held in the mutual fund folio/s.

I/We wish to make a nomination and do hereby nominate the following person(s) in the above specified folio(s) who shall receive all the assets held in my / our account in the event of my / our death. This nomination shall supersede any prior nomination made by us/me if any.

Nomination can be made upto three nominees in the account. # Any odd lot after division shall be assigned / transferred to the first nominee mentioned in the form.

Mandatory Information								Non-mandatory Information
Name of Nominee(s) (IN CAPITALS) (Mandatory)	Share of each Nominee#	Date of Birth (for Minor)	Relationship with the Applicant (select one)	Nominee/ Guardian (in case of Minor) Identification details <i>[Please tick any one of the following and provide ID Number and no copies required].</i>	Address of Nominee(s)/ Guardian in case of Minor City / Place: State & Country	Mobile of nominee(s)/ Guardian in case of Minor	Email ID of nominee(s)/ Guardian in case of Minor	Nominee Guardian Name (in case Nominee is Minor)
Mr./Ms. Details of 1st Nominee	%	DD MM YYYY	<input type="checkbox"/> Spouse <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Daughter <input type="checkbox"/> Son <input type="checkbox"/> Others (please specify)	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar (masked last 4 digits) **** * <input type="checkbox"/> Passport (for NRIs/OCIs/PIOs) <input type="checkbox"/> Driving License	Pin Code:			
Mr./Ms. Details of 2nd Nominee	%	DD MM YYYY	<input type="checkbox"/> Spouse <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Daughter <input type="checkbox"/> Son <input type="checkbox"/> Others (please specify)	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar (masked last 4 digits) **** * <input type="checkbox"/> Passport (for NRIs/OCIs/PIOs) <input type="checkbox"/> Driving License	Pin Code:			
Mr./Ms. Details of 3rd Nominee	%	DD MM YYYY	<input type="checkbox"/> Spouse <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Daughter <input type="checkbox"/> Son <input type="checkbox"/> Others (please specify)	<input type="checkbox"/> PAN <input type="checkbox"/> Aadhaar (masked last 4 digits) **** * <input type="checkbox"/> Passport (for NRIs/OCIs/PIOs) <input type="checkbox"/> Driving License	Pin Code:			

I / We want the details of my / our nominee to be printed in the statement of holding, provided to me/ us by the AMC / DP as follows; (please tick, as appropriate)

☐ Name of nominee(s) with % ☐ Nomination: Yes / No (Default)

Signature(s) – As per mode of holding in demat accounts / MF Folio(s)

Name of the Holder	Signature/ Thumb Impression of holder	Signature of two witness(es) along with name & address are required, if the account holder affixes thumb impression instead of signature	
		Name & Address of Witness	Witness Signature
Sole / 1st Holder (Mr./Ms.)		Witness 1 - Name: Address:	Witness 1
		Witness 2 - Name: Address:	Witness 2
2nd Holder (Mr./Ms.)		Witness 1 - Name: Address:	Witness 1
		Witness 2 - Name: Address:	Witness 2
3rd Holder (Mr./Ms.)		Witness 1 - Name: Address:	Witness 1
		Witness 2 - Name: Address:	Witness 2

Rights, Entitlement and Obligation of the investor and nominee / Instructions

1. If you are opening a new demat account / MF folio, you have to provide nomination. Otherwise, you have to follow the specified procedure for Opt-out
2. The nomination can be made only by individuals applying for/holding units on their own behalf singly or jointly.
3. You can make nomination or change nominee any number of times without any restriction.
4. You are entitled to receive acknowledgement from the AMC / DP for each instance of providing or changing nomination.
5. Non-individuals including a Society, Trust, Body Corporate, Partnership Firm, Karta of Hindu undivided family, a Power of Attorney holder and/or Guardian of Minor unitholder **cannot nominate**.
6. Nomination is not allowed in a folio where Minor is the unitholder.
7. The signatories for this nomination form in joint folios / account, shall be the same as that of your joint MF folio / demat account. i.e.
 - a. 'Either or Survivor' Folios / Accounts - any one of the holders can sign.
 - b. 'First holder Folios / Accounts – only First Holder can sign.
 - c. 'Jointly' Folios / Accounts - both holders have to sign
8. A minor may be nominated. In that event, the name and address of the Guardian of the minor nominee is to be provided optionally.
9. Nomination can also be in favour of the Central Government, State Government, a local authority, any person designated by virtue of his office or a religious or charitable trust.
10. The Nominee shall not be a trust (other than a religious or charitable trust), society, body corporate, partnership firm, Karta of Hindu Undivided Family, or a Power of Attorney holder.
11. A Non-Resident Indian may be nominated subject to the applicable exchange control regulations.
12. **Multiple Nominees:** Nomination can be made in favour of multiple nominees, subject to a maximum of three nominees. In case of multiple nominees, the percentage of the allocation/share should be in whole numbers without any decimals, adding upto a total of 100%. If the percentage of allocation/share for each of the nominee is not mentioned, the allocation /claim settlement shall be made equally amongst all the nominees. Any odd lot after division shall be assigned / transferred to the first nominee mentioned in the form.
13. In case of demise of the investor and any one of the nominees, the regulated entities shall distribute the assets pro-rata to the remaining nominees
14. Every new nomination for a folio/account shall overwrite the existing nomination, if any.
15. Nomination made by a unit holder shall be applicable for units held in all the schemes under the respective folio / account.
16. Nomination shall stand rescinded upon the transfer of units.
17. Transmission of units in favour of a Nominee shall be valid discharge by the asset management company/ Mutual Fund / Trustees against the legal heir(s).
18. The nomination will be registered only when this form is completed in all respects to the satisfaction of the AMC.
19. In respect of folios/accounts where the Nomination has been registered, the AMC will not entertain any request for transmission / claim settlement from any person other than the registered nominee(s), unless so directed by any competent court.

Transmission aspects

- Upon demise of the investor, the nominees shall have the option to either continue as joint holders with other nominees or for each nominee(s) to open separate single account / folio.
- In case all your nominees do not claim the assets from the AMC / DP, then the residual unclaimed asset shall continue to be with the AMC in case of MF units and with the concerned Depository in case of Demat account.
- Nominee(s) shall extend all possible co-operation to transfer the assets to the legal heir(s) of the deceased investor. In this regard, no dispute shall lie against the AMC / DP.
- Death of Nominee/s: In the event of the nominee(s) pre-deceasing the unitholder(s), the unitholder/s is/are advised to make a fresh nomination soon after the demise of the nominee. The nomination will automatically stand cancelled in the event of the nominee(s) pre-deceasing the unitholder(s). In case of multiple nominations, if any of the nominee is deceased at the time of death claim settlement, the said nominee's share will be distributed on pro-rata basis (as illustrated below) amongst the surviving nominees. Nominee's legal heir cannot claim the assets on behalf of deceased Nominee(s).

% share as specified by investor at the time of nomination		% assets to be apportioned to surviving nominees upon demise of investor and nominee 'A'			
Nominee	% share	Nominee	% initial share	% of A's share to be apportioned	Total % share
A	60%	A	0	0	0
B	30%	B	30%	45%	75%
C	10%	C	10%	15%	25%
Total	100%	-	40%	60%	100%

13. RESOLUTION OF DISPUTES (For Institutional or Corporate Clients) (Refer instruction No.XVII)

☐ Smart ODR **OR** ☐ By harnessing any independent institutional mediation, conciliation and/or online arbitration institution in India.

14. DECLARATION AND SIGNATURE

I/We have read, understood the terms and conditions of the SID/KIM/SAI and the addendums issued thereto till date, as well as the rules and regulations of SEBI, AMFI, Prevention of Money Laundering Act, 2002, Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) under FATCA & CRS provision of the Central Board of Direct Taxes notified Rules 114 F to 114H, as part of the Income-tax Rules, 1962, and such other regulations as may be applicable to me/us from time to time and agree to comply with the same as a Unitholder. I /We hereby apply to the Trustees for allotment of Units of the Scheme(s) of Helios Mutual Fund ('Fund') and confirm and declare as follows: I/We am/are eligible Investor(s) as per the scheme related documents and not prohibited from accessing capital markets by any order/ruling /Judgment etc. passed by SEBI/Statutory Authority or Courts in India and Foreign laws. I/We am/are authorised to make this investment as per the Constitutive documents/ authorization(s). I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. 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. RIA Declaration: I/We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/NAV etc. in respect of my/our investments under Direct Plan of all Schemes managed by you, to the above-mentioned SEBI-Registered Investment Adviser/RIA. 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 hereby declare that the above information is given by the undersigned and the particulars given by me/us are correct and complete. I/We hereby agree and authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/up- dates that may be provided by me/us to the Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation / submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us. I/We have read and understood the purpose(s), as described under the Privacy Policy of the AMC, for which my/our details can be shared with various entities/people/authorities indicated in foregoing Para and I/We hereby consent to the same. I/We hereby confirm that I/we have not been offered/ communicated any indicative portfolio and/or any indicative yield by the Fund/AMC/its distributor for this investment. I/We hereby authorize the representatives of the Fund/AMC and its Associates to contact me through any mode of communication. This will override the registry on DND / DNDC, as the case may be.

Signature of Sole/First Applicant/Guardian	Signature of Second Applicant	Signature of Third Applicant
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Please submit the following documents with your application (where applicable)

SR.No.	Documents	Individuals	NRIs/ PIO/ OCI	Minors	Companies / Body Corporates	Trusts	Societies	HUF	Partnership Firms / LLP	FPIs	Investments through Constituted Attorney
1	Signed A/c Payee cheque/draft favouring the scheme	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
2	Copy of cancelled cheque (Required where pay out bank details are different from the instrument bank)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
3	Resolution / Authorisation to invest				✓	✓	✓		✓	✓	
4	List of Authorised Signatories with Specimen Signature(s)				✓	✓	✓		✓	✓	✓
5	Memorandum & Articles of Association				✓						
6	Trust Deed					✓					
7	Bye-Laws						✓				
8	Partnership Deed / Deed of Declaration							✓	✓		
9	Proof of PAN & KYC / CKYC - KIN number (including for guardian)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
10	Foreign Inward Remittance Certificate		✓							✓	
11	Date of Birth Certificate or School Living Certificate or Passport of Minor evidencing relationship with Guardian			✓							
12	Declaration for Identification of Beneficial ownership				✓	✓	✓	✓	✓	✓	✓
13	FATCA / CRS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
14	PIO/OCI (As applicable)		✓								

All documents for entities above should be originals / true copies certified by the Director / Trustee / Company Secretary / Authorised Signatory / Notary Public, as applicable.