



APPLICATION FORM FOR TATA RETIREMENT SAVINGS FUND

(An Open Ended Fund comprising three plans)



Expertise that's trusted

Sr. No.:

1. DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Tata Mutual Fund)

BROKER / AGENT CODE	SUB-BROKER / BANK BRANCH CODE	M. O. CODE
ARN - 0155	20104	

As per SEBI Circular, Cir/IMD/DF/13/2011 dated 22/08/2011, transaction charges (₹ 100 / ₹ 150) as applicable would be deducted from the investment amount. (Refer Inst. A17 for further details). 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. Existing Unitholder information for existing investors, please fill in your Folio Number, Name & proceed to Scheme Investment Details.

Existing Folio Number: Name of Sole/1st Applicant:

3. DEMAT ACCOUNT DETAILS: (Please ensure that the sequence of names as mentioned in the application form matches with that of the account held with the Depository Participant). In case Unit holders do not provide their Demat Account details, Units will be allotted in physical form. (Refer Instruction D)

National Securities Depository Limited	Depository participant Name <input type="text"/>	Central Depository Securities Limited	Depository participant Name <input type="text"/>
	DP ID No. <input type="text"/>		Target ID No. <input type="text"/>
	Beneficiary Account No. <input type="text"/>		

4. MODE OF HOLDING OCCUPATION STATUS

<input type="checkbox"/> Single <input type="checkbox"/> Joint (Default) <input type="checkbox"/> Anyone or Survivor(s)	OCCUPATION <input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Service <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Civil Servant <input type="checkbox"/> Politician <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others <input type="checkbox"/> Political Party Official <input type="checkbox"/> Current/Former MP/MLA/MLC/Head of State <input type="checkbox"/> Senior Executive of State owned corporation	STATUS 1st Holder <input type="checkbox"/> Resident Indian <input type="checkbox"/> NRI <input type="checkbox"/> PIO <input type="checkbox"/> HUF <input type="checkbox"/> Minor RI <input type="checkbox"/> Minor NRI 2nd Holder <input type="checkbox"/> RI <input type="checkbox"/> NRI 3rd Holder <input type="checkbox"/> RI <input type="checkbox"/> NRI
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5. APPLICANT'S PERSONAL DETAILS (Fill in Block Letters, use one box for one alphabet leaving one box blank between two words, as it appears in your Bank A/c & KYC letter)

Name of First / Sole applicant Mr. Ms. M/s.

1st holder PAN KYC Copy attached Document Category No. Date of Birth**

Proof of DOB (Mandatory for minor) Birth Certificate School Leaving Certificate Passport Other (**Date of birth Mandatory for 1st applicant / Karta for HUF)

Name of Guardian (In case of Minor-Contact Person/Designation - In case of non-individual Investors) Mr. Ms. Relation with Minor/Designation

Guardian's PAN KYC Copy attached Document Category No.

Proof of relationship with minor (Mandatory) Mother / Father / Legal Guardian Birth Certificate School Leaving Certificate Passport Other

Name of Second applicant Mr. Ms.

2nd holder PAN KYC Copy attached Document Category No.

Name of Third applicant Mr. Ms.

3rd holder PAN KYC Copy attached Document Category No.

Mailing Address of Sole / First Applicant (PO. Box Address may not be sufficient. Please provide your complete Address)

Add 1
 Add 2
 Add 3 City
 Pin State Country

Contact Details (REQUIRED)

Phone O Extn. Fax
 R (STD Code) Mobile

e-mail → (IN CAPITAL)

[If you wish to receive Account Statement / Annual Report / Other Statutory Information via Post instead of Email (Refer Inst. - C8)].

Overseas Address (Mandatory in case of NRI applicant in addition to mailing address)

City
 Zip code State Country

ACKNOWLEDGEMENT SLIP (TO BE FILLED BY THE INVESTOR) Sr. No.:

Received from Mr. / Ms. / M/s.

an application for Units of **Tata Retirement Savings Fund**

Plan Progressive Moderate Conservative

alongwith Cheque / DD No. Dated Drawn on (Bank)

Amount (₹)

Signature, Stamp & Date

Subject to realisation of Cheque / Demand Draft and verification of mandatory information / document.

6. FIRST HOLDERS BANK ACCOUNT DETAILS (Mandatory) Refer Instruction H

All communication/payments will be made to first applicant or to Karta in case of HUF. Bank account details of First Unitholder required without which the application would be rejected

Name of the Bank									
Branch					Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRNR <input type="checkbox"/> NRE				
Account No. (in Fig.)									
Bank Address									
City				State			PIN		
^ MICR Code			*IFSC Code (RTGS)			*IFSC Code (NEFT)			

* This is a 11 Digit Number, kindly obtain it from your Bank Branch. (Cancelled cheque is **Mandatory**)**7. (A) INVESTMENT TYPE - Choose any one**
 Lumpsum Lumpsum + SIP SIP only MICRO SIP [For SIP / MICRO SIP please fill the ECS / AD / SI mandate form enclosed & skip 7.(B) & 7.(C)]
7. (B) SCHEME INVESTMENT DETAILS (For Lumpsum Only) Multi-Plan investment facility available. However only 1 option per plan (Refer Inst. I, J & K for default values)

Plan Name	Investment Amount (₹)	Please tick the appropriate option (any one per plan)
<input type="checkbox"/> Progressive Plan		<input type="checkbox"/> Auto Switch Option 1 (Progressive to Moderate @ age 45; Moderate to Conservative @ age 60), <input type="checkbox"/> Auto Switch Option 2 (Progressive to Conservative @ age 60) <input type="checkbox"/> No Auto Switch
<input type="checkbox"/> Moderate Plan		<input type="checkbox"/> Auto Switch Option 3 (Moderate to Conservative @ age 60) <input type="checkbox"/> No Auto Switch
<input type="checkbox"/> Conservative Plan		-----
Total Investment Amount (₹)	₹ In Figures:	₹ In Words:

7. [C] INVESTMENT DETAILS (For lumpsum Investment Amount only) Refer instruction A - 17 for Transaction Charges

Gross Amount (A)	DD Charges (if any) (B)	Net Amount (Cheque / DD Amount)
Rs. <input type="text"/>	<input type="text"/>	Rs. <input type="text"/> - <input type="text"/>
Mode of Payment		
A/c. No. <input type="text"/>	A/c. Type <input type="text"/>	Cheque / DD No. <input type="text"/>
Dated <input type="text"/>	Drawn on Bank <input type="text"/>	
Branch <input type="text"/>	City <input type="text"/>	

8. AUTO SWP FACILITY (Refer Inst. L) (Will be applicable after attaining 60 years). No Auto SWP Monthly SWP Quarterly SWP **Default: Quarterly SWP****9. NOMINATION DETAILS (To be filled in by Individual(s) applying singly or jointly)** Refer Instruction M (**MANDATORY**)

Please select any one of the follows:

 Please register nomination as requested below (please fill the nomination form below) I wish to nominate multiple nominees (please strike out the form below & fill separate form attached herewith) I do not wish to nominate.

I/We hereby nominate the person more particularly described hereunder to receive the Units allotted to me/us/credit in my/our folio in the event of my/our death. I/We understand that all payments and settlements made to such Nominee and Signature of the Nominee acknowledging receipt thereof, shall be a valid discharge of the AMC / Mutual Fund / Trustees.

Name

Address

Date of Birth Proof of DOB Birth Certificate School Leaving Certificate Passport Others

The Nominee is a minor whose guardian is:

Name & Address of Guardian:

Relationship of the Nominee with the Guardian Mother Father Legal GuardianProof of relationship: Birth Certificate School Leaving Certificate Passport Others

Sign of Nominee/ Guardian (in case of minor nominee)

10. TRANSACT ONLINE PLATFORM (APPLICABLE FOR KYC COMPLIANT INVESTORS ONLY) I wish to apply for PIN to transact online on www.tatamutualfund.com I have read and understood the terms and conditions mentioned on the website: www.tatamutualfund.com**11. DECLARATION AND SIGNATURES.** Refer Instruction - C**The Trustee, Tata Mutual Fund**

a) Having read & understood the contents of the Scheme Information Document of the Scheme, I/ We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I/ We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt of India from time to time. I/ We have understood the details of the scheme & I/ We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b) **For NRIs:** I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I / we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary. c) 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. d) I/ We confirm that details provided by me / us are true and correct. e) I/We have read & understood the SEBI Circular No. MRD/DoP/Cir-05/2007 dt. 27/04/2007 & SEBI Circular No. 35/MEM-COR/18/07-08 dt. 26/06/2007 regarding mandatory requirement of PAN. I/We confirm that I/we are holding valid PAN card. f) **For Micro SIP:** I/We hereby declare that I/We do not have any existing Micro SIP's which together with the current application will result in aggregate investments exceeding ₹ 50,000/- in a year

Date:

1st Unitholder Signature / Thumb Impression	2nd Unitholder Signature / Thumb Impression	3rd Unitholder Signature / Thumb Impression
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CHECKLIST**Toll Free: 1800-209-0101** (Open on all days). **Email:** kiran@tataamc.com, **Website:** www.tatamutualfund.com. Documents as listed below are submitted along with this application.

Document List	Document List	Document List
1. PAN <input type="checkbox"/>	3. Notarised Power of Attorney <input type="checkbox"/>	5. POA <input type="checkbox"/>
2. KYC <input type="checkbox"/>	4. MICROSIP document <input type="checkbox"/>	6. Others <input type="checkbox"/>



Expertise that's trusted

Application No. _____

ECS/SI/SIP AUTO DEBIT FACILITY - TATA RETIREMENT SAVINGS FUND

TO BE COMPLETED ALONGWITH THE MAIN APPLICATION FORM

REGISTRATION CUM MANDATE FORM FOR ECS (Debit Clearing / Standing Instruction / Direct Debit Facility in select banks only)

First SIP cheque and subsequent via Automatic Debit in select cities only. (Please attach copy of cheque / cancelled cheque) Micro SIP

Broker / Agent Code **ARN - 0155** Sub-Broker / Bank Branch Code **20104** M.O. Code _____

As per SEBI Circular, Cir/IMD/DF/13/2011 dated 22/08/2011, transaction charges (₹ 100/- or ₹ 150/-), as applicable would be deducted from the investment amount. (Refer Inst - A17 for further details)

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.

INVESTOR AND INVESTMENT DETAILS

Sole / First Investor Name _____
Folio/Application No. _____ PAN No. _____
Scheme **T A T A R E T I R E M E N T S A V I N G S F U N D**

SCHEME INVESTMENT DETAILS (Choose one plan and one option per plan; for default values refer instruction J and K)

Plan Name	Please tick the appropriate option (any one per plan)	
<input type="checkbox"/> Progressive Plan	<input type="checkbox"/> Auto Switch Option 1 (Progressive to Moderate @ age 45; Moderate to Conservative @age 60), <input type="checkbox"/> Auto Switch Option 2 (Progressive to Conservative @ age 60) <input type="checkbox"/> No Auto Switch	
<input type="checkbox"/> Moderate Plan	<input type="checkbox"/> Auto Switch Option 3 (Moderate to Conservative @ age 60)	<input type="checkbox"/> No Auto Switch
<input type="checkbox"/> Conservative Plan	-----	

SIP AND BANK DETAILS (Refer Instruction A 17 for Transaction Charges)

Each SIP Installment Amount (₹) _____ Frequency Monthly (Default) Quarterly

Amount in words _____

First SIP Cheque Details: Cheque No.: _____ Cheque Amount in ₹ _____

Cheque Date : ___/___/___ SIP Dates: Please mention the date _____ in words _____ day of the month. e.g. for SIP on 10th please mention 1 0 Tenth day of the month [please refer instruction 12 for any day SIP] default 10th Tenth

SIP Period: Start From M M / Y Y Y Y SIP End Date M M / Y Y Y Y Default End Date 1 2 / 2 0 9 9

For NFO start date will be from Dec - 2011. (please refer instruction 10 on reverse)

(Note: Cheque should be drawn from bank account provided below. I hereby, authorise Tata Mutual Fund (TMF) and their authorised service providers, to debit my/our following bank account by ECS (Debit Clearing) / direct debit / standing instruction to account for collection of SIP payments.

PARTICULARS OF BANK ACCOUNT

A/c holder Name _____
Core banking A/c No. (in figures) _____
Bank Name _____ City _____
Branch Name _____

Account Type Savings Current NRO NRRR NRE 9 Digit MICR Code (Mandatory for ECS) _____

I/We hereby declare that the particulars given above are correct & complete & express my willingness to make payments referred above through participation in ECS/Direct Debit/ Standing Instruction. I/We will also inform TAML, about any changes in my bank account. I/We have read & agreed to the terms & conditions mentioned overleaf.

This is to inform I/We have registered for RBI's Electronic Clearing Service (Debit Clearing)/ Direct Debit/Standing Instruction Facility & that my payment towards my investment in Tata Mutual Fund shall be made from my/our below mentioned bank account with your bank. I/We authorize the representative carrying this ECS/Direct Debit/Standing Instruction mandate Form to get it verified & executed.

I/We acknowledge that no separate intimation will be received from the Bank in case of non-execution of the instructions for any reasons whatsoever.

To - The Trustee, Tata Mutual Fund, Mumbai. Having read & understood the contents of SAI/SID/KIM of Tata Mutual Fund Scheme/s, I/We hereby apply for the respective Units of Tata Mutual Fund Scheme/s at NAV based resale price & agree to abide by terms, conditions, rules & regulations of scheme/s. For Micro SIP: I/We hereby declare that I/We do not have any existing Micro SIP's which together with the current application will result in aggregate investments exceeding ₹ 50,000/- in a year.

SIGNATURE/S AS PER TATA MUTUAL FUND RECORDS (MANDATORY)	Sole / 1st Account Holder's Signature			2nd Account Holder's Signature			3rd Account Holder's Signature		

DECLARATION TO THE BANKER

To - Branch Manager, Bank, I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Tata Mutual Fund or the above mentioned Bank responsible. If the date of debit to my/our account happens to be a non business day as per the Mutual Fund, execution of the SIP will happen on the day of holiday & allotment of units will happen as per the Terms & Conditions listed in the KIM/SID/SAI of the Mutual Fund. The above mentioned Bank shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligations under this Agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riot, strike, mutiny, revolution, fire, flood, fog, war, lightning, earthquake, change of Government policies, Unavailability of above mentioned Bank's computer system, force majeure events, or any other cause of peril which is beyond Bank's reasonable control & which has the effect of preventing the performance of the contract by Bank. I/We have noted the contents of the Direct Debit Facility Agreement/ Standing Instruction entered by Tata Mutual Fund with the Bank & I/we are also bound by the terms thereof.

SIGNATURE/S AS PER BANK ACCOUNT (MANDATORY)	Sole / 1st Account Holder's Signature (as in bank records)			2nd Account Holder's Signature (as in bank records)			3rd Account Holder's Signature (as in bank records)		

(To be signed as per the mode of operations, i.e. all holders to sign if the mode of operations is Joint)

BANKER'S ATTESTATION (FOR BANK USE ONLY)

Certified that the signature of A/c holder and the details mentioned in 'Particulars of Bank A/c' above and its MICR code are correct as per our records

Signature of Bank Manager with name, Employee code, Bank Seal and Contact Number _____ Bank Account Number _____

FOR OFFICE USE ONLY (NOT TO BE FILLED IN BY INVESTOR)

Recorded on _____ Scheme Code _____
Recorded by _____ Credit A/c Number _____
Bank use Mandate Ref. No. _____ Customer Ref. No. _____