

Non Commercial Transaction Form

*To be filled in capital letters.
*Please strike off the irrelevant fields in the form wherever details are not updated

Date of Birth (Write name in capital letters) *Please refer the instructions no. 15. Name of First / Sole applicant Date of Birth / Sole applicant Quapporting document such as PAN, birth certificate, passport capy or any other govt issued documents)	Folios / Account Numbers (Investor can opt for multi	iple requests in one single application form.)						
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2. Consolidation of Folios: Torget Folio 1	•	nstructions no. 16.						
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6. Change of Income Distribution cum capital withdrawal Option	<u> </u>							
	Name of POA Holder:	PAN No. of POA						
Scheme Option Payout to Reinvestment Reinvestment Reinvestment to Payout	6. Change of Income Distribution cum capital withdrawal C	ption						
	Scheme	Option Payout to Reinvestment Reinvestment to Payout						
7. Release Unclaimed Amount	7. Release Unclaimed Amount							
I would request you to kindly release the unclaimed amount in the folio to the registered bank account.		the folio to the registered bank account.						
♦ Nippon incita Mutual Fund Wealth sets you free Acknowledgment Slip (To be filled by the Investor								
Received from Mr./MrsFolio/Account No:								
☐ Date of Birth ☐ Consolidation Of Folios ☐ Update/Change of Contact Details ☐ Change of Mode Of Operation	Received from Mr./Mrs	Folio/Account No:						
□ Power of Attorney (POA) □ Change of Income Distribution cum capital withdrawal Option □ Release Unclaimed Amount □ KYC Updation □ Revalidation of IDCW/Redemption cheque □ Updation/Correction of PAN □ Nominee Updation □ FATCA Updation								

8 KYC Updation (Please Tick) *Please re	fer the instructio	ns no. 12 for	the docume	ents to be submitt	ed.				
First / Sole applicant Guardian (In	case of Minor)	Second A	pplicant	Third Applicant					
9. Revalidation of Income Distribution cum capital withdrawal (IDCW)/ Redemption cheque *Please refer the instructions no. 15									
I/We are in receipt of Redemption/ Income D	istribution cum cap	ital withdrawal	(IDCW) warrant	as below.					
Cheque No.:		Cheque Date:	D M M		heque mount:				
I/ We are herewith enclosing the warrant as I/ We c			the below reaso	on:					
Bank details incorrectly mentioned 2. Warrant validity period has expired request to reissue the said warrant after necessary revalidation without change in bank Mandate.									
10. Updation/Correction of PAN *Please refer the instructions for the documents to be submitted.									
First / Sole applicant PAN No.					DAN Proof E	nelosad			
Guardian (In case of Minor) PAN No.					PAN Proof Enclosed				
Second Applicant PAN No.					PAN Proof Enclosed PAN Proof Enclosed				
Third Applicant PAN No.						H			
Third Applicant PAN No. PAN Proof Enclosed									
11. Nominee Updation (Write in capital lett	ters) PAN of Allocation	Date	Nominee	Guardian Name	Guardian	Sign of Nominee /			
Nominee Name & Address G	ominee / (%) Guardian Optional)	of Birth of Nominee	Relation With Investor	(in case Nominee is Minor)	Relation with Nominee	Guardian (in case Nominee			
		DD MM YYYY							
		DD MM YYYY							
		DD MM YYYY				100			
FOR NOMINATION OPT-OUT: I/We DO NOT W	ish to make a nom	ination. (Plea	l ase tick (✓) if th	l he unit holder does	l not wish to nom	ninate anyone)			
FOR NOMINATION OPT-OUT: I/We DO NOT wish to make a nomination. (Please tick (*) if the unit holder does not wish to nominate anyone) I/ We, the undersigned applicant(s)/unitholder(s) hereby confirm that I / we do not wish to appoint any nominee(s) in respect of the mutual fund application(s) / units held in my / our mutual fund folio(s) 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. 12. FATCA Updation									
12. FATCA Updation									
Country of Birth			1	Nationality					
Are you a tax resident of any country other tha If Yes, please mention all the countries in whice			accor and the	accopiated Tayna	war Idantifiaati	on Number and its			
identification type in the column below	cii you die lesidei	it for tax park	Joses and the	associated Taxpa	iyer identililedi.	of Number and its			
Country	Tax-Paye	r Identificat	ion Number	•	Identification Type				
13. Signature/s									
		Socond Applies	nnt/		Third Applie	ant/			
SIGN First / Sole Applicant / Guardian/ HERE Authorised Signatory	Second Applicant/ Authorised Signatory			Third Applicant/ Authorised Signatory					
Note: All Unit holder's signature is mandatory i	rrespective of mo	de of holding	g.						



Acknowledgment Slip

(To be filled by the Investor)