Application No. Distributor Code				ESTME			re	lax	í. It's	AXI	5. <u> </u>		AXIS	MUT	UAL	
Distributor Code																
	/ ARN		Sub-dist	ributor	code	ARN /	Sol ID			S	erial N	umber,	Date a	and Tir	ne Sta	mp
13308																
Upfront commission shall be paid directly b		-		ne investor's a	assessmer	t of various fa	actors includin	g the servi	ce rendered	by the dist	tributor.					
1. EXISTING INVES	TOR'S FO															
		(If you have an	existing folio	number wit	h KYC va	ilidated, ple	ase mention	the num	iber here a	and skip t	to section 6	. Mode of	holding wi	ll be as pe	existing	folio numl
2. FIRST APPLICAN																
Name of 1st Applicant	t (should match w	ith PAN card)											Title	Mr.	M	s. □N
Date of Birth				For	Invest	ments "	'On beha	alf of	Minor"	/Rofor Ins	struction 6)	^Attach m	andatory de	ncuments a	s nor instr	uctions)
PAN*(1st Applicant/Guardian)	D D M M	/ Y Y		Proc	of of [Date of					ate					
*Mandatory. Refer Instruction 5. Enclose (Please \checkmark)	Attested F	PAN card co	ναα		iched'						Any oth				1.6	
	KYC Ackn	nowledgmen	nt*				below i		-ather				ourt A	ppointe	eda	
Name of the Guardian		Jontact Pers	son for no		luuai	S / FUA	Holder	name		POA	PAN					
Correspondence Addre	ess / Overse	eas Address	(For FIIs/NRI	s/PIOs)												
City					Stat	e						Pin	Code			
Email ID (Refer instruction 11a	a)								M	obile	+91					
STD Code	Tel (Office	2)			Те	l (Resi)										
3. JOINT APPLICAN	NT'S DETA	AILS			Mo	de Of I	Holding	(Please	√)	Joi	nt (Defaul	t) A	nyone	or Sur	vivor	Sin
Name of 2nd Applican	t (Should match v	with PAN Card)											Title	Mr.	M	s. N
PAN																
(2nd applicant)			Enclos	se A	tteste	ed PAN	card co	ру				ment*		*Mandato	ry. Refer	Instructio
Email ID									IVI	obile	+91					
Name of 3rd Applicant	t (Should match w	vith PAN Card)											Title	Mr.	M	s. N
PAN			Enclos		tteste	A PAN	card co	ny 🗌	KVC	Ackn	owleda	ment*		*Mandato	rv Refer	Instructio
(3rd applicant)			Elicios	se _ ~				γPy		obile	_	ment		Walldato	y. nerer	motructio
		FOR PAY	-OUT (M	andatory.	Refer ir	struction	4 and ava	il of Mu				acility.)				
4. BANK ACCOUNT																
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Toll Free	1800 3000 3300
Website	www.axismf.com
Email	customerservice@axismf.com