

Application Form for Equity Schemes

APPLICATION FORM

No.

Principal Pnb Asset Management Company Private Limited
Investment Manager for Principal Mutual Fund

1 BROKER INFORMATION & APPLICATION RECEIPT DATE (Not to be filled in by the Applicant)

Broker Name & Code	Sub-Broker Code	Registrar Serial No.	Date & Time Receipt
Neerav S Parekh ARN - 36250			

2 EXISTING UNITHOLDERS (Please fill in your Common Account Number & First Unitholder's Name & go to Section 8)

Please note that applicant details and mode of holding will be as per existing Account Number.

Common Account Number

(All Capital letters)

First Unitholders Name

(First Name)

(Middle Name)

(Last Name)

3 NEW APPLICANT INFORMATION

(FILL-UP ENTIRE FORM IN CAPITAL LETTERS & BLACK INK)

Name of Sole/First Applicant/Donor Mr/Ms/Mrs _____
(All Capital letters)
(First Name) (Middle Name) (Last Name)

Name of Guardian & Relationship (in case of Minor)/Contact Person (in case of Institutional Investors) _____
(All Capital letters)
(First Name) (Middle Name) (Last Name)

Date of Birth DD / MM / YYYY

PAN No. (Mandatory for investments of Rs. 50,000 and above)* _____
Circle/Ward/District _____
MAPIN / UIN No.^ _____

Enclosed:
☐ PAN Card Copy
☐ Form 60

Name of Second Applicant/Joint Holder Mr/Ms/Mrs _____
(All Capital letters)
(First Name) (Middle Name) (Last Name)

PAN No. (Mandatory for investments of Rs. 50,000 and above)* _____
Circle/Ward/District _____
MAPIN / UIN No.^ _____

Enclosed:
☐ PAN Card Copy
☐ Form 60

Name of Third Applicant/Joint Holder Mr/Ms/Mrs _____
(All Capital letters)
(First Name) (Middle Name) (Last Name)

PAN No. (Mandatory for investments of Rs. 50,000 and above)* _____
Circle/Ward/District _____
MAPIN / UIN No.^ _____

Enclosed:
☐ PAN Card Copy
☐ Form 60

Address of Sole/First Applicant: [(P.O. Box Address is not sufficient) (Indian Address in case of NRIs/FIIs/OCBs)]

Pin _____

Communication: Off. Tel. _____ Res. Tel. _____ Fax _____
E-mail _____

Overseas Address in case of NRI/FIIs

Pin _____

Communication: Off. Tel. _____ Res. Tel. _____ Fax _____

Status (Please ☒ Individual ☐ HUF ☐ Company ☐ Trust ☐ Society/Club ☐ Partnership ☐ AOP ☐ Body Corporate ☐ BOI ☐ Minor ☐ Others

NRI / FII - ☐ Repatriable ☐ Non Repatriable

Mode of Holding (☒ Single ☐ Joint ☐ Either/Anyone or Survivor Send me a PIN for Internet enabled services (Please ☒ Yes ☐ No

* Please enclose a copy of PAN card/ PAN letter/Copy of IT Notice/ Copy of IT Assessment Order or such other correspondence from the Income Tax Department, which evidences the PAN quoted by the applicant/s. In case PAN is not available, please provide Form 60/ Form 61, as the case may be, with necessary proof as specified therein. Please refer Instruction no. 'D (1)' for more details.

^ Mandatory for Body Corporates w.e.f. January 1, 2005 and for other investors w.e.f. January 1, 2006. Please refer Instruction no. 'D (2)' for more details.

It is expressly understood that the investor/unitholder has the express authority from the relevant constitution to invest in the units of the Fund and the AMC/Trustees/Fund would not be responsible if the investment is ultravires the relevant constitution such as the Memorandum and Articles of Association and/or bylaws and/or Trust Deed and/or Partnership Deed and certificate of registration. The investor should not make any investments contrary to the relevant constitution.

4 NOMINATION

Nomination form is enclosed: ☐ Yes ☐ No
(Please fill up the form on Page No. 27)

5 SIP / SWP / SSTP

SIP / SWP / SSTP form is enclosed: ☐ Yes ☐ No
(Please fill up the form on Page No. 28)

6 BANK ACCOUNT DETAILS (As per Directives of SEBI, it is mandatory) - Details of Sole/First Holder for Redemption/Dividend Warrant

Name of the Bank _____ Account No. _____

Branch Address _____ City _____

Account Type (Please ☒ Current ☐ Savings ☐ NRO ☐ NRE ☐ FCNR ☐ NRSR Bank Code _____ (9 digit)

This is the 9 digit no. next to the cheque no.

7 ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Principal Pnb Asset Management Company Private Ltd.

Investment Managers for **Principal Mutual Fund**

Apeejay House, 5th Floor, 3 Dinshaw Vaccha Road, Churchgate, Mumbai 400 020. Tel: (91-22) 2202 1111.

Fax: (91-22) 2204 4990. Website: www.principalindia.com E-mail: customer@principalindia.com

Application Form for Equity Schemes

APPLICATION FORM

No.

Received from : _____

Cheque/DD No. _____ Dated: DD / MM / YYYY

Drawn on Bank & Branch : _____

Signature, Stamp & Date



8 YOUR INVESTMENT & PAYMENT DETAILS

Schemes	Plan/Option (Please ✓)	Dividend Distribution Option (Please ✓)	Amount (Rupees)
Principal Growth Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout <input type="checkbox"/> Sweep	
Principal Dividend Yield Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout	
Principal Global Opportunities Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout <input type="checkbox"/> Sweep	
Principal Junior Cap Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout	
Principal Focussed Advantage Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout	
Principal Index Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout <input type="checkbox"/> Sweep	
Principal Resurgent India Equity Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout	
Principal Equity Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout <input type="checkbox"/> Sweep	
Principal Balanced Fund	<input type="checkbox"/> Dividend <input type="checkbox"/> Growth	<input type="checkbox"/> Reinvest <input type="checkbox"/> Payout <input type="checkbox"/> Sweep	
GROSS AMOUNT (Rs. in figures)			
LESS BANK CHARGES (Rs. in figures)			
NET AMOUNT (Rs. in figures)			

Payment Details: Please (✓) ☐ Cheque/DD ☐ NRE ☐ FCNR ☐ NRO ☐ NRSR ☐ Direct RemittanceCheque/ Bank Draft/ Pay Order Number Dated DD / MM / YYYYAll Cheques/DDs to be drawn in favour of
"Principal Mutual Fund"Drawn on Bank Bank Details: Branch City Pincode Rupees in words

Primary Beneficiary(s) / Nominee(s)

Name of Sole/First Primary Beneficiary: Mr/Ms/Mrs. <input type="text"/>	Relation <input type="text"/>
Name of Guardian (in case of Minor): Mr/Ms/Mrs. <input type="text"/>	Relation of Guardian <input type="text"/>
Address of Sole/First Primary Beneficiary: <input type="text"/>	Percentage of Investment Allocation (integer) <input type="text"/> %
City <input type="text"/> Pin <input type="text"/> State <input type="text"/>	
Name of Second Primary Beneficiary: Mr/Ms/Mrs. <input type="text"/>	Relation <input type="text"/>
Name of Guardian (in case of Minor): Mr/Ms/Mrs. <input type="text"/>	Relation of Guardian <input type="text"/>
Address of Second Primary Beneficiary: <input type="text"/>	Percentage of Investment Allocation (integer) <input type="text"/> %
City <input type="text"/> Pin <input type="text"/> State <input type="text"/>	
Name of Third Primary Beneficiary: Mr/Ms/Mrs. <input type="text"/>	Relation <input type="text"/>
Name of Guardian (in case of Minor): Mr/Ms/Mrs. <input type="text"/>	Relation of Guardian <input type="text"/>
Address of Third Primary Beneficiary: <input type="text"/>	Percentage of Investment Allocation (integer) <input type="text"/> %
City <input type="text"/> Pin <input type="text"/> State <input type="text"/>	

9 DECLARATION AND SIGNATURES

I/We have read and understood the contents of the above mentioned scheme/s, for which units are been subscribed or exchanged into. I/We agree to abide by the terms, conditions, regulations of the Schemes under the above mentioned scheme/s. The Mutual Fund scheme(s) in which I/We are investing offers varied sales/exit load. I/We have reviewed the Offer Document explaining the difference between loads including the reduction of sales load for units based upon the amount invested. I/We understand that switch between schemes including under asset allocation are taxable transactions. I/we understand that A/c Statements and all investor communication will be emailed to the email id specified by me.

I/We confirm that I am/We are Non-Residents of Indian Nationality/Origin and that I/We hereby confirm that the funds are remitted from abroad through approved banking channels or from my/our funds in my/our Non-Resident External Account/FCNR/NRO/NRSR Account. (Applicable to NRI/FIIs only)

I/We understand that the Fund reserves the right to refuse/reject the allotment of units in case of incomplete/incorrect information provided by me/us.

I/We have understood the details of the scheme and I/we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.

Sole/First Applicant/Holder

Second Applicant/Holder

Third Applicant/Holder

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Scheme Name/Plan/Option	Gross Investment Amount Rs.
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
TOTAL GROSS AMOUNT	<input type="text"/>
LESS BANK CHARGES	<input type="text"/>
TOTAL NET AMOUNT	<input type="text"/>

Note: All future communications in connection with this application should be addressed to Investor Services Mumbai, quoting full name of the first applicant, the application serial number, the name of the scheme/plan/option, the amount invested under individual schemes or asset allocation, optional feature details, date and place of the Investor Service Centre where application was lodged.