

1. DISTRIBUTOR INFORMATION (Please read the instructions before investing)

Broker code: ARN-13308
Sub-broker code:
For office use:

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.

2. INFORMATION OF EXISTING UNIT HOLDER (For existing investor. Unless details in sections 3 - 6 have changed, please go directly to section 6. Note that applicant details and mode of holding will be as per existing folio number)

Folio no.:
Employee SID (for employees of J.P. Morgan only):

3. APPLICANT INFORMATION

Occupation [Please tick (✓)]:
Status [Please tick (✓)]:
Name of first applicant:
Date of birth*:
Name of guardian (in case of minor):
Relationship:
Name of Contact person (In case of institutional investors):
Designation of the contact person:
Name of second applicant:
Name of third applicant:
Address of sole / first applicant (Please provide full address) (In case of NRIs/FIIs please provide overseas address - Mandatory P.O. box no. may not be sufficient):
Overseas address (Please provide full address. P.O. box no. may not be sufficient) (Mandatory for NRIs / FIIs / PIO):
Communication:
Tel. (R) / Mobile no.:
Tel. (O):
Fax no.:
E-mail:

I/We would like to receive the following documents through e-mail instead of post (Kindly ✓):
Mode of holding [Please tick (✓)]:
Permanent Account Number (PAN) [Mandatory]:
First applicant:
Second applicant:
Guardian:
Third applicant:

4. BANK ACCOUNT DETAILS (Mandatory. The application will be rejected if this section is left blank. Please provide the details of the sole / first applicant). (Refer instruction no. 3 on page 32)

Bank particulars (Name of the bank):
Branch:
Branch address:
City:
Account number:
Account type:
RTGS or neft - IFSC code:
9 digit MICR code:
Direct credit facility (please refer to the list of banks that offer direct credit facility on page 32). However, if you wish to receive a cheque payout, please tick here (✓):
Electronic Clearing Services (ECS) facility is available for receiving dividends. If you wish to avail of this facility, please tick here (✓):

5. ANNUAL INCOME [Please tick (✓)]

Upto ₹ 5,00,000
₹ 5,00,001 to ₹ 25,00,000
₹ 25,00,001 to ₹ 1,00,00,000
₹ 1,00,00,001 to ₹ 5,00,00,000
₹ 5,00,00,001 and above

6. INVESTMENT DETAILS (Refer instruction no. 4 on page 33)

Scheme name JPMorgan
Plan (Please ✓):
Option (Please ✓):
Dividend
Dividend reinvestment (default)
Dividend payout
Growth (default)
Daily*
Weekly*
Fortnightly*
Monthly*
*as applicable

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Received from: Mr. / Ms.
Application for units of: JPMorgan
Plan:
Option (please ✓):
Cheque / D.D. no. for ₹ dated
Drawn on bank

Application no.

T

Office Signature, stamp & date

7. PAYMENT DETAILS (Refer instruction no. 5 on page 33)**7A. INITIAL INVESTMENT** (Please note that investors have to fill out separate common application forms for Initial and SIP investments)

Cheque / DD no.		Drawn on bank/	
Cheque / DD date	D D M M Y Y Y Y	Branch name	
Amount of cheque / DD in figures (₹) (i)		Account type (Please ✓)	<input type="radio"/> Savings <input type="radio"/> Current <input type="radio"/> NRE <input type="radio"/> NRO <input type="radio"/> FCNR
DD charges, if any, in figures (₹) (ii)		Relationship with beneficiary	
Total amount in figures (₹) (i) + (ii)		(Third party payment)	
Rupees in words			

7B. SYSTEMATIC INVESTMENT PLAN (Refer terms and conditions on page 38 and instructions for SIP on page 40)

Frequency (Please ✓ any one only) <input type="radio"/> Monthly SIP (default) <input type="radio"/> Quarterly SIP	Enrolment period Start Date M M Y Y	Dates <input type="radio"/> 1st (default) <input type="radio"/> 10th <input type="radio"/> 15th <input type="radio"/> 25th <input type="radio"/> All dates (for ECS facility only)
Payment mechanism (Please ✓ any one only) 1. <input type="radio"/> Cheques (Please provide the details below) 2. <input type="radio"/> ECS debit facility (Please complete the application form for ECS debit facility)		No. of instalments _____ (default as per SID)
First SIP transaction via Cheque no.	Cheque dated D D M M Y Y	Amount (₹) _____
Instalment amount (₹)	No. of instalments	Total Amount (₹)
Subsequent instalment cheque nos.	From _____ To _____	From _____ To _____
Cheques drawn on	Name of bank _____	Branch _____

8. DEMAT ACCOUNT DETAILS OF FIRST / JOINT APPLICANT(S) (Refer Instruction 7)

Depository Participant (DP) ID	Beneficiary Account Number	Depository Participant (DP) ID & Beneficiary Account Number
NSDL <input type="radio"/> _____	OR CDSL <input type="radio"/> _____	

Please note that :

- If demat details provided are not valid, allotment will be done in physical / statement of account mode.
- In case of valid demat account details provided, the bank account details, joint holding details, mode of holding (joint / anyone or survivor) in case of joint holdings, address details and nominee details as per the demat account shall prevail over the corresponding details provided on the application form.

9. NOMINATION* DETAILS (Nominations will not be permitted in case of folios held on behalf of a minor)

I/We hereby nominate the undermentioned nominee to receive the amounts to my/our credit 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.

☐ Tick here if you do not wish to nominate ^

Name of the nominee	Date of birth (if nominee is minor)
Mr. Ms. M/s. _____	D D M M Y Y Y Y
Address of nominee (Please provide full address)	

Pin code _____	
Name of the guardian (if nominee is minor)	Relationship with nominee
_____	_____
Address of guardian	Signature of guardian (mandatory) / nominee (optional)
_____	_____
Pin code _____	

* For multiple nominations please ensure that the same details given in this nomination section are sent in on a separate sheet of paper, with all the investors' signatures.

^ Please note that if you do not tick the box nor furnish any nomination details, it is deemed to be assumed that you do not wish to nominate anyone.

10. DOCUMENTS ENCLOSED (Please ✓)	APPLICATIONS ENCLOSED (Please ✓)	Total No. of enclosures
Corporate Documents <input type="radio"/> Yes <input type="radio"/> No ASL <input type="radio"/> Yes <input type="radio"/> No BR <input type="radio"/> Yes <input type="radio"/> No	Micro SIP Alternate Document: _____ Document Number: _____ <input type="radio"/> Systematic Investment Plan (SIP) <input type="radio"/> MICRO SIP Document <input type="radio"/> Cheques <input type="radio"/> Systematic Transfer Plan (STP) <input type="radio"/> ECS Debit Facility <input type="radio"/> Systematic Withdrawal Plan (SWP)	No. to be filled by applicant _____ For office use _____

11. DECLARATION AND SIGNATURES

Applicable to NRI / FI / PIO: I am / We are not U.S. or Canadian person(s) or resident(s) in or citizen(s) of the United States of America or Canada. 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. **In case of non residents** (please tick as appropriate): 1. Residential Status: ☐ Resident (including not ordinarily resident) ☐ Non-resident. 2. The units issued to me / us will be held as ☐ investment ☐ business asset.

Corporate applicants only: A corporation should affix its company stamp or seal, if any. I am / We are duly authorised to execute and deliver this Master Account Agreement. The corporation is not organised or formed by U.S. Persons, residents in or citizens of the United States of America principally for the purposes of investing in securities not registered under the Securities Act of 1933 of the United States of America.

I / We have read, understood and agree to the contents of the Key Information Memorandum (including the 'General section'), Statement of Additional Information and the Scheme Information Document of the above Scheme(s) of JPMorgan Mutual Fund including the sections on "Who cannot invest", "Note on Anti Money Laundering, Know-Your-Customer and Investor Protection", "How to Apply?", "Fax Instructions" and any indemnities provided therein.

I / We shall make our own independent decisions whether to subscribe for Units acting upon our own judgment and such independent advice as I / We consider appropriate. I / We hereby apply for allotment / purchase of Units in the Scheme(s) and agree to abide by the terms and conditions applicable thereto. I / We hereby declare that I / We am / are a "person resident in India" for the purposes of the Foreign Exchange Management Act, 1999 and 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 JPMorgan Mutual Fund, its Investment Manager and / or its agents to disclose details of my investment to my bank(s) / JPMorgan Mutual Fund's bank(s) and / or any relevant distributor / broker / investment advisor, as appropriate. 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.

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 do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year. I hereby declare that in case of third party payments, the payments are covered under one of the following: Payment by Parents/Grand-Parents/related persons on behalf of a minor in consideration of natural love and affection or as gift for a value not exceeding ₹ 50,000/- (each regular purchase or per SIP installment) or Payment by Employer on behalf of employee through Payroll deductions or Custodian on behalf of an FI or a client.

(These signatures will be matched against the signatures in the repurchase or other transactions and in case of improper match or difference in the signatures, investors will be requested to get their signature verified by their banks.)

Date _____			
SIGNATURE(S)			
Sole / First applicant	Second applicant	Third applicant	Third party cheque issuer

Please refer to Chapter III of the Scheme Information Document.

Signature of all applicants is necessary in case a nominee has been mentioned in Section 8 above.

JPMorgan Mutual Fund

Note: All future communications in connection with this application should be addressed to the nearest JPMorgan Customer Service Centre, quoting full name of the first applicant, the application serial number, the name of the scheme, the amount invested, date and the place of the Customer Service Centre where the application was lodged.

Asset Management Company

JPMorgan Asset Management India Private Limited
J. P. Morgan Tower, Off C.S.T. Road, Kalina, Santacruz (East), Mumbai - 400 098. **Tel.:** 022 - 6157 3000 **Fax :** 022 - 6157 4170
E-mail india.investors@jpmorgan.com **Toll free no.** 1-800-22-5763 (JPMF)
Deutsche Investor Services Private Limited, Nirlon Knowledge Park, 4th Floor, Block 1, Western Express Highway, Goregaon (East), Mumbai - 400 063,
Maharashtra - India. **Tel. :** 022 - 6670 6900 **E-mail :** investor.jpm@db.com

Registrar & Transfer Agent

Please read Terms & Conditions overleaf

First SIP cheque and subsequent SIP via ECS (debit clearing) in select banks.

ARN-13308

The Trustee

JPMorgan Mutual Fund India Private Limited

I / We have read and understood the contents of the Scheme Information Document of the following scheme(s) and the terms & conditions of SIP ECS (debit clearing).

Please (✓) any one.

- I / We hereby apply for ECS under the SIP (debit clearing) of the following scheme(s) / option and agree to abide by the terms and conditions of the following scheme(s) / plan / option (new registration).
- Please change my / our bank account for ECS (debit clearing) (change in bank account).
- I / We hereby apply for cancellation of ECS (debit clearing) facility for SIP of the following scheme / option (cancellation).

INVESTOR AND SIP DETAILS

Folio no. (for existing unit holder) / Application no. (for new investor)

Sole / First investor name

Scheme name JPMorgan

Option (Please ✓) Growth (default option) Dividend Dividend reinvestment (default) Dividend payout Daily* Weekly* Fortnightly* Monthly* *as applicable

Plan (Please ✓) Retail Institutional Super Institutional

Each SIP instalment amount (₹)

Frequency Monthly (default) Quarterly

First SIP transaction via cheque no.

Cheque dated D D M M Y Y Amount (₹)

SIP date (Please ✓) [for ECS (debit clearing)] 1st (default) 10th 15th 25th All dates* (see overleaf)

There must be at least 21 days gap between the first SIP cheque and subsequent due date of ECS (debit clearing).

SIP period [for ECS (debit clearing)] Start from M M Y Y End on M M Y Y (default - as per SID)

I/We hereby, authorise JPMorgan Mutual Fund and its authorised service providers, to debit my/our following bank account by ECS (debit clearing) for collection of SIP payments.

PARTICULARS OF BANK ACCOUNT

Bank name

Branch name

Bank city

Account number

Account type (Please ✓) Savings Current

9 digit MICR code* RTGS or neft - IFSC code R E Q U I R E D

* Please provide the MICR code of the bank branch from where the ECS is to be effected. MICR codes starting or ending with 00 are not valid for ECS.

Accountholder name as in bank account

I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in ECS (debit clearing). If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/we would not hold the user institution responsible. I/We will also inform JPMorgan Mutual Fund about any changes in my / our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

Date

SIGNATURE(S)

First account holder's signature (As in bank records)

Second account holder's signature (As in bank records)

Third account holder's signature (As in bank records)

For office use only (not to be filled in by the investor)

Recorded on

Scheme code

Recorded by

Credit account number

Authorisation of the bank account holder (to be signed by the Investor)

This is to inform that I/we have registered for the RBI's Electronic Clearing Service (debit clearing) and that my payment towards my investment in JPMorgan Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/we authorise the representative carrying this ECS (debit clearing) mandate form to get it verified & executed.

Bank account number

SIGNATURE(S)

First applicant

Second applicant

Third applicant