COMMON TRANSACTION FORM INCLUDING OTM FACILITY (For existing Unitholders only)

𝒊 ICICI PRUDENTIAL MUTUAL FUND

BROKER CODE (ARN CODE)/ RIA/PMRN CODE#	SUB-BROKER ARN CODE	Employee Unique Identification No. (EUIN)	SUB-BROKER CODE (As allotted by ARN holder)

#By mentioning RIA/PMRN code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund.

Declaration for "execution-only" transaction (only where EUIN box is left blank)
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/salesperson of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/salesperson of the distributor/sub broker.

Signature of Sole/First Holder	Signature of Second Holder	Signature of Third Holder

FOLIO NO. *(Mandatory)*:   TAX STATUS: MODE OF HOLDING:

	Name of Unitholder(s)	PAN*	KYC Status*
1st Holder *(Mandatory)*			
2nd Holder			
3rd Holder			

* PAN & KYC are mandatory for all applicants including NRIs.

LEI Number [ ]

Legal Entity Identifier Number is for Transaction value of INR 50 crore and above. See Instruction No. V)

Date of Birth (1st Holder) [D][D][M][M][Y][Y][Y][Y]
(Mandatory for ICICI Prudential Retirement Fund & ICICI Prudential Child Care Fund) - (Refer Instruction No. I on page 2)

■ Additional Purchase Request

(Cheque to be drawn in favour of "Name of the Scheme"). In case you do not mention Plan and/or Option units will be allotted under default option as per respective scheme information documents.

Scheme Name		PLAN:	OPTION:

Payment Mode (Please tick any one only): **(Please refer Instruction III)**   □ **OTM** (One Time Bank Mandate)   □ **Cheque**   □ **Fund Transfer**   □ **RTGS/NEFT**

Cheque/Instrument No. _____ Payment Date/Instrument Date: _____ / _____ / _____ Amount (Rs.) : _____

Bank Name**: _____ Branch: _____ City: _____

Bank A/c No.** [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]   ** *Please refer to instruction no.2*

Account Type   □ Savings   □ Current   □ NRO   □ NRE   □ FCNR
□ Others _____ *(Please specify)*

I/We hereby confirm having initiated the Transfer / RTGS for transfer of INR _____ from our account no. _____ with _____

_____ (Bank) to your account no. _____ with _____ (Bank). Payment Reference No. _____

Documents attached to avoid Third Party Payment Rejection where applicable:
□ **Bank Certificate**   □ **Third Party Declaration**

In case, the additional purchase amount is ₹10,000 or above and distributor has opted to receive transaction charges, ₹100/- will be deducted from the Purchase amount and paid to the distributor. Units shall be allotted for the balance amount only.

For third party investment/pre-funded instrument, please fill in a separate declaration form as available with AMC.

■ Switch Request

(Please refer to the SID of the scheme you are switching from and to)   I wish to switch: Rs. _____ or _____ Units

From (Scheme)		To (Scheme)	
Plan:	(Option)	Plan:	(Option)

BEFORE YOU REDEEM

Have you invested long enough ?
- Longer investment time period may allow your money the **Benefit of Compounding**.
- We recommend you check your investment horizon against your financial goals and not to get swayed by short term market movements.
- Have you been invested long enough to avoid any short term capital gain tax and exit load charges ?

Consult your financial advisor for the appropriate investment horizon!

■ Redemption Request (Please refer Instruction IV) :

Please Redeem	Rs. _____ or _____ Units
Scheme	
Plan	
Option	

If you have registered for multiple bank account facility in the above folio please specify the bank details in which you wish to receive the redemption proceeds. The bank account should be one of the registered bank account in the folio else the payout will be released to the default bank account registered for the folio.

Bank Name		Bank A/c No.	

Contact details of First/Sole applicant

Mobile Number	[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]	**and/or Land Line Number**	[ ][ ][ ][ ][ ][ ][ ][ ][ ][ ]
E-mail Address	[ ]		

As per the press release dated April 11, 2017 issued by Ministry of Finance, the AMC has blocked/freezed the folios opened between 1st July 2014 to 31st August 2015 where FATCA self certification is not provided. The AMC shall not process any transaction which is initiated by the Investor in such folio(s) unless FATCA self-certification is provided by the Investor and due diligence is completed by the AMC.

YOUR CONFIRMATION/DECLARATION: I/We have read and understood the contents of the Scheme Information Document(s)/Key Infromation Memorandum(s) & Statement of Additional Information(s) of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations of the Scheme(s) as on the date of this transaction. 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 confirm that I/we have not been offered/communicated any indicative portfolio and/or any indicative yield for this investment. I/We interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. I/we declare that the email address provided in the form belongs to me/us or to spouse, dependent children or dependent parents (applicable to individual investors only).

Signature(s)

_____	_____	_____
First Holder	Second Holder	Third Holder

(Please See Overleaf)

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Folio No. ....   □ Purchase   □ Redeem   □ Switch   Date: ....

Scheme .... Amount Rs. .... or Units ....

From Scheme (in case of switch) .... To Scheme ....