Approved on May 02, 2022

<i>ØICICI</i>
PRUDENTIAL TO
MUTUAL FUND

Freedom SIP - Common Application Form

Investor must read Key Scheme Features and Instructions before completing this form.

All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS.

Application No.

RUDENTIAL 🃆 /	
UTUAL FUND	ر
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BROKERARN-(113809E)/ RIA/PMRN CODE# SUB-BROKER ARN CODE

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) (Refer Instruction No. XII). — I/We hereby confirm that the EUIN box has been intentionally left blank by me/
us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of
in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor has not charged any advisory fees on this transaction.

SIGNATURE OF SOLE / FIRST APPLICANT

SIGNATURE OF SECOND APPLICANT

SIGNATURE OF THIRD APPLICANT

FRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY [Refer Instruction

• 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. • Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

1. EXISTING	UNIT	HOL	DER	S IN	IFOF	RMA	TIO	V (Ple	ease re	fer to I	nstruc	tion N	lo. II (a) & IV) (Nan	ne sho	uld be	as per	the P	AN)										
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A/c Number																Acc	count	Туре	\subset	Savir	ngs	\bigcirc (Current	t C) NRE	E (O N	RO	O FO	CNR
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HICICI **PRUDENTIAL** MUTUAL FUND

To be filled in by the Investor. Subject to realization of cheque and furnishing of Mandatory Information.

Name of the Investor:

EXISTING FOLIO NO.

Application No.

TOLL FREE NUMBER: 1800 222 999 (MTNL/BSNL) 1800 200 6666 (OTHERS) EMAIL: enquiry@icicipruamc.com WEBSITE: www.icicipruamc.com

	DENCE DETAILS OF Sess (Please provide full add			erseas Addres	s (Mandatory for NRI / FII A	pplicants)		
	HOUSE / FLAT	NO.			HOUSE / FL	AT NO.		
	STREET ADDRI	ESS			STREET AD	DRESS		
CITY /	TOWN	STATE		Cl	TY / TOWN	STAT	ΓE	
COUN	NTRY	PIN COD	E	(COUNTRY	PIN CO	DDE	
Tel.	Office		Residence					
First Unitholder:	000		11041001100					
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Dependent Paren	nts Guardian P	MS Custodi	an POA	Dependent Pa	arents Guardian	PMS Custod	lian 🔲	POA
*if above any option	is not <i>ticked (✔)</i> or selected	then [Self] option	is considered as a defa	ault.				
2nd Unitholder :	Mobile		Email [£]					
3rd Unitholder :	Mobile		Email [£]					
— · · ·	•	•	,	•	nmunication mode is E-ma stead of Email [Refer Instru	, .	No.IX(a)]	
Please ✓ any of the	frequencies to receive Ac	count Statement	through e-mail [£] : Dai	ly \(\rightarrow \text{Wee}	kly Monthly Qua	arterly	ly O An	nually
** Mandatory in case t	ation – If left blank the app he Sole/First applicant is min	or and/or if investing	in Retirement For docu		ontact Person is Mandatory in ubmitted on behalf of minor fo			stor.
Fund. § For KYC requir	ements, please refer to the in	nstruction Nos. II b(\$	5) & X f Please	refer to instr				
7. MODE OF HO	LDING [Please tick (🗸)]	Single O Joint	O Anyone or Survivor (L	Default)				
8. TAX STATUS	·		_	_	_			
Resident Individual Company		Partnership FIRM FPI category II	☐ Government Body ☐ FPI category III	☐ FPI cat ☐ Mutua		PS Trust DN Profit Organization/Cl	☐ E narities	Bank
□ HUF ′	☐ Body Corporate ☐ F	Private Limited Compa	ny Public limited comp	any 🗆 Mutua	l Funds FOF Schemes 🔲 De	fence Establishment		
Financial Institution	☐ Trust/Society/NG0 ☐ I	imited Partnership (LI	P) Sole Proprietorship	☐ Others	(Please specify)			
		ill separate FATC			ormation is required for all a	··		
First Applicant / Guard	Place/City o	of Birth	Country of Bir	th	'	Citizenship / National	ity	
Second Applicant	liali				Indian U.S. Other			
Third Applicant					Indian U.S. Other			
	., are you assessed for Tax) in a	any other country outs	ide India? Yes	○No I	○ Indian ○ U.S. ○ Other Please tick (✔)	s (Please specify)		
If 'YES' please fill for ALL	countries (other than India) in w	hich you are a Reside	<u>' '</u>	<u> </u>	n/Resident / Green Card Holder /			
	Country of Tax Re	sidency	Tax Identification Number Functional Equivalent		Identification Type (TIN or other please specify)	If TIN is not availate the reason A, B or		
First Applicant / Guard	lian					Reason: A 🗌	В□	C□
Second Applicant						Reason: A 🗆	В	C 🗆
Third Applicant						Reason: A	В	C 🗆
□ Reason B ⇒ No		eason Only if the			cation Numbers to its residence do not req		ollected)	
Address Type of Sole	e/1st Holder:	Address	Type of 2nd Holder:		Address Typ	pe of 3rd Holder:		_
	stered Office Business	_	ential Registered Office	_	Residentia (ISCs) of ICICI Prudential M	Registered Office	Business	
		e ui Aivit I.E. WWW.IC	icipiuamic.com or at the inve	salui aervice Gei	nues (1363) OI IGIGI PRUDENTIAI IVI	utudi Fuilü.		
10. KYC DETAIL Occupation [Please t	-							
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Applicant O House Third O Privat	_	ent Sector Service	O Forex Dealer O Government Service	Others (Pl	ease specify) O Professional	O Agriculturist	○ Retired	
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Gross Annual Incom		O 5 10 Lees C	10.25 200	ne 1 arara 🔿 :	1 ororo			
Sole/First Applicant	OR Net worth (Mandatory for) 10-25 Lacs	s-1 crore \bigcirc > as on \Box		Y (Not older than 1 y	/ear)	
Second Applicant	O Below 1 Lac O 1-5 Lacs	○ 5-10 Lacs	○ 10-25 Lacs ○ >25	Lacs-1 crore	○ >1 crore OR Net worth ₹			
Third Applicant	O Below 1 Lac O 1-5 Lacs	○ 5-10 Lacs	○ 10-25 Lacs ○ >25	Lacs-1 crore	○ >1 crore OR Net worth ₹			
Scho	me Names	Plans	Options/Sub-options		Payment Details			
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Third Applicant O Politically Exposed Person (PEP) Related to Politically Exposed Person (RPEP) 1. NOMINATION OMINEE (OPT-IN) Details or OPT-OUT Declaration is Mandatory to process the application. Please tie A) FOR NOMINATION OPT-IN: I/We hereby nominate the undermentioned nominee(s) to the Nominee (S) (Guardian PAN to be (Guardian PAN to be (Mandatory)) Relationship with (Mandatory)* Name and address of (Guardian PAN to be (Guardian PAN to be (Mandatory))* Relationship with (Mandatory)* Relationship with (Mandatory)* Guardian PAN to be (Guardian PAN to be (Mandatory))* Relationship with (Mandatory)* Relationship wit	ottery / Casino S O Not appli O Not appli asse tick () fro	o Services plicable plicable rrom belo ve the an	ow Option A or	O; (iii) Money Lending / Option B as appropr	riate. (Refer instruction ¹
NOMINATION	Not appli ase tick () fro ee(s) to receive e and address of Guardian ndatory if Nomi-	plicable rom belove the an	mount to my/ou	Guardian's Relation- ship with Nominee* [attach proof]	Allocation % to each nominee [Mandatory] (Aggregate should be
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Applicant Applicant			3rd Applicant		

PRUDENTIAL TO

PAN BASED MANDATE CUM SIP REGISTRATION FORM [For investment through NACH (Not eligible for Minors Bank Account)]

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Mandatory fields in OTM form as per NPCI: • Bank account number and Bank name • IFSC and/or MICR Code • PAN • Signatures as per bank records • SIP start date. end date • Account type to be selected • Name as per bank records • Transaction type to be selected • Maximum amount to be mentioned.

GENERAL INSTRUCTIONS

UMRN (Unique Mandate Reference Number) is provided by NPCI, which is assigned to every mandate that has been submitted to them.

Investor will not hold ICICI Prudential Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles.

The Bank & AMC shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligations under this Agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riot, strike, mutiny, revolution, fire, flood, fog, war, lightening, earthquake, change of Government policies, unavailability of Bank's computer system, force majeure events, or any other cause of peril which is beyond the Bank's reasonable control and which has effect of preventing the performance of the contract by the Bank.

The investor hereby agrees to indemnify and not hold responsible, AMC/Mutual Fund (including its affiliates), and any of its officers directors, personnel and employees, the Registrars & Transfer (R&T) agent and the service providers incase for any delay/wrong debits on the part of the bank for executing the debit mandate instructions for any sum on a specified date from your account. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, the investor would not hold the user institution responsible. Investor confirm to have understood that the introduction of this facility may also give rise to operational risks and hereby take full responsibility.

Registration of OTM/PAN BASED MANDATE FACILITY: As an investor I/we hereby request you to register me/us for availing the facility of OTM/PAN based mandate and carrying out transactions of additional purchase/redemption/switch in my/our folio through Call Centre and/or also authorize the distributor(s) to initiate the above transactions on my/our behalf. In this regard, I/we also authorize the AMC, on behalf of ICICI Prudential Mutual Fund (Mutual Fund) to call/email on my/our registered mobile number/email id for due verification and confirmation of the transaction(s) and such other purposes. The mobile number provided in the common application form will be used as registered mobile number for verification and confirmation of transactions. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information or non-confirmation/ verification of the transaction due to any reason, I/we shall not hold AMC, Mutual Fund, its sponsors, representatives, service providers, participant banks responsible in this regard. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. I/We hereby confirm that the information/documents provided by me/us in this form are true. correct and complete in all respect. I/We hereby agree and confirm to inform AMC promptly in case of any changes. I/We interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. If you do not wish to receive, please call on tollfree no. 1800 222 999 (MTNL/BSNL) or 1800 200 6666 (Others).

Maximum Amount: The MAXIMUM AMOUNT is the per transaction maximum limit. Investor can register multiple SIPs but the amount should not exceed the maximum amount mentioned per transaction.

INSTRUCTIONS FOR EXISTING OTM AND PAN BASED MANDATE FACILITY

- 1) Investor can transact through OTM facility registered for the PAN in the respective folio(s).
- If more than one bank accounts are registered for OTM facility, investor is requested to mention the bank account number and bank name from where amount is to be debited. If the same is not mentioned or no OTM mandate is registered for the given bank details, AMC reserves the right to initiate the debit through any of the valid OTM's registered or reject the request.
- 3) The units shall be allotted based on the day on which funds are credited to AMC's collection account by the service provider/ bank. This is subject to compliance with the time stamping provision as contained in the SEBI (mutual funds) regulations, 1996.
- Registration request or any other subsequent transaction may be liable for rejection, if the frequency for the registered OTM is other than "As and when presented" and/ or if the transaction amount is other than fixed amount or more than maximum amount registered in the mandate.
- AMC reserves right to reject or process the application subject to internal verification.
- PAN based mandate will be mapped to all the folios wherever investor is the Sole/First holder subject to completion of mandate registration with the banker.
- PAN based mandate will not be applicable, if bank details provided is for Minor's Account.
- Investor can transact using this mandate, within the limit of maximum amount and tenure specified.

YOUR CONFIRMATION/DECLARATION: I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs.50, 000 in a year as described in the Instruction No.IV(d) of the common application form. 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. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV.

Holder	2nd Holder	3rd Holder	
	J L		