

Application No.:

Name and AMFI Reg. No. (ARN)	Sub Agent's Name and ARN	NFO Branch	NFO Serial No.	Registrar's No.
ARN-29644				

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.

1. FIRST APPLICANT'S DETAILS

Name of First Applicant (First / Middle / Surname) Title Mr. Ms. M/s

Existing Folio No (If you have an existing folio number with PAN and KYC validation, please mention the number here and skip to section 5. Mode of holding will be as per existing folio number)

Date of Birth (Mandatory for minor) / / Gender Male Female

Email ID (in capital) [Refer instruction 4.]

PAN (1st applicant / guardian) Enclosed (Please tick Attested PAN card copy KYC Acknowledgement (Mandatory for all subscriptions of Rs. 50,000/- or more)

Name of Guardian if minor / Contact Person for non-individuals / PoA Holder name: PoA PAN*

Address for Correspondence (P.O. Box address is not sufficient) *PoA holder should be KYC compliant and also attach KYC Acknowledgement

City Pin Code (Mandatory) State
STD Code Telephone Fax
Mobile +91

Overseas Address (mandatory for NRI / FII applicants in addition to mailing address in India) (P. O. Box address is not sufficient)

City State Pin Code (Mandatory)
Country

Status of Sole/1st Applicant (Please tick Individual On Behalf Of Minor HUF Sole Proprietorship NRI (Repatriable) NRI (Non-Repatriable) Partnership Firm Company AOP/BOI Body Corporate Trust Society FII FOF - MF schemes Provident Fund Superannuation / Pension Fund Gratuity Fund Bank / FI Government Body Insurance Companies Others _____ (Please specify)

Occupation (Please tick Service Professional Business Housewife Retired Student Other _____

2. JOINT APPLICANTS' DETAILS

Name of Second Applicant (First / Middle / Surname) Title Mr. Ms. M/s

PAN (2nd applicant) Enclosed (Please tick Attested PAN card copy KYC Acknowledgement (Mandatory for all subscriptions of Rs. 50,000/- or more)

Name of Third Applicant (First / Middle / Surname) Title Mr. Ms. M/s

PAN (3rd applicant) Enclosed (Please tick Attested PAN card copy

Mode of Holding (Please tick Single Anyone or survivor Joint (Default) KYC Acknowledgement (Mandatory for all subscriptions of Rs. 50,000/- or more)

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

DSP BLACKROCK MUTUAL FUND

Received, subject to realisation, verification and conditions, an application for purchase of Units as mentioned in the application form.

From _____

vide cheque number _____ in DSP BlackRock Focus 25 Fund

Checklist All Investments Bank Mandate Attested PAN Card copy KYC Compliance

Application No.

3. BANK ACCOUNT DETAILS (Refer Instruction 3) (Mandatory)

Bank Name

Bank A/c No. A/c Type Savings Current NRE NRO FCNR OTHERS

Branch Address

City Pin

9 Digit MICR code IFSC code: (11 digit)

4. OTHER FACILITIES (Please ✓)

I would like to receive a PIN (for telephone & internet transactions, as and when started)

5. INVESTMENT DETAILS (Please ✓)

DSP BLACKROCK FOCUS 25 FUND

Option Growth Option (Default) Dividend Payout Dividend Reinvest *who transact through the stock exchange in dematerialized mode. *Reinvest Dividend sub-option shall not be available to investors

6. PAYMENT DETAILS (A/c Payee cheque favouring "DSP BlackRock Focus 25 Fund")

One time Lump sum Investment: **Please fill the details hereunder. Do not submit SIP Auto Debit Form.**

LUMPSUM

Cheque / DD No. Cheque/DD Date

Amount of Cheque/DD (Rs.) (i) Drawn on Bank/ Branch Name

DD charges, if any, (Rs.) (ii)

Total Amount (i) + (ii) Account Type (Please ✓) Savings Current NRE NRO FCNR

I wish to invest through:

SIP: Systematic Investment Plan. **Please fill up SIP Auto Debit form and DO NOT detach SIP form from NFO application form.**

SIP

First SIP Cheque Details: (Mention Amount in SIP Auto Debit Form)

Cheque / DD No. Cheque/DD Date

Drawn on Bank & Branch

7. NOMINATION DETAILS (Refer Instruction 6)

	Nominee	Name of Guardian (In case of Minor)	% of Investment Allocation
Nominee 1	<input type="text"/>	<input type="text"/>	
Address	<input type="text"/>		
Nominee 2	<input type="text"/>	<input type="text"/>	
Address	<input type="text"/>		
Nominee 3	<input type="text"/>	<input type="text"/>	
Address	<input type="text"/>		Total = 100%

8. DECLARATION & SIGNATURES

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum and Instructions; I / We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I / We hereby nominate the above nominee to receive all the amounts to my/our credits in the event of my/our death and have read the instructions for nomination. Signature of the nominee acknowledging receipts of my/our credit will constitute full discharge of liabilities of DSP BlackRock Mutual Fund. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. 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.

Applicable to NRIs only

I/We confirm that I am/We are Non-Resident(s) of Indian Nationality / Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my / our Non-Resident External / Ordinary Account/FCNR Account(s).

If NRI Repatriation basis Non-Repatriation basis

SIGNATURE (S)

Sole / First Applicant/ Guardian

Second Applicant

Third Applicant

Email: service@dspblackrock.com
Website: www.dspblackrock.com

Contact Centre: 1800 200 4499

Checklist All Investments Bank Mandate is provided
 PAN Card copy (Attested with a seal by a Distributor, Bank Manager, Notary)
 KYC Acknowledgement