Application Form (For Lumpsum and SIP)

Instrument No.

Dated

Drawn on Bank

Account No.

Amount (Rs.)

Scheme / Plan / Option

Please read product labelling details available on cover page and the instructions before filling up the Application form. Tick (\checkmark) whichever is applicable, strike out whichever is not required.



BARODA BNP PARIBAS MANUFACTURING FUND (An open-ended equity scheme predominantly investing in Manufacturing theme)
This product is suitable for investors who are seeking*: Risk-o-meter for the benchmark Riskometer for the Scheme^^ Benchmark - Nifty India Manufacturing TRI Long term capital appreciation. • Investing in equity and equity related securities of companies engaged in manufacturing theme.

NFO Opens : June 10, 2024

*Investors should consult their financial advis ^hthe riskometer assigned is based on inter may vary post NFO when actual investments	teristics and the same	tics and the same Investors understand that their principal Benchmark Riskometer is at Very will be at VERY HIGH RISK			Scheme re-opens on Within 5 business days from date of allotment	
All sections should be completed in			-	FILINA	I O O o do	[
Distributor ARN / RIA Code ARN-1678	Sub Distributor ARN	Sub Distributo	or / RM Internal Code	E 087722	LG Code	For Office use only (Time Stamp)
Upfront commission shall be paid direc	tly by the investor to the AMFI re	gistered Distributor	rs based on the investo	s' assessment of vari	ous factors includ	ing the service rendered by the distributor
*I/We hereby confirm that the EUIN be is executed without any interaction person of the above distributor / sub any, provided by the employee / rela	or advice by the employee broker or notwithstanding the	relationship ma advice of in-app	anager / sales propriateness, if	st / Sole Applicant ardian / POA Holder uthorised Signatory	Second Applie	
TRANSACTION CHARGES for Rs. 10,000 and above (✓ any one)			•		-	e and payable to the Distributor) ge and payable to the Distributor)
1. EXISTING INVESTOR'S FOL				The	details in our	records under the Folio number will apply for this application.
2. FIRST APPLICANT'S DETA						11.7
Name of First Applicant (In CAPITA		Date of Birth (Mandatory - If Minor, attach proof)				
Name of Guardian (if minor)/POA/Con	tact Person (As per PAN) (Refer	Instructions) Gu	uardian is: O Father	Mother Court App		ate of Birth (Guardian)
PAN (1st Applicant / Guardian)			C	KYC - KIN		
PAN of POA				(IN (POA)		
3. CONTACT DETAILS AND C	ORRESPONDENCE ADDR	ESS (AS PER K	YC RECORDS) NRI	Investors should m	ention their Ove	erseas address (Refer instructions)
Email ID* (in capital)						*(default mode of communication)
Mobile +91		Tel. STD	Code			
Wherever email ID is registered an electric Contact details belong to family du Address Type (Mandatory) Res	e to investor being, O Self	Spouse De	ependent Child O De	pendent Parent 🔘 I	•	please request for the same separately. Guardian In case of Minor
Mailing Address Landmark					City	
State		Country			Pin Code (N	landatory)
Overseas Address (Mandatory for I	NRI Investors)	,				
Mailing Address					City	
Landmark State		Country			Pin Code (N	landatory)
	epatriation NRI-Non Repatri Society^ / Club Partnership give below declaration: which has been constituted for re istration Act, 1860 (21 of 1860) or a	/ LLP AOP / Bo	DI O FPI O Non Profi	t Organisation^ B ause (15) of section 2 c stered under the Sectio	Bank Governmof the Income-tax A	
B. Occupation Details (Please tick • Proprietorship Housewife		_		t Service Busine	ess Profession	nal Agriculturist Retired
C. Gross Annual Income (Please tic Net-worth in (Mandatory for Non-Ind		Lacs	cs 10-25 Lacs as on		>1 crore	(Not older than 1 year)
D. Politically Exposed Person (PEP	P) Status : (Please tick ✓) ○ N	lot Applicable	I am Politically Expose	d Person OI am R	Related to Political	ly Exposed Person
5. JOINT APPLICANTS (IF AN		de of Holding (P	Please tick ✔) 🔵 Jo	int Anyone c	or Survivor (Defa	
Name of 2nd Applicant (As per F	PAN) (Refer Instructions)					ate of Birth (Mandatory)
PAN (2nd Applicant)			C	KYC - KIN		
a. Occupation Details (Please tick ✓ Housewife Student Fore	, –		rvice Government	Service Busines	ss Professio	nal Agriculturist Retired
b. Gross Annual Income (Please tick c. Politically Exposed Person (PEP	k ✔) ○ Below 1 Lac ○ 1-5 l	acs 5-10 Lac	-		_	ly Evnosed Parson
Name of 3rd Applicant (As per P		оттрриодого	Tanii ontoany Expose	ar order Cramit		ate of Birth (Mandatory)
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ACKNOWLEDGEMENT SLIP (T		,				
Application form received for purchase	e of units, subject to realization,	verification and cor	nditions			
Mr. / Ms. / M/s						

Livet A	unnlicant/Guardi	an		2nd Applican	t		O 0	Applicant	204	
First Applicant/Guardian Place & Country of Birth PLACE COUNTRY			2nd Applicant				3rd Applicant OPOA			
			Place & Country of Birth PLACE COUNTRY			_	Place & Country of Birth PLACE COUNTRY			
ationality O Indian	○ U.S. ○ Other		Nationality O Indian	○ U.S. ○ O	ther	Nationa	llity O Indian	○ U.S. ○ Other		
e you a tax resident (i.	e. are you assesse	d for Tax) in any oth	ner country outside Indi	a? ○ Yes ○ N	IO (If yes please pro	vide informa	tion below.)			
Country#	Tax	Identification	Country#	Tax	Identificatio		Country#	Tax	Identification	
	Identification Number	Type/Reason•		Identificatio Number	n Type/Reaso	n•		Identification Number	Type/Reason•	
			1			1				
			2			2				
			3			3				
Please indicate all Co	ountries, other than	n India, in which yo	ou are a resident for ta	x purpose, ass	ociated Taxpayer I	dentification	Number and it	t's Identification typ	e eg. TIN etc.	
			on as: 'A' if the countr		ie TINs to its resid	ents; 'B' & m	ention why yo	ou are unable to ob	tain a TIN; 'C' if	
	,		not require the TIN to Registration Facility)	be disclosed.						
	I DETAILO (Avai	i mulupie Balik N	tegistiation raciity)		B. I.A.					
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					A/C Type	Savings	Current C	NRE ONRO	FCNR Othe	
anch			Pin		IFSC code	: (11 digit)				
INVESTMENT 8	PAYMENT DE	TAILS Ze	ro Balance 🔲 Lu	mpsum (Pl	ease fill details	oelow) 🔲	SIP (Fill se	parate SIP form)		
cheme Name BARO	DDA BNP PARIBAS	S MANUFACTURIN	IG FUND	Plai	n · O Regular O Di	rect Ontion	. Growth	DIDCW Payout	IDCW Reinvestm	
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ayment Type : No		ent O Third Party	Payment (Please attac	in Third Party D	veciaration Form")					
DEMAT ACCOL	INT DETAILS									
National Securities D	epository Ltd.	Depository Partic	cipant Name							
Central Depository S	ervices (India) Ltd.	DP ID No.		Ber	eficiary Account No					
estor willing to invest in De	emat option, may provid	de a copy of the DP Sta	atement enabling us to matc	ch the Demat detail	s as stated in the Applic	ation Form. In o	ase the form is n	ot filled, the default opti	on will be physica l m	
SIGNATURE(S)		ubmit all the requisit / Sole Applicant	te documents issued by		such competent aut nd Applicant	nority, based	on the value o	f assets held in the Third Applican		
aving read and understo	od the instruction for N	lomination, I / We here	eby nominate the person(s) more particularly	described hereunder	n respect of the	e Units under the	Folio held by me/us ir	the event of my de	
		Nominee Name	(-	Relation			ation %#	Guardian Si		
lominee 1										
Iominee 2										
TOTTIMEE 2										
Nominee 3										
			of allocation / share for	each of the nom	inees in whole num	pers only with	out any decim	nals making a total o	f 100 per cent.	
. DECLARATION										
			e hereby apply for units of th s, rules and regulations gov							
t involve / is not designed t	for the purpose of the co	ontravention of any Act	, Rules, Regulations, Notific	ations or Directives	of the provisions of the	Income Tax Ac	t, Anti Money Lau	ındering Laws, Anti Corr	uption Laws or any o	
			have not received nor have ess is not completed by me							
heme, at the applicable NA	AV prevailing on the date	e of such redemption a	nd undertake such other ac	tion with such fund	s that may be required	y the law. I/We	hereby agree to	consent the AMC to sha	re my transaction de	
			se. I / we hereby confirm than any form, mode or manner							
us to the Fund, its Spons	or, AMC, trustees, their	employees/RTAs or an	y Indian or foreign governme	ental or statutory or	judicial authorities/ager	cies including b	ut not limited to S	EBI, the Financial Intelli	gence Unit-India, the	
			nd other such regulatory/inv tments which together with t							
y.) with your fund house.	. Have any existing wild	TO OII /Euripauri invesi	unents which together with	ine current applicat	ion will result in aggreg	ate investments	exceeding livit o	o,ooo iii a yeai (Applica	ible for Miloto investi	
			tionality/origin and that I/We	have remitted fund	s from abroad through	approved banki	ng channels or fro	om funds in my/ our Nor	Resident External /	
sident Ordinary / FCNR ac			Limited and its agents to co	ntact me over phon	e, SMS, email or any ot	ner mode to add	ress my investme	ent related gueries and/o	or receive communica	
Ve give my consent to Bard		ons/ promotional/ poten	tial investments and other c	ommunication/ mat	erial irrespective of my	olocking prefere	nces with the Cu	stomer Preference Regi		
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taining to transactions/ no Ve hereby provide my/our o			er) and PMLA. I/ We hereby	v provide mwour co					ar number(s) (if provi	
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