Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

ICATION FORM FOR TAX STATUS CHANGE

For existing unitholders holding units in physical mode. The relevant section to be filled-in are indicated in the title of respective section. Please fill in the information below in English and in Block Letters.



Date | D | D | M | M | Y | Y | Y | Y |

Important: Please strike out the Section(s) that is/are not used by you to avoid any unauthorised use

1. UNITHOLDER'S INFORMATION (Mandatory)	
Folio No.	PAN
Sole/1st Applicant	
2. CHANGE IN TAX STATUS ■ RI to NRO ■ NRI to RI	
For existing SIP please attach the following: OTM Modification Form USA/0	Canada Declaration (only applicable to NRI from USA and Canada)
3. NEW BANK MANDATE/MODE OF PAYMENT SB to NRO NRO NRO SB	■ NRE to SB
Not required if the bank accounts details are same	
OLD BANK DETAILS	
Bank Name	
Core bank account number	
Account Type Savings Current NRE NRO FCNR Other	
Bank Address	
City	PIN Code PIN Code
IFSC Code (11 digit) MICR Code	(9 digit)
NEW BANK DETAILS	
Bank Name	
Core bank account number	
Core Bank account number	
Account Type Savings Current NRE NRO FCNR Other	
Bank Address	
City	PIN Code PIN Code
IFSC Code (11 digit) MICR Code	(9 digit)
Documents to be submitted by investor	
Existing bank details (Any one of the following)	New bank details (Any one of the following)
A cancelled original cheque leaf/Self attested copy of cancelled cheque*	A cancelled original cheque leaf/Self attested copy of cancelled cheque*
Photocopy of bank passbook or bank account statement (Having entries not older than 3 months)	Photocopy of bank passbook or bank account statement (Having entries not older than 3 months)
Letter from the bank	Letter from the bank
*Account number and name of the first unit holder should be printed on the f	ace of the cheque
*Account number and name of the first unit holder should be printed on the f	
4. NEW CONTACT DETAILS	8-01
Mobile No. Email ID	estor being (Please (✓) any one option from below)
Email address Mobile No. specified above belongs to self or family, due to investigate the self-or family and the	estor being (Please (✓) any one option from below)
The Email ID belongs to (Mandatory Please ✓)	ependent Siblings Dependent Parents Guardian PMS Custodian POA
The Mobile No.	pendent siblings Dependent Facility Oddraidin 1770 Oddraidin 1700
	ependent Siblings 🗌 Dependent Parents 🗎 Guardian 🔲 PMS 🔲 Custodian 🔲 POA
	>
ACKNOWLEDGEMENT SLIP FOR SLIP FOR Change of Tax Status Form instead of ACKNOW BAJAJ FINSERV ASSET MANAGEMENT LIMITED. 8th floor, E-Core, Solitaire Business Par	
Received from Mr. / Ms	Collection Centre /
Application No.	Bajaj Arrio Stanip a Signature
	MDFD, 4000 700 7000
[For any queries please contact our nearest Investor Service Centre or call us at our TOLL FREE NU	וווספר: וסטט אין

EMAIL: service@bajajamc.com | WEBSITE: https://www.bajajamc.com

TOLL FREE NUMBER: 1800 309 3900 | EMAIL: service@bajajamc.com | WEBSITE: https://www.bajajamc.com

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TOLL FREE NUMBER: 1	

5a. MAILING ADDRESS (A	Address as per KYC)							
Local Address of 1st Applic	ant							
				City				
State	Pin Cod	е	Tel. Resi.			Tel. Off.		
5b. OVERSEAS CORRESPO	ONDENCE ADDRESS (Mandat	ory for NRI / FII App	licant)					
[Please provide Full Addre	ess. P. O. Box address is not s	ufficient]						
[Tease provide Fair Addre	.33. 1 . 0. DOX dudie33 i3 not 3							
Zip Code:	Tel. Resi.	1						
	Tel. Resi.		Tel. Off. Mobile No.					
6. FATCA & CRS DETAILS				1				
Place of Birth			Country of B					
Are you a tax resident (i.e in any other country outs	are you assessed for Tax) ide India?	Yes No [Ple	ase tick (✓) any If "NO"	proceed for the s	signature	e of declaration		
If "YES" please fill for ALL Resident in the respectiv	countries (other than India) e countries	n which you are a F	Resident for tax purpose	.e. where you are	e a Citize	n Resident/ Green Car	d Holder/ Tax	
Country of Tax Residency Tax Identification Number or Function		unction Equivalent	alent Identification Type (TIN or other please spe			pecify) If TIN is not available please tick the reason		
						_ A _	в 🗌 С	
Reason A The country	where the Account Holder is	liable to pay tax do	es not issue Tax Identific	ation Numbers to	its resid	lents.		
Reason B No TIN requir	ed (Select this reason Only if	the authorities of t	he respective country of	tax residence do	not req	uire the TIN to be colle	cted)	
Reason C Others, pleas	e state the reason thereof: _							
7. KYC DETAILS								
Occupation Private House		_	Government Service Forex Dealer	Business	ofessiona ecify)	al	Retired	
Gross Annual Income	Below 1 Lac 1-5	Lacs 🗌 5	5-10 Lacs	25 Lacs	□ 25	Lacs-1 crore	☐ >1 crore	
Others	Politically Exposed Person (PE	EP) 🗌 I am rela	ted to Politically Exposed	Person (PEP)	☐ Not A	applicable		
8. DECLARATION AND SIG	NATURES							
Scheme(s) and agree to al here by agree to abide by Central Board of Direct Ta trail commission or any ot recommended to me/us. I/We hereby confirm that I I/We hereby declare and of In case of non submission	stood the contents of the Sciole by the terms, conditions, the provisions under Foreign axes notified Rules 114 F to 114 ner mode), payable to him for /we have not been offered/confirm that the information p of any of the documents or istment fund shall not be liable.	rules and regulation Account Tax Compli H,as part of the Inci the different compe ommunicated any i rovided in this form f the documents are	is of the Scheme(s) as on ance Act (FATCA) and Coi ome-tax Rules,1962. The tring Schemes of various. indicative portfolio and/or is true and correct and is e not found to be in order	the date of this t mmon Reporting ! ARN holder has di Alternative Invest any indicative yis duly supported I , the AMC reserve	ransactions of the control of the co	on. I/We have further re is (CRS) under FATCA & to me/us all the commi nd from amongst which is investment. scument proof enclosed ht to not register the a	ead, understood and CRS provision of the ssions (in the form of the Scheme is being d alongwith the form.	
Signature(s) should be as	s it appears in the Folio / on th	e Application Form a	nd in the same order. In ca	ase the mode of h	olding is	joint, all Unit holders are	e required to sign.	
Fireh/Colo Haithan 1	Quanties / DOA Haldan		Cananal Haik to Liter			TELEVISION		
First/ Sole Unit holder/	Guardian/ PUA Holder		Second Unit holder			Third Unit holde		
INSTRUCTIONS								
Change of Tax Status ca	n only be for RI To NRO & NR	l To Ri						
1. Change of Bank Det. IT IS MANDATORY TO 1) Cancelled original 2) Self attested copy 3) Bank passbook wi 4) Bank letter, on the account type, bar	ails: Documents Required (a) SUBMIT ANY ONE DOCUMEI Cheque of the new bank mar of bank account account st th current entries not older the letterhead of the bank duly ak branch, MICR and IFSC core clearly mentioned on the face	ny one): NT OF OLD AND NEW Indate with first unit atement issued by han 3 months. Signed by branch m de of the bank brank	holder name and bank a the concerned bank. (not nanager/authorised perso	ccount number p colder than 3 mo	orinted or nths) investor		er, name of investor,	
	copies of the documents as s	tated above are sub	mitted, investor must pro	duce original for	verificati	ion, or a copy of the sup	porting documents	

- duly attested by the concerned bank to any of the AMC branches or official point of acceptance of transactions.

 (b) The name printed on the cancelled cheque/bank passbook/bank account statement/bank's letterhead should be same as per the folio.
- (ii) In absence of old bank account proof, investor must submit a Declaration for Old bank proof without existing bank account proof form on a Rs.500 Stamp Paper.
- (iii) The AMC reserves the right to accept the request, subject to additional verifications, production of additional documents or In Person Verification of unit holder.

2. RI-NRI

- (i) Only NRO bank account detail is allowed.
- (ii) Attested copy of VISA / Green card / Driving licence of country /overseas passport as proof of the change
- 3. In case there is any changes in your KYC information, please update the same by using the prescribed 'KYC Change Request Form' available on our website www.bajajamc.com under download section and submit the same at the point of service of any KYC Registration Agency.
- 4. Alterations in the form, if any should be countersigned.