



(Formerly known as Escorts Mutual Fund)

Tel: +91 9920 21 22 23 | E-mail: help@quant.in | www.quant-mutual.com

To be filled in capital letters and in blue / black ink only.

APP No.:

Date

Investor can opt for multiple requests in one single application form.

1. Investor Details

[illegible]

2. Change / Updation of Contact Details of Sole / First Applicant

STD							Tel. Office							Tel. Res.						
Fax														Mobile						
Email																				

Please register your Mobile No & Email Id with us to get instant transaction alerts via SMS & Email. Investors providing Email Id would mandatorily receive only E - Statement of Accounts in lieu of physical Statement of Accounts.

3. Change of Address

Correspondence Address

Please note that your address details will be updated as per your KYC records with CVL / KRA

[illegible]

4. Change of Mode Of Operation (Applicable only if there are more than one applicants in the Folio)

☐ Joint ☐ Any One or Survivor(s)

5. Change of Status

☐ Resident Indian to Non Resident Indian ☐ Non Resident Indian to Resident Indian

*Please refer the instructions for the documents to be submitted.

6. Registration of Power of Attorney (POA)

Name of POA Holder: PAN No.

*Please refer the instructions for the documents to be submitted.

7. Cancellation of Power of Attorney (POA)

Name of POA Holder:

8. Change of Dividend Option

Scheme	Option	
	<input type="checkbox"/> Payout to Reinvestment	<input type="checkbox"/> Reinvestment to Payout

9. Updation/Correction of PAN

First / Sole applicant		PAN No.									PAN Proof Enclosed	<input type="checkbox"/>
Guardian (In case of Minor)		PAN No.									PAN Proof Enclosed	<input type="checkbox"/>
Second Applicant		PAN No.									PAN Proof Enclosed	<input type="checkbox"/>
Third Applicant		PAN No.									PAN Proof Enclosed	<input type="checkbox"/>

*Please refer the instructions for the documents to be submitted.

10. KYC Updation (Please Tick) ☐ First / Sole applicant ☐ Guardian (In case of Minor) ☐ Second Applicant ☐ Third Applicant

*Please refer the instructions for the documents to be submitted.

11. Signature/s

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

ACKNOWLEDGEMENT SLIP (To be filled by the investor)

Folio/Account No: | | | | | | | | | | | | | | |

Received from

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Change/Update of Contact Details | <input type="checkbox"/> Change of Mode of Operation | <input type="checkbox"/> Change of Status | <input type="checkbox"/> KYC Update |
| <input type="checkbox"/> Registration of Power of Attorney (POA) | <input type="checkbox"/> Cancellation of Power of Attorney (POA) | <input type="checkbox"/> Change of Dividend Option | <input type="checkbox"/> Update/Correction of PAN |