



LUMPSUM INVESTMENT

Please read Guidance Notes carefully. All Sections to be completed legibly in English in black / dark coloured ink and in BLOCK CAPITALS.

App. No. FI00058599

Distributor's Code	Sub-Broker's Code	Branch Code	For Official Use
ARN-26503			

1 EXISTING UNIT HOLDER(S) DETAILS (See Note 1)

Sole / First Unitholder
 First Name _____ Middle Name _____ Last Name _____ Folio No. _____

2 SOLE / FIRST APPLICANT'S PERSONAL DETAILS (See Note 2)

Sole / First Applicant
 First Name _____ Middle Name _____ Last Name _____ Date of Birth DD MM YYYY

Guardian (if Sole/First Applicant is Minor) OR Contact Person (For Non Individuals) _____ PAN _____

- Enclosed (Please ✓)
- PAN Proof
 - Acknowledged Copy of PAN application
 - Form 60/61 (for investments >=Rs. 50000)
 - Copy of KYC Acknowledgement Letter

STATUS OF SOLE / FIRST APPLICANT (Please ✓)

- Resident Indian Individual
- Non-Resident Indian Individual
- PIO
- Mutual Fund
- FI
- Bank
- Trust
- Government Body
- Defence Establishment
- Company / Body Corporate
- Partnership Firm
- HUF
- AOP / BOI
- FII
- Society
- NGO
- Others (please specify) _____

Address for Correspondence (P.O. Box Address is not sufficient)

Overseas Address (Mandatory for NRI / FII Applicants)

City / Town _____

City / Town _____ State _____

State _____ PIN _____

Country _____ Postal Code _____

Tel. (Office) (ISD) (STD) _____

Tel. (Res.) (ISD) (STD) _____

Mobile (ISD) _____

Email ID _____

Fax (ISD) (STD) _____

I / We wish to receive the following documents via e-mail instead of Post (Please ✓) Account Statement All other Statutory Communications Fact Sheet

3 BANK ACCOUNT DETAILS (MANDATORY - if left blank, Application will be rejected) (See Note 3)

Account No. _____ Account Type (Please ✓) Savings Current NRE NRO FCNR Others (please specify) _____

Bank Name _____ Branch _____ (Clearing Circle)

City _____ MICR Code _____ (This is a 9 Digit Number next to your Cheque Number.)

ECS OF DIVIDENDS (See Note 3c)

CHEQUE PAYOUTS (See Note 3d)

MULTIPLE BANK REGISTRATION (See Note 3e)

I/We wish to receive dividend through ECS. (Please furnish 9 digit MICR code above and ✓ here)

I/We DO NOT wish to avail Direct Credit Facility and instead wish to receive payments by CHEQUE. (Please ✓)

I/We wish to register my/our other bank accounts for redemption payout. Please send necessary forms (Please ✓)

4 JOINT APPLICANTS' DETAILS (See Note 4)

MODE OF HOLDING (Please ✓) Single OR Anyone or Survivor OR Joint

Second Applicant
 First Name _____ Middle Name _____ Last Name _____ Date of Birth DD MM YYYY

PAN _____

Guardian (if 2nd Applicant is Minor) _____ Enclosed (Please ✓) PAN Proof (please specify) Others (please specify)

Third Applicant
 First Name _____ Middle Name _____ Last Name _____ Date of Birth DD MM YYYY

PAN _____

Guardian (if 3rd Applicant is Minor) _____ Enclosed (Please ✓) PAN Proof (please specify) Others (please specify)



ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)

App. No. FI00058599

Received from _____ an application for Lumpsum Investment in

Scheme _____ Plan _____ Option _____

Investment Amount Rs. _____ DD Charges (if applicable) Rs. _____ Net Amount (Cheque / DD Amount) Rs. _____ A minus B

Cheque No. _____ Dated DD MM YYYY Drawn on _____

Subject to realisation of cheques and furnishing of mandatory information / documents. Please retain this slip till you receive your Account Statement.

For Office Use Only

Acknowledgement Stamp & Date

Scheme _____ **Plan** _____

Option (Please ✓) Growth OR Dividend Reinvestment OR Dividend Payout

Investment Amount _____ DD Charges (if applicable) _____ Dividend Frequency _____

Rs. A Rs. B Rs. A minus B

Mode of Payment (strike off whichever is not applicable) _____ Instrument No. _____ Dated _____

Cheque / DD / Fund Transfer / _____ D D M M Y Y Y Y

Drawn on _____

Bank _____

Branch _____ City _____

NRI / FI Investors*, please indicate source of funds for your investment (Please ✓) NRE | NRO | FCNR | Others _____ Please specify _____

6 NOMINATION DETAILS (Please cross out this Section if you do not wish to nominate) **(See Note 6)**

I / We do hereby nominate the undermentioned Nominee to receive the Units allotted to my / our credit in my folio in the event of my / our death. I / We also understand that all payments and settlements made to such Nominee and Signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC / Mutual Fund / Trustees.

Name and Address of Nominee _____ **To be furnished in case Nominee is a Minor (strike out if not applicable)**

Name _____ Name of Guardian _____

Address _____ Address of Guardian _____

Date of Birth (in case Nominee is a minor) _____ Signature of Guardian (Mandatory) _____

7 DECLARATION AND SIGNATURES **(See Note 7)**

I / We have read and understood the contents of the Offer Document of the above Scheme of Fidelity Mutual Fund including the sections on "Who cannot invest" and "Important Note on Anti Money Laundering, Know-Your-Customer and Investor Protection". I / We hereby apply for allotment / purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. I / We hereby declare that I / We am / are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I / We hereby authorise Fidelity Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s) / Fidelity Mutual Fund's bank(s) and / or Distributor / Broker / Investment Adviser. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We declare that the information given in this application form is correct, complete and truly stated.

***APPLICABLE FOR NRIs :** I / We confirm that I am / we are Non-Resident(s) of Indian Nationality / Origin and that I / We have remitted funds from abroad through approved banking channels or from funds in my / our NRE / FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my / our NRE / FCNR Account.

SIGNATURE(S) (ALL APPLICANTS must sign here) _____ Date D D M M Y Y Y Y

Sole / First Applicant **Second Applicant** **Third Applicant**

If the investment is being made by a Constituted Attorney please furnish Name and PAN of Power of Attorney Holder (POA) in respect of each applicant below :

Name POA Holder for Applicant 1 POA Holder for Applicant 2 POA Holder for Applicant 3

PAN

CHECKLIST

- Please ensure the following :
- You are not a Resident of USA or Canada
 - If you are an existing unit holder with us, Folio Number and name of sole / first unit holder is mentioned.
 - Name, date-of-birth, address and contact details and tax status of sole / first applicant are given in full.
 - PAN is furnished for all applicants and a certified copy of PAN Card or a certified acknowledged copy of PAN application is attached.
 - KYC acknowledgement letter is attached to your application form. If you have not complied with KYC requirements yet, please seek the KYC Forms from our Investor Service Centres, fill in the same and submit it to a Point of Service nearest to you to obtain your KYC Acknowledgement letter.
 - Your Bank Account details including the 9 Digit MICR Code are entered completely and correctly. A cancelled cheque leaf of such account is enclosed if the investment instrument is a demand draft or is from a different bank account.
 - For Joint Applicants, if any, Mode of Holding, Names, birth-dates are furnished.
 - Scheme / Plan / Option is indicated.
 - Investment details are furnished and following conditions are fulfilled :
 - Your investment is not below the Minimum Investment Amount.
 - If you are paying by a Demand Draft, you have filled the details as Investment Amount = DD Charges + DD Amount.
 - Your investment cheque is drawn in favour of Scheme, dated and signed. On the reverse of the cheque, the name of the Sole / First Applicant and the Application No / Folio No. are written.
 - Nomination details are filled in. If you do not wish to nominate, please ensure that the Nomination Section is crossed out.
 - The form is duly signed by all applicants.

Accompanying documents
Please submit the following documents with your application (where applicable). All documents should be original / true copies certified by a Director / Trustee / Company Secretary / Authorised Signatory.

Documents	Companies	Societies	Partnership Firms	Investments through PoA	Trust	NRI	FIs
Resolution / Authorisation to invest	✓	✓	✓		✓		✓
List of Authorised Signatories with Specimen signature(s)	✓	✓	✓	✓	✓		✓
Memorandum & Articles of Association	✓						
Trust Deed					✓		
Bye-laws		✓					
Partnership Deed			✓				
Overseas Auditors' Certificate							✓
Notarised Power of Attorney				✓			
Foreign Inward Remittance Certificate, in case payment is made by DD from NRE / FCNR a/c, where applicable						✓	

CONTACT US

Phone **1800 180 8000** (toll-free) OR **3030 9800*** (at local rates) OR **+91 124 2542022** (at long distance rates)

Lines open from 9 a.m. to 6 p.m. on all Business Days. * When dialing from your mobile phone, please prefix your city code.

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