FRANKLIN TEMPLETON

FAMILY SOLUTIONS
INVESTMENT PLANS FOR LIFE GOALS

FORM FOR NEW INVESTORS
(Please use separate Transactions Form for each Scheme / Plan and Transaction)

Advisor ARN / RIA Code/ Portfolio Manager's Registration No.	Sub-broker/Branch Code	Sub-broker ARN	Representative EUIN	For office use only
ARN-16709			E039709	

The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder. **Applicable only if ARN is mentioned but EUIN box is left blank:** "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker." **Applicable only if RIA Code/ Portfolio Manager's Registration Number is mentioned:** "I / We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes managed by you, to the SEBI-Registered Investment Adviser/ SEBI Registered Portfolio Manager whose code is mentioned herein."

TRANSACTION CHARGES (Refer instructions and tick the appropriate option) Applicable for transactions routed through distributors/agents/brokers who have opted to receive transaction charges.

☐ I am a first time investor in mutual funds (Rs.150 will be deducted). ☐ I am an existing mutual funds investor (Rs.100 will be deducted).

DECLARATION

Date _____ Place _____

Having read and understood the contents of the Statement of Additional Information (SAI) of Franklin Templeton Mutual Fund (FTMF), respective Scheme Information Document (SID), Key Information Memorandum (KIM), the Addenda issued therein till date (together referred as Scheme Documents) and after evaluating and acknowledging the risk factors, I / we hereby apply to the Franklin Templeton Trustee Services Pvt. Ltd., Trustees to the schemes of FTMF for units of scheme(s) of FTMF as indicated above, and agree to abide by all applicable laws and the terms and conditions mentioned in the Scheme Documents. Notwithstanding the generality of the aforesaid undertaking, I/We hereby confirm that (i) I /we am/are not a 'US Person' and are not applying for Units on behalf of any 'US Person' (ii) the money used for investment is my/our own and from legitimate sources (iii) the tax residency status (FATCA/CRS) and UBO details mentioned above are true and correct and (iv) the ARN holder has disclosed the details of commissions (in the form of trail commission or any other mode), offered by competing schemes of various mutual funds falling in the category of scheme(s) being recommended to me/us and I / we have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment and are not in contravention or evasion of any applicable laws. I/ We further agree to hold FTMF, Franklin Resources Inc. its subsidiary and associate entities including their employees, directors and key managerial persons (collectively referred as Franklin Templeton) harmless against any losses, costs, damages arising out of any actions undertaken or activities performed by them in accordance with the Scheme Documents and for any consequences in case of any of the above particulars being false, incorrect or incomplete or for the activities performed by them in good faith or on the basis of information provided by me/us as also due to my/ our not intimating / delay in intimating such changes. I/We hereby authorise Franklin Templeton to use, disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us, to any of its agents, service providers, representatives or distributors or any other parties located in India or outside India or any Indian or foreign governmental, statutory, regulatory, administrative or judicial authorities / agencies without any obligation of advising / informing me/us of the same. I/ We hereby agree to keep the information provided to Franklin Templeton updated and to provide any additional information / documentation that may be required by Franklin Templeton, in connection with this application. I/We confirm that I/we have provided my/our Aadhaar details for KYC purpose absolutely at our volition.

SIGNATURES

_____	_____	_____
Sole / First Unit Holder	Second Unit Holder	Third Unit Holder

☞ MY DETAILS (To be filled in Block Letters. Please provide the following details in full; Please refer instructions)

My Name (Should match with Pan Card) **PAN/PEKRN** (1st Applicant) ☐ KYC

My Guardian's Name (if minor)/POA/Contact Person **PAN/PEKRN** (Guardian/POA) ☐ KYC

On behalf of Minor
(* Attach Mandatory Documents as per instructions).
Date of Birth Minor's D D / M M / Y Y
Date of Birth Proof attached * ☐ **Guardian named is :** ☐ Father ☐ Mother ☐ Court Appointed

☞ JOINT APPLICANTS (IF ANY) DETAILS

Mode of Operation : ☐ Single ☐ Joint ☐ Either or Survivor(s) [Default]

2nd Applicant Name (Should match with Pan Card) **PAN/PEKRN** (2nd Applicant) ☐ KYC

3rd Applicant Name (Should match with Pan Card) **PAN/PEKRN** (3rd Applicant) ☐ KYC

☞ INVESTMENT DETAILS#: I/We would like to invest in the following schemes to meet my/our life goals (Please read Product labeling details available on cover page of KIM)

GOAL		Goal 1	Goal 2	Goal 3
Additional Details				
Scheme Name / Plan	**Options**	**Amount in ₹** (SIP: per Installment)		
☐ Lumpsum ☐ SIP Plan: ☐ Regular ☐ Direct	☐ Growth			
☐ Lumpsum ☐ SIP Plan: ☐ Regular ☐ Direct	☐ Growth			
☐ Lumpsum ☐ SIP Plan: ☐ Regular ☐ Direct	☐ Growth			
Total Investment Per Goal				
Total Investment Per Goals		(in figures)		

IF YOU OPT TO START TWO SIPs, THE BELOW MENTIONED DETAILS WILL BE APPLICABLE FOR BOTH THE SIPs. → **My Additional SIP Details**

SIP Date: D D (If left blank 10th will be considered as the default date. All SIPs will be processed on the same date selected above) | **Investment Frequency** ☐ Monthly(default) ☐ Quarterly

SIP Period Start Date m m / y y y y End Date ☐ Continue Until Cancelled OR ☐ m m / y y y y **First SIP Cheque Date:** _____

Step-up my SIP annually by: ☐ Increase in %: _____ (in multiples of 5%) (Amount invested will be rounded off to the nearest Rs. 100)

or ☐ Increase in Rupee Value: _____

Amount Invested _____ (DD Charges) _____ **Net Amount** _____

Payment Details Cheque/DD No. _____ Bank _____

Branch _____ Bank A/C No. _____

Please register my pay-in bank details also as one of the banks in my/our account/folio based on the payment instrument attached. Please refer the instruction for supporting document required for registering Bank Mandate. (Please tick if applicable) ☐ I / We do not wish to register this bank as additional bank in my/our account details.

☞ ACKNOWLEDGEMENT SLIP

Sl. No.

Received from _____ Pin _____

Payment Details		
Amount _____ Cheque/DD No. _____	Date _____	Bank and Branch details _____

👉 MY CONTACT DETAILS (As per KYC records. To be filled in Block Letters)

Email ID (in capital)

Mobile +91   **Tel** (STD Code)

Address

Landmark

City   **Pin Code** (Mandatory)   **State**

Address Type (Mandatory)
- ☐ a. Residential & Business
- ☐ b. Residential
- ☐ c. Business
- ☐ d. Registered Office

I wish to receive Scheme Annual Report and Abridged Summary : ☐ **Online (Preferred & Default)** ☐ Physical Copy (Choose **online mode** to help us **save paper** and contribute towards a greener and cleaner environment.)

I declare that Email address and Mobile Number provided in this form belongs to (tick one option) ☐ Self (or) ☐ Family Member, and approve for usage of these contact details for any communication with FTMF.

👉 BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)

My Bank Name

Bank A/C No.   **A/C Type** ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others_____

Branch Address

City   Pin

IFSC code: (11 digit)   **MICR code (9 digit)**   (This is a 9 digit number next to your cheque number)

👉 ADDITIONAL INFORMATION

Applicant	KIN No. (If KYC done via CKYC)	Date of Birth#	Gender
1st		D D / M M / Y Y	☐ M ☐ F
2nd		D D / M M / Y Y	☐ M ☐ F
3rd		D D / M M / Y Y	☐ M ☐ F
G or POA^		D D / M M / Y Y	☐ M ☐ F

#Date of Birth - Mandatory if CKYC ID mentioned. ^G: Guardian; ^POA: Power Of Attorney

Details	2nd Applicant	3rd Applicant	G or POA
Mobile No.			
Email Id.			

👉 NOMINATION DETAILS (In case of more than one nominee, please submit a separate nomination form available with any of our ISCs or on our website). Refer instructions.

Nominee Name and Address	For Minor Nominee (Mandatory to attach DOB Proof)		Allocation	Nominee/ Guardian Signature
	DOB	Guardian Name & Address		
			100 %	X

OR ☐ I/We DO NOT wish to nominate and sign here (To be signed by all the joint holders irrespective of the mode of holdings.)_____

👉 DEPOSITORY ACCOUNT DETAILS (Optional. To be filled if investor wishes to hold the units in Demat mode). Refer instructions.

☐ NSDL: DP Name   DP ID I N   Beneficiary Ac No.

☐ CDSL: DP Name   Beneficiary Ac No.

Please ensure that the sequence of names as mentioned in this Application Form matches with the sequence of names in the Demat account. Enclosed (Mandatory) ☐ Client Master List OR ☐ DP statement

👉 KNOW YOUR CUSTOMER (KYC) DETAILS (Mandatory. Please Tick/ Specify. The application is liable to get rejected if details not filled.)

Status details for	1st Applicant	2nd Applicant	3rd Applicant	Guardian
Resident Individual	☐	☐	☐	☐
NRI/PIO/OCI	☐	☐	☐	☐
Sole Proprietorship	☐	-	-	-
Minor through Guardian	☐	-	-	-
Non Individual	☐ Company/Body ☐ Corporate ☐ Partnership ☐ Trust ☐ Society ☐ HUF ☐ Bank ☐ AOP ☐ FI/FII/FPI			
Others (Please specify)				

Gross Annual Income Range (in Rs.)

	1st	2nd	3rd	Guardian
Below 1 lac	☐	☐	☐	☐
1-5 lac	☐	☐	☐	☐
5-10 lac	☐	☐	☐	☐
10-25 lac	☐	☐	☐	☐
25 lac- 1 cr	☐	☐	☐	☐
1 -5 cr	☐	☐	☐	☐
5 - 10 cr	☐	☐	☐	☐
> 10 cr	☐	☐	☐	☐
OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year)	as on D D M M Y Y	as on D D M M Y Y	as on D D M M Y Y	as on D D M M Y Y

Occupation details for	1st Applicant	2nd Applicant	3rd Applicant	Guardian
Private Sector	☐	☐	☐	☐
Public Sector	☐	☐	☐	☐
Government Service	☐	☐	☐	☐
Business	☐	☐	☐	☐
Professional	☐	☐	☐	☐
Agriculturist	☐	☐	☐	☐
Retired	☐	☐	☐	☐
Housewife	☐	☐	☐	☐
Student	☐	☐	☐	☐
Others (Please specify)				

Politically Exposed Person (PEP) details:	Is a PEP	Related to PEP	Not Applicable
1st Applicant	☐	☐	☐
2nd Applicant	☐	☐	☐
3rd Applicant	☐	☐	☐
Guardian	☐	☐	☐
Authorised Signatories	☐	☐	☐
Promoters	☐	☐	☐
Partners	☐	☐	☐
Karta	☐	☐	☐
Whole-time Directors/Turstee	☐	☐	☐

👉 FATCA/CRS/UBO DETAILS: For Individuals (Mandatory). Non Individual investors including HUF should mandatorily fill separate FATCA/CRS/UBO details form

Details	Sole/ 1st Applicant	2nd Applicant	3rd Applicant	Guardian/POA
Place & Country of Birth				
Nationality				
Are you a tax resident of any country other than India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
		If Yes: Mandatory to enclose FATCA /CRS Annexure		

☎ 1800 425 4255 or 1800 258 4255 (from 8 am to 9 pm, Monday to Saturday)   ✉ service@franklintempleton.com   🖱 www. franklintempletonindia.com

Instruction 👉 **1.** For SIP investments with: (i)Current date - Please provide Single Cheque (for the first installment) with SIP ECS form. (ii) Future date - Please fill the SIP (ECS/Direct Debit) form along with the Application form. Note: SIP will start after 30 days **2.** In case you are investing via both Regular and SIP simultaneously (where the SIP will start after 30 days), please provide a single cheque for the Regular amount, along with the completed SIP (ECS/Direct Debit) Mandate form. **3.** Cheque for the investment should be made in favour of "Franklin Templeton Family Solutions" **4.** For payments by demand draft please attach a certificate from the banker or Challan (instruction to bank) or passbook/bank statement evidencing the debit for issuance.

CHECK LIST: Please ensure the following
☞. Application from is complete in all respects and signed by all Applicants.
☞. Enclosures:
☐ Supporting documents for bank account details furnished in the Form.
☐ For payment by Demand Draft - a certificate from banker in the prescribed format confirming the account from which the funds have been remitted.
☐ Proof of KYC for all application, guardians for minors and POA

☞ **Enclosures** (if applicable)
☐ Proof of relationship with minor
☐ Proof of identity & address
☐ Proof of DOB
☐ Multiple bank registration form
☐ Multiple nomination form

FRANKLIN TEMPLETON

FAMILY SOLUTIONS
INVESTMENT PLANS FOR LIFE GOALS

FORM FOR NEW INVESTORS
(Please use separate Transactions Form for each Scheme / Plan and Transaction)

Advisor ARN / RIA Code/ Portfolio Manager's Registration No.	Sub-broker/Branch Code	Sub-broker ARN	Representative EUIN	For office use only
ARN-16709				

The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder. **Applicable only if ARN is mentioned but EUIN box is left blank:** "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker." **Applicable only if RIA Code/ Portfolio Manager's Registration Number is mentioned:** "I / We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes managed by you, to the SEBI-Registered Investment Adviser/ SEBI Registered Portfolio Manager whose code is mentioned herein."

TRANSACTION CHARGES (Refer instructions and tick the appropriate option) Applicable for transactions routed through distributors/agents/brokers who have opted to receive transaction charges.

☐ I am a first time investor in mutual funds (Rs.150 will be deducted). ☐ I am an existing mutual funds investor (Rs.100 will be deducted).

DECLARATION
Date _____ Place _____

Having read and understood the contents of the Statement of Additional Information (SAI) of Franklin Templeton Mutual Fund (FTMF), respective Scheme Information Document (SID), Key Information Memorandum (KIM), the Addenda issued therein till date (together referred as Scheme Documents) and after evaluating and acknowledging the risk factors, I / we hereby apply to the Franklin Templeton Trustee Services Pvt. Ltd., Trustees to the schemes of FTMF for units of scheme(s) of FTMF as indicated above, and agree to abide by all applicable laws and the terms and conditions mentioned in the Scheme Documents. Notwithstanding the generality of the aforesaid undertaking, I/We hereby confirm that (i) I /we am/are not a 'US Person' and are not applying for Units on behalf of any 'US Person' (ii) the money used for investment is my/our own and from legitimate sources (iii) the tax residency status (FATCA/CRS) and UBO details mentioned above are true and correct and (iv) the ARN holder has disclosed the details of commissions (in the form of trail commission or any other mode), offered by competing schemes of various mutual funds falling in the category of scheme(s) being recommended to me/us and I / we have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment and are not in contravention or evasion of any applicable laws. I/ We further agree to hold FTMF, Franklin Resources Inc. its subsidiary and associate entities including their employees, directors and key managerial persons (collectively referred as Franklin Templeton) harmless against any losses, costs, damages arising out of any actions undertaken or activities performed by them in accordance with the Scheme Documents and for any consequences in case of any of the above particulars being false, incorrect or incomplete or for the activities performed by them in good faith or on the basis of information provided by me/us as also due to my/ our not intimating / delay in intimating such changes. I/We hereby authorise Franklin Templeton to use, disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us, to any of its agents, service providers, representatives or distributors or any other parties located in India or outside India or any Indian or foreign governmental, statutory, regulatory, administrative or judicial authorities / agencies without any obligation of advising / informing me/us of the same. I/ We hereby agree to keep the information provided to Franklin Templeton updated and to provide any additional information / documentation that may be required by Franklin Templeton, in connection with this application. I/We confirm that I/we have provided my/our Aadhaar details for KYC purpose absolutely at our volition.

SIGNATURES

✓		
Sole / First Unit Holder	Second Unit Holder	Third Unit Holder

☞ MY DETAILS (To be filled in Block Letters. Please provide the following details in full; Please refer instructions)

My Name (Should match with Pan Card) | **PAN/PEKRN** (1st Applicant) ☐ KYC

My Guardian's Name (if minor)/POA/Contact Person | **PAN/PEKRN** (Guardian/POA) ☐ KYC

On behalf of Minor
(* Attach Mandatory Documents as per instructions).

Date of Birth Minor's D D / M M / Y Y

Date of Birth Proof attached * ☐   **Guardian named is:** ☐ Father ☐ Mother ☐ Court Appointed

☞ JOINT APPLICANTS (IF ANY) DETAILS

Mode of Operation : ☐ Single ☐ Joint ☐ Either or Survivor(s) [Default]

2nd Applicant Name (Should match with Pan Card) | **PAN/PEKRN** (2nd Applicant) ☐ KYC

3rd Applicant Name (Should match with Pan Card) | **PAN/PEKRN** (3rd Applicant) ☐ KYC

☞ INVESTMENT DETAILS#: I/We would like to invest in the following schemes to meet my/our life goals (Please read Product labeling details available on cover page of KIM)

GOAL		Goal 1	Goal 2	Goal 3
Additional Details				
Scheme Name / Plan	**Options**	**Amount in ₹** (SIP: per Installment)		
☐ Lumpsum ☐ SIP Plan: ☐ Regular ☐ Direct ☐ Growth				
☐ Lumpsum ☐ SIP Plan: ☐ Regular ☐ Direct ☐ Growth				
☐ Lumpsum ☐ SIP Plan: ☐ Regular ☐ Direct ☐ Growth				
Total Investment Per Goal				
Total Investment Per Goals		(in figures)		

IF YOU OPT TO START TWO SIPs, THE BELOW MENTIONED DETAILS WILL BE APPLICABLE FOR BOTH THE SIPs. ➜ **My Additional SIP Details**

SIP Date: D D (If left blank 10th will be considered as the default date. All SIPs will be processed on the same date selected above) | **Investment Frequency** ☐ Monthly(default) ☐ Quarterly

SIP Period Start Date m m / y y y y   End Date ☐ Continue Until Cancelled OR ☐ m m / y y y y **First SIP Cheque Date:**

Step-up my SIP annually by: ☐ Increase in %: _____ (in multiples of 5%) (Amount invested will be rounded off to the nearest Rs. 100)

or ☐ Increase in Rupee Value: _____

Amount Invested _____ (DD Charges) _____ **Net Amount** _____

Payment Details Cheque/DD No. _____ Bank _____

Branch _____ Bank A/C No. _____

Please register my pay-in bank details also as one of the banks in my/our account/folio based on the payment instrument attached. Please refer the instruction for supporting document required for registering Bank Mandate. (Please tick if applicable) ☐ I / We do not wish to register this bank as additional bank in my/our account details.

☞ ACKNOWLEDGEMENT SLIP
Sl. No.

Received from _____ Pin _____

Payment Details			
Amount _____	Cheque/DD No. _____	Date _____	Bank and Branch details _____

☞ MY CONTACT DETAILS (As per KYC records. To be filled in Block Letters)

Email ID (in capital)

Mobile +91   **Tel** (STD Code)

Address

Landmark

City   **Pin Code** (Mandatory)   **State**

Address Type (Mandatory)
- ☐ a. Residential & Business
- ☐ b. Residential
- ☐ c. Business
- ☐ d. Registered Office

I wish to receive Scheme Annual Report and Abridged Summary : ☐ **Online (Preferred & Default)** ☐ Physical Copy (Choose **online mode** to help us **save paper** and contribute towards a greener and cleaner environment.)

I declare that Email address and Mobile Number provided in this form belongs to (tick one option) ☐ Self (or) ☐ Family Member, and approve for usage of these contact details for any communication with FTMF.

☞ BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)

My Bank Name

Bank A/C No.   **A/C Type** ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others ____

Branch Address

   City   **Pin**

IFSC code: (11 digit)   **MICR code (9 digit)**   (This is a 9 digit number next to your cheque number)

☞ ADDITIONAL INFORMATION

Applicant	KIN No. (If KYC done via CKYC)	Date of Birth#	Gender
1st		D D / M M / Y Y	☐ M ☐ F
2nd		D D / M M / Y Y	☐ M ☐ F
3rd		D D / M M / Y Y	☐ M ☐ F
G or POA^		D D / M M / Y Y	☐ M ☐ F

#Date of Birth - Mandatory if CKYC ID mentioned. ^G: Guardian; ^POA: Power Of Attorney

Details	2nd Applicant	3rd Applicant	G or POA
Mobile No.			
Email Id.			

☞ NOMINATION DETAILS (In case of more than one nominee, please submit a separate nomination form available with any of our ISCs or on our website). Refer instructions.

Nominee Name and Address	For Minor Nominee (Mandatory to attach DOB Proof)		Allocation	Nominee/ Guardian Signature
	DOB	Guardian Name & Address		
			100 %	X

OR ☐ I/We DO NOT wish to nominate and sign here (To be signed by all the joint holders irrespective of the mode of holdings.) _____

☞ DEPOSITORY ACCOUNT DETAILS (Optional. To be filled if investor wishes to hold the units in Demat mode). Refer instructions.

☐ NSDL: DP Name   DP ID I N   Beneficiary Ac No.

☐ CDSL: DP Name   Beneficiary Ac No.

Please ensure that the sequence of names as mentioned in this Application Form matches with the sequence of names in the Demat account. Enclosed (Mandatory) ☐ Client Master List OR ☐ DP statement

☞ KNOW YOUR CUSTOMER (KYC) DETAILS (Mandatory. Please Tick/ Specify. The application is liable to get rejected if details not filled.)

Status details for	1st Applicant	2nd Applicant	3rd Applicant	Guardian
Resident Individual	☐	☐	☐	☐
NRI/PIO/OCI	☐	☐	☐	☐
Sole Proprietorship	☐	-	-	-
Minor through Guardian	☐	-	-	-
Non Individual	☐ Company/Body ☐ Corporate ☐ Partnership ☐ Trust ☐ Society ☐ HUF ☐ Bank ☐ AOP ☐ FI/FII/FPI			
Others (Please specify)				

Gross Annual Income Range (in Rs.)

	1st	2nd	3rd	Guardian
Below 1 lac	☐	☐	☐	☐
1-5 lac	☐	☐	☐	☐
5-10 lac	☐	☐	☐	☐
10-25 lac	☐	☐	☐	☐
25 lac- 1 cr	☐	☐	☐	☐
1 -5 cr	☐	☐	☐	☐
5 - 10 cr	☐	☐	☐	☐
> 10 cr	☐	☐	☐	☐
OR Networth in Rs. (Mandatory for Non Individual) (not older than 1 year)	as on D D M M Y Y	as on D D M M Y Y	as on D D M M Y Y	as on D D M M Y Y

Occupation details for	1st Applicant	2nd Applicant	3rd Applicant	Guardian
Private Sector	☐	☐	☐	☐
Public Sector	☐	☐	☐	☐
Government Service	☐	☐	☐	☐
Business	☐	☐	☐	☐
Professional	☐	☐	☐	☐
Agriculturist	☐	☐	☐	☐
Retired	☐	☐	☐	☐
Housewife	☐	☐	☐	☐
Student	☐	☐	☐	☐
Others (Please specify)				

Politically Exposed Person (PEP) details:	Is a PEP	Related to PEP	Not Applicable
1st Applicant	☐	☐	☐
2nd Applicant	☐	☐	☐
3rd Applicant	☐	☐	☐
Guardian	☐	☐	☐
Authorised Signatories	☐	☐	☐
Promoters	☐	☐	☐
Partners	☐	☐	☐
Karta	☐	☐	☐
Whole-time Directors/Turstee	☐	☐	☐

☞ FATCA/CRS/UBO DETAILS: For Individuals (Mandatory). Non Individual investors including HUF should mandatorily fill separate FATCA/CRS/UBO details form

Details	Sole/ 1st Applicant	2nd Applicant	3rd Applicant	Guardian/POA
Place & Country of Birth				
Nationality				
Are you a tax resident of any country other than India?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

If Yes: Mandatory to enclose FATCA /CRS Annexure

Instruction ☞ **1.** For SIP investments with: (i)Current date - Please provide Single Cheque (for the first installment) with SIP ECS form. (ii) Future date - Please fill the SIP (ECS/Direct Debit) form along with the Application form. Note: SIP will start after 30 days **2.** In case you are investing via both Regular and SIP simultaneously (where the SIP will start after 30 days), please provide a single cheque for the Regular amount, along with the completed SIP (ECS/Direct Debit) Mandate form. **3.** Cheque for the investment should be made in favour of "Franklin Templeton Family Solutions" **4.** For payments by demand draft please attach a certificate from the banker or Challan (instruction to bank) or passbook/bank statement evidencing the debit for issuance.

CHECK LIST: Please ensure the following
☞. Application from is complete in all respects and signed by all Applicants.
☞. Enclosures:
  ☐ Supporting documents for bank account details furnished in the Form.
  ☐ For payment by Demand Draft - a certificate from banker in the prescribed format confirming the account from which the funds have been remitted.
  ☐ Proof of KYC for all application, guardians for minors and POA

☞ **Enclosures** (if applicable)
☐ Proof of relationship with minor
☐ Proof of identity & address
☐ Proof of DOB
☐ Multiple bank registration form
☐ Multiple nomination form

Instructions

Please read the Scheme Information Document containing the terms of offer. All applicants are deemed to have accepted the terms subject to which the offer is being made and bind themselves to the terms upon signing the Application Form and tendering the payment.

1. To invest under the FAMILY SOLUTIONS facility, investor will need to undertake a questionnaire. Based on the inputs provided by the investor and after considering his investment style in light on these inputs, a set of schemes of FTMF would be recommended for investment and the amount of investment.

   However, the investor may opt to invest in schemes of his/her choice and such amount as determined by him/her at his discretion.

2. The investor needs to make the application by filling the specified application and transaction forms of the FAMILY SOLUTIONS facility along with a single cheque / draft for the consolidated amount of investment under the application. Currently, applications will be accepted only in physical form.

   FAMILY SOLUTIONS applications will not be accepted through online / web based transaction platforms (except using HPIN facility offered by FTMF). Also applications received through electronic feeds will not be accepted.

   FAMILY SOLUTIONS transactions through the stock exchanges infrastructure will not be accepted.

3. Notwithstanding the amount of investment recommended for each scheme in the minimum investment amount for fresh and additional purchase shall be as specified in the respective Scheme Information Documents. E.g. If the recommended amount of investment in a scheme is Rs.4,000/- and the minimum investment amount specified in the Scheme information Document of the scheme is Rs.5,000/-, the investor need to invest at least Rs.5,000/- in the scheme.

4. In case of applications for registration of Systematic Investment Plan (SIP), the mode of payment of SIP installments should be Direct Debit or NACH. NACH and postdated cheques will not be accepted.

5. Investors already having an account in any Franklin Templeton scheme can provide either their Customer Folio Number or Account Number and first applicant name in the space provided. Such investors need not fill the section 'Personal Details'.

6. For investments in the name of minor and in TIPP, date of birth (DOB) is required. Please attach a proof of DOB for investment in the name of minor.

7. The application form must be completed in BLOCK LETTERS in ENGLISH.

8. Only single cheque accepted for Family Solution transactions. Multiple cheques will not be allowed

9. Documents to be submitted at FT Branches or CAMS only as Karvy is not allowed to accept FS applications.

   As per SEBI Circular SEBI/IMD/CIR No.11/78450/06 dated October 11, 2006, FTMF hereby declare all its branch offices [Investor Service Centres (ISC)], the designated branch offices of Karvy Computer share Private Limited (Karvy) and Computer Age Management Services Private Limited (CAMS) (termed as Collection Centres) and FTMF's website (www.franklintempletonindia.com) as the Official Points of Acceptance of Transactions ("OPAT"). Additionally, the Secured internet site hosted or managed by CAMS will also be OPAT in respect of the transactions routed through the distributors who have registered for this facility (in accordance with the terms and conditions, as may be prescribed from time to time). Further, MF Utilities India Private Limited (MFUI) website www.mfuonline.com and authorised MFUI POS updated on www.mfuindia.com will be considered as OPAT. The "cut off time" mentioned in the Scheme Information Document shall be reckoned at these official points. All transaction (purchase / redemption / switch) applications must be demonstrably received by the Mutual Fund at these OPAT.

10. FTMF / the AMC may not accept any request for any changes or modifications in the goal(s) and goal details at any time for whatsoever reason. However, whenever an investor comes with an additional investment and different goal, a new account is created.

11. Mode of payment:-

    a. For Resident Investors
       - For Resident Investors - by local cheque/draft deposited with any Franklin Templeton branch or transfer/ electronic transfer to Franklin Templeton Mutual Fund Account

       - Cheque for the consolidated application amount (per Form) should be drawn in favour of "Franklin Templeton Family Solution". The fund is not obliged to represent dishonoured cheques or inform the investor / investor's agent about it.-

    b. For Non-Resident Investors:
       - by NRE/NRO account cheque from a bank located at places having a Franklin Templeton branch. Please provide a photocopy of the cheque alongwith the application form if investment is made through a NRE/NRO account.

       - by Rupee draft purchased abroad payable at locations where the application is submitted to Franklin Templeton branch.

12. In case of application by a limited company or a body corporate or an eligible institution or a registered society or a trust or a partnership firm under a Power of Attorney or otherwise, the original Power of Attorney duly notarised or a certified true copy thereof or the relevant resolution or authority to make the application / redemption as the case may be, or certified true copy duly thereof, along with a certified copy of the Memorandum and Articles of Association and/or bye laws and/or trust deed and/or partnership deed (as the case may be) and Certificate of Registration / Incorporation should be submitted. The officials should sign the application under their official designation. In case of a Trust, it shall submit a certified true copy of the resolution from the Trustee(s) authorising such purchases / redemption.

13. As per SEBI Circular SEBI/IMD/CIR No.11/78450/06 dated October 11, 2006, FTMF hereby declare all its branch offices [Investor Service Centres (ISC)], and FTMF's website (www.franklintempletonindia.com) as the Official Points of Acceptance of Transactions ("OPAT") for applications under Family Solution. The "cut off time" mentioned in the Scheme Information Document shall be reckoned at these official points. All transaction (purchase/redemption/switch) applications must be demonstrably received by the Mutual Fund at these OPAT.

Know Your Customer (KYC):

- It is mandatory for all investors (including joint holders, NRIs, POA holders and guardians in the case of minors) to furnish such documents and information as may be required to comply with the Know Your Customers (KYC) policies under the AML Laws. Applications without such documents and information may be rejected.

  In case of applications under a Power of Attorney (POA), copy of KYC Acknowledgement of the investors and the POA holders must be submitted along with the Application/ Transaction Form else the transaction may be rejected.

- **Politically Exposed Persons (PEP)** are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/ judicial/ military officers, senior executives of state owned corporations, important political party officials, etc. or any senior political figures and their immediate family members and close associates.

Default Options:

The following defaults will apply to the processing of applications, where required, in addition to the defaults already mentioned in the KIM:

In the event of any KYC Application being subsequently rejected for lack of information / deficiency / insufficiency of mandatory documentation, the investment transaction may be cancelled and the amount may be redeemed at applicable NAV, subject to payment of exit load, wherever applicable. Such redemption proceeds will be despatched within a maximum period of 21 days from date of acceptance of application.

New Purchases:

- If the Scheme name in the application is different from the scheme name in the cheque, the transaction will be processed as per the application.

Additional Purchases:

- If an investor provides all details, including Goal, scheme plan, option, and there is only one existing account matching this in the folio, the purchase will be processed into that account.

- If there are multiple matching accounts in Folio (FAMILY SOLUTIONS & Non FAMILY SOLUTIONS), the purchase will be processed into the FAMILY SOLUTIONS account with the same goal.

- If an investor only provides the scheme name, but not the plan and or option, transactions will be processed based on the following rule:

- If there is one FAMILY SOLUTIONS account of the scheme in that folio, the transaction will be processed into that account irrespective of whether it is the default option If an investor does not provide their bank details in an additional purchase in new scheme, the default bank details from the last transacted account will be used

- In case the amount of the cheque or the payment instrument / advice differs from the amount of the application, the application would be rejected if the amount is less than the amount mentioned in application form. In case the amount of cheque / payment instrument is more than the amount mentioned in the application form, the excess amount will be refunded without any compensation or interest thereof.

Redemptions/Exchanges:

- Switches from Non FAMILY SOLUTIONS to FAMILY SOLUTIONS and vice versa are allowed

- The Switch request (with Goal Sheet) can be placed while opening the FAMILY SOLUTIONS account

- Switches in scheme from one goal to another goal are allowed

- Investors must provide the account number from which redemption or switch out is to be effected, in case they hold multiple accounts of the same scheme in a folio. If Franklin Templeton is unable to determine the single specific account to be redeemed / switched out from the information provided, the request would be treated as ambiguous and hence rejected.

- In the case of a Switch / Exchange, if the request does not specify the destination scheme account number but only provides the scheme name, the NIGO rules as listed above for Additional purchases would apply.

- If the number of units and all units is mentioned in the request for redemption or Switch, all units (Cleared units) will be considered. Where the number of units and an amount is mentioned, the number of units (cleared units) will be considered.

- Redemption/Switch requests will be processed only if either amount or units are clearly mentioned.

- Switch transactions will be processed only if the day is a BUSINESS DAY for both the Source and Destination Schemes.

- If for a switch transaction, the source account number does not match with the source scheme name (wherever given) or if the destination account number does not match with the destination scheme name (wherever given), the request would be treated as ambiguous and hence rejected.

- If folio number given is without a scheme name or account number and there are two or more schemes or accounts available under the folio, the request would be treated as ambiguous and hence rejected.

- If the account number is valid but does not belong to the folio number given in the application, then the transaction will be processed in the given account number.

Systematic Investment Plan (SIP) under FAMILY SOLUTIONS

- Investor can choose to invest via an SIP in Family Solutions – Available through the NACH facility only. Post dated Cheque will not be accepted for FAMILY SOLUTIONS SIP transactions.

- Each FAMILY SOLUTIONS SIP form allows up to 4 schemes across goals. For additional SIPs in the same Family Solutions Application, the investor will need to fill additional SIP NACH forms.

- Each SIP NACH form should have the same date, frequency and tenure. Hence, if the investor chooses to have different dates, frequency or tenures he/she needs to fill up another SIP NACH form.

- If the SIP dates are different in a particular goal/across goals submitted through a single NACH form, it will be rejected

- In case of Lump sum and Future Dated SIP, Single Cheque (lump sum amount only) with FAMILY SOLUTIONS SIP NACH form will be accepted (Note: SIP will start after 30 days)

- All installments should be for the same amount.

- All the SIP dates across goals should be uniform

FRANKLIN TEMPLETON

FAMILY SOLUTIONS
INVESTMENT PLANS FOR LIFE GOALS

Sl No.

Systematic Investment Plan through Auto Debit (See instructions overleaf)

The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder.

Advisor ARN / RIA Code/ Portfolio Manager's Registration No.	Sub-broker/Branch Code	Sub-broker ARN	Representative EUIN

Applicable only if ARN is mentioned but EUIN box is left blank: "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."Applicable only if RIA Code/ Portfolio Manager's Registration Number is mentioned: "I / We hereby give you my/our consent to share/provide the transactions data feed/portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes managed by you, to the SEBI-Registered Investment Adviser/ SEBI Registered Portfolio Manager whose code is mentioned herein."

✓

Sole / First Unit Holder	Second Unit Holder	Third Unit Holder

☞ **TRANSACTION CHARGES:** Applicable for transactions routed through distributors/agents/brokers who have opted to receive transaction charges. (Refer Instruction in Common Application Form and tick the appropriate option)

☐ I am a first time investor in mutual funds (R150 will be deducted). ☐ I am an existing mutual funds investor (R100 will be deducted).

Name of Sole/First Account holder

☐ Existing Unitholders' Folio Number ☐ New Investors (Please also complete and submit a Common Application Form)

Scheme Name	Plan / Option	Family Solutions Goal	SIP Amount R	SIP Date
1. _____ Existing Unitholders: A/c No.: _____ Regn. No.(office use only)	P: O:			SIP Date: _____ of every month. If left blank 10th will be considered as the default date
2. _____ Existing Unitholders: A/c No.: _____ Regn. No.(office use only)	P: O:			
3. _____ Existing Unitholders: A/c No.: _____ Regn. No.(office use only)	P: O:			
4. _____ Existing Unitholders: A/c No.: _____ Regn. No.(office use only)	P: O:			

SIP Period: Start Date [m m][y y y y]   End Date ☐ [1 2][2 0 9 9] (Perpetual)   OR ☐ [m m][y y y y] (Regular)   Frequency: ☐ Mthly (default)   ☐ Qtly

☐ Tick here if SIP is being "Stepped Up" (Please ensure that you attach the "SIP Variants Form" with the step-up section duly completed.)

First SIP Cheque Date: __/__/   Cheque No.: _____   Bank Name & Branch: _____   A/c No: _____

Please note that 30 business days are required to set up the Auto Debit. (Should be from the Bank Account from which NACH is to be effected) (for minimum period and installments, please refer Terms & Conditions no. 1 overleaf). I/We authorize Franklin Templeton Mutual Fund or their authorized service providers to Debit my/our account listed below by NACH (National Automated Clearing House) for collection of SIP payments. In case the payment isn't processed through NACH within 30 days then same shall be processed through Direct Debit / NACH using my/our below mentioned account.

Optional Enclosures:(If 1st installment is not by cheque)
☐ Blank cancelled cheque   ☐ Copy of cheque

Please tick ☑ as applicable:
☐ Auto Debit Form (ADF) is already registered in the Folio then please mention Bank Name and Account Number below. SIP auto debit can start in FIVE Business Days i.e. for debit date 7th, form can be submitted till 2nd of the month Bank Name_____ Bank Account Number_____
☐ Auto Debit Form (ADF) is attached and to be registered in the Folio. SIP Auto Debit will start after mandate registration which takes Thirty Business days. Per transaction limit should be less than or equal to the amount as mentioned in the ADF already registered / submitted, if not registered.

Application for: ☐ Normal SIP   ☐ Micro SIP

Document proofs for Micro SIP (Mandatory) (Please provide any one of the name of identification document as mentioned in the instructions)
Identification document _____   Field Issuing Authority_____   Document Identification No._____

Having read and understood the contents of the Statement of Additional Information (SAI) of Franklin Templeton Mutual Fund (FTMF), Scheme Information Document (SID) and Key Information Memorandum (KIM) of the scheme(s) and the Addenda issued to the SID and KIM till date, I / we hereby apply to the Franklin Templeton Trustee Services Pvt. Ltd., Trustees to the schemes of FTMF for registration of Systematic Investment Plan (SIP) & NACHs indicated above, and agree to abide by the terms, conditions, rules and regulations of the Fund and the SIP NACH as on the date of this investment.I/We declare that the particulars given above are correct and complete. If the transaction is delayed or wrongly effected or not effected at all for reasons of incomplete or incorrect information, I/we will not hold FTMF, Franklin Resources Inc. and its subsidiary and associate entities including their employees, directors and key managerial persons (collectively referred as Franklin Templeton Investments / Franklin Templeton), agents, authorized representatives, appointed service providers or the Bank responsible. I/we further undertake that any changes in my/our Bank details will be informed to FTMF immediately. I/We have read and agreed to the terms and conditions mentioned overleaf. I/We confirm that the monies invested in the scheme(s) of FTMF legally belong to me / us and derived through legitimate sources. I / we have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment.
I/We have read and understood the terms and features of the scheme(s) and associated risk factors and have satisfied myself/ourselves about suitability of the scheme(s) for my/our investment in light of my/our risk appetite and investment horizon. * I / We confirm that I am / we are Non-Resident Indian(s) (NRIs) / Person(s) of Indian Origin (PIOs)/ Foreign Portfolio Investor(s) (FPIs), and I / we hereby further confirm that the monies are remitted from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines. I / We confirm that I am / we are not United States (U.S.) persons within the meaning of Regulation(S) under the U.S. Securities Act of 1933, or as defined by the U.S. Commodity Futures Trading Commission, as amended from time to time or residents of Canada. I/We understand and acknowledge that FTMF, its Trustee, the AMC reserves the right to accept / reject any transactions / redeem any investments, at their sole discretion and as they may deem fit without assigning any reason thereto. The rejection may be for any reason including but not limited to comply and adhere to such orders or instructions issued by any Indian or foreign governmental or statutory or judicial or regulatory authorities / agencies. I/ We hereby agree to provide any additional information / documentation that may be required by Franklin Templeton Investments, in connection with this application. I/We authorise Franklin Templeton Investments to disclose, share, remit in any form, mode or manner, all / any of the information provided by me/us, including KYC data registered with regulatory/quasi regulatory agencies and all changes, updates to such information as and when provided by me/us, to any of its agents, service providers, representatives or distributors or any other parties located in India or outside India or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities and other investigation agencies without any obligation of advising / informing me/us of the same. **I/We confirm that I/we do not have any other existing investment in the schemes of Franklin Templeton Mutual Fund which together with this proposed investment will result in aggregate investments exceeding Rs.50,000/- in a year. Further, I/we understand and accept that in case Franklin Templeton Mutual Fund processes this investment / first SIP instalment and the application is subsequently found to be incomplete in any respect or not supported by adequate documentation or if the existing aggregate investment together with this proposed investment exceeds Rs.50,000/- in a year, the SIP registration under the Micro investment route will be cancelled for future instalments and no refund shall be made for the units already allotted. 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(s) is being recommended to me/us.

* Applicable to NRI / PIO / FPI
** Applicable to Micro-investments

Signatures: First/Sole Applicant/Guardian X_____   Second Applicant X_____   Third Applicant X_____

Date: _____   Place: _____

A single mandate for all your investments will make it easier for you to invest with Franklin Templeton Mutual Fund (FTMF) in the future. To avoid having to provide another mandate, you can select 'As & when presented' for Frequency and 'Maximum Amount' for Debit Type, specifying the maximum value you intend to invest at any time. FTMF will ensure that only the value of the transaction will be debited from your account.

FRANKLIN TEMPLETON
Family Solutions - SIP Auto Debit Form |ADF |

		1
UMRN [For office use]	Date	

Sponsor Bank Code [For Office Use]   Utility Code [For Office Use]

Tick (✓)		
CREATE ✓ [2]	I/We hereby authorize **Franklin Templeton Mutual Fund**	to debit (tick ✓) [SB][CA][CC][SB-NRE][SB-NRO][Other] 3
MODIFY ✗		
CANCEL ✗	Bank a/c number	4

with Bank _____   IFSC 5 _____   or MICR 6 _____

an amount of Rupees _____   ₹ _____ 7

FREQUENCY ✗ Mthly ✗ Qtly ✗ H-Yrly ✗ Yrly ✓ As & when presented 8   **DEBIT TYPE** ✗ Fixed Amount ✓ Maximum Amount 9

Reference 1 [Folio Number]   10 Phone No. _____ 12
Reference 2 [Application Number]   11 Email ID _____ 13

PERIOD
From [ ][ ][ ][ ][ ][ ]   14 I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.
To ✗✗✗✗✗✗ ✓

Signature Primary Account holder	Signature of Account holder	Signature of Account holder	15

Or ✓ Until Cancelled
1. [Name as in Bank records]   2. [Name as in Bank records]   3. [Name as in Bank records] 16

This is to confirm that I/we have carefully read, understood and agree to abide by the Terms and conditions and instructions. I am authorizing Franklin Templeton to debit my account. I/We are authorized to cancel/amend this mandate by appropriately communicating the cancellation/ amendment request to Franklin Templeton or the bank where I have authorized the debit'

☞ **ACKNOWLEDGEMENT SLIP**   Sl. No.

Investor's Name _____

Customer Folio [ ][ ][ ][ ][ ][ ][ ]   Total SIP Amount R _____

Service Centre Signature & Stamp

General T&C

Auto Debit is a facility which enables automatic transfer of funds from the investor's registered bank account to Franklin Templeton Mutual Fund ("FTMF"), as per the chosen frequency. Auto Debit includes NACH and Direct Debit.

1) This facility is offered to investors having Bank accounts in select banks mentioned in the link below (please refer point 14 in T&C for SIP through Auto Debit). The Banks in the list may be modified/updated/ changed/removed at any time in future entirely at the discretion of Franklin Templeton Asset Management (India) Pvt. Ltd. ("AMC"), Franklin Templeton Trustee Services Pvt. Ltd. ("Trustee") or Franklin Templeton Mutual Fund ("FTMF") without assigning any reasons or prior notice. SIP instructions for investors in such Banks via NACH route will be discontinued. 2) The AMC/ Trustee/ FTMF will not liable for any transaction failures due to rejection by the investors bank/branch.

3) The investor agrees to abide by the terms and conditions of NACH facility of NPCI and NACH/Direct Debit facility of Reserve Bank of India (RBI)

4) Investor will not hold AMC/ Trustee/ FTMF and its service providers responsible if the transaction is delayed or not effected by the Investor's Bank or if debited in advance or after the specific SIP date due to various reasons or for any bank charges debited by his banker in his account towards NACH/ NACH/ Direct Debit Registration / Cancellation / Rejections, if any.

5) The AMC/ Trustee/ FTMF reserves the right to reverse allotments in case the Auto debit/ NACH/ Direct Debit is rejected by the bank for any reason whatsoever.

6) The AMC/ Trustee/ FTMF shall not be responsible and liable for any damages/compensation for any loss, damage etc., incurred by the investor. The investor assumes the entire risk of using the Auto Debit facility of NACH / Direct Debit and takes full responsibility for the same.

7) The AMC/Trustee reserves the right to discontinue or modify the SIP facility at any time in future on a prospective basis.

8) The AMC/ Trustee reserves the right to discontinue the SIP in case of Auto Debit through NACH Direct Debit routes are rejected by the investor bank for any reasons.

9) For load details and other terms of issue, please refer to the, Scheme Information Document, Key Information Memorandum and the addendum issued from time to time.

10) The AMC/ Trustee reserves the right to reject any application without assigning any reason thereof.

11) SIP cancellation can be done separately by submitting the request at least 30 Business days in advance; however the associated NACH / Direct Debit / NACH mandate can be retained for future investments.

12) For intimating the change in bank particulars, please use the Auto Debit Form to modify transaction limit or add / remove banks from the NACH / Direct Debit / NACH facility. Also fill-up all the relevant details as applicable. Requests for any changes/ cancellation in the NACH / Direct Debit / NACH Bank Mandate request should be submitted at least 30 Business days in advance.

13) In case of micro SIPs, please provide any one of the following photo identification documents as mentioned below:
Voter Identity Card, Driving License, Government / Defense identification card, Passport Photo Ration Card, Photo Debit Card (Credit card will not be accepted)., Employee ID cards issued by companies registered with Registrar of Companies, Photo Identification issued by Bank Managers of Scheduled Commercial Banks / Gazetted Officer / Elected Representatives to the Legislative Assembly / Parliament, ID card issued to employees of Scheduled Commercial / State / District Co-operative Banks., Senior Citizen / Freedom Fighter ID card issued by Government., Cards issued by Universities / deemed Universities or institutes under statutes like ICAI, ICWA, ICSI., Permanent Retirement Account No (PRAN) card issued to New Pension System (NPS) subscribers by CRA (NSDL)., Any other photo ID card issued by Central Government / State Governments /Municipal authorities / Government organizations like ESIC / EPFO

14) The amount of each SIP instalment should be less than ₹1 crore in case of a transaction in FIDA, FIIOF, FIIBA, FIGSF, FISTIP, FISPF, FILDF, FIMIP, FIUBF, FIPEP, FICBOF and FIBPDF schemes. Transaction will be rejected if the instalment amount is greater than ₹1 crore.

15) Minimum Investments: 12 installments of ₹500/- (or) 6 installments of ₹1000/-. In FILSF 12 installments of ₹2000/- (or) 6 installments of ₹4000/-, in FIDPEF 12installments of ₹1000/- (or) 6 installments of ₹2000/-

16) If during the tenure of a SIP, the unit holder changes the plan or option in which he/she had invested, the same would be treated as termination of existing SIP and re-registration of a new SIP and all the terms and conditions of the SIP such as minimum term/amount etc. shall apply in both plans/options.

17) The AMC / Trustee/FTMFreserves the right to modify or discontinue the SIP facility at any time in future on a prospective basis. It is clarified that the load applicable for a SIP shall be the load prevailing on the date of registration.

T&C for SIP through Auto Debit

1) Existing investors must provide their Folio Number / Account number and need to fill up a Common Transaction Form in case the investment is into a new scheme.

2) New investors who wish to enroll for SIP through Auto Debit should also fill up the Common Application form in addition to this form.

3) The SIP through Auto Debit Form, and the Common Application Form (in case of new investors), along with the necessary cheque or copy thereof should be submitted at least 30 Business days in advance of the date of the first Auto Debit.

4) If Auto Debit Form (ADF) is already registered in the folio, SIP Auto debit can start in FIVE Business Days.

5) Per transaction limit should be less than or equal to the amount as mentioned in Auto Debit Form already registered or submitted, if not registered.

6) Investors are required to ensure adequate funds in their bank account on the date of investment transaction. FTMF will endeavor to debit the investor's bank account on the date of investment transaction, however if thereis any delay all such transactions will be debited subsequently. The AMC/ Trustee/ FTMF (or any of its associates) shall not be held responsible for any delay/wrong debits on the part of the bank for executing the auto debit instructions on a specified date from the investor's bank account.

7) FTMF or its authorized banker or agent will initiate the registration of the Auto Debit form / debit instructions.

8) Investments made through Auto Debit/ NACH/ Direct Debit/NACH mode are subject to realization of funds from investor bank accounts and the NAV guidelines as per Scheme Information Document(s), Key Information Memorandum andAddenda issued till date will be applicable for the transactions which are connected withrealization of funds.

9) NACH/Direct Debit bank/NACH mandate is applicable only for investments via debit instructions.

10) The payment towards investment can happen only from the bank account of 1st holder and therefore the 1st holder need to be a holder in the bank account.

11) The transactions are liable to rejection incase Investor has Multiple Auto Debit Mandate at folio level and Bank Name & Account number are not mentioned in the request form.

12) The AMC/ Trustee/ FTMF/ Sponsor/ Bank / NPCI are not liable for the bank charges, in case debited from investor's bank account, by the destination bank, on account of payment through NACH/ NACH/ Direct Debit.

13) For further details of the Scheme features like minimum amounts, risk factors etc., investors should, before investment, refer to the Scheme Information Document(s), Key Information Memorandum andAddenda issued till date available free of cost at any of the Investor Service Centers or distributors or from the website www.franklintempletonindia.com.

14) Please contact Franklin Templeton ISC / visit www.franklintempletonindia.com for updated list of banks / branches eligible for NACH/ Direct Debit/NACH Facility

15) The bank branch provided for NACH/Direct Debit should participate in the local MICR clearing. The investor shall inform their Bankers about the NACH/Direct Debit mandate and AMC/Trustee/ FTMF will not liable forany transaction failures due to rejection by the investors bank/branch.

16) Only one installment per month/quarter is allowed under one SIP registration. e.g., if for a monthly SIP, the first installment is in the month July, say 2nd July, then the second installment should be in August.

17) Please write the Bank Name in "Full Form" to avoid any ambiguity and rejections E.g., State Bank of India (and not SBI).

18) FTMF reserves the right to determine which payment mode (NACH, NACH or Direct Debit) will be used for each specific transaction.

19) FTMF reserves the right to choose which mandate will be utilized in case an investor has provided multiple mandates for the same bank account.

20) For HDFC Bank account holders:

I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for the reasons of incomplete or incorrect information, I/We would not hold the Mutual Fund or the Bank responsible. If the date of debit to my/our account happens to be on a non-business day as per the Mutual Fund, execution of the SIP will not happen on the day of holiday and allotment of units will happen as per the terms and conditions listed in the Offer Document of the Mutual Fund. HDFC Bank shall not be liable for, non 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, munity, revolution, fire, flood, fog, war, lightening, earthquake, change of Government policies, Unavailability of Bank's computer system, force majeure events or any other cause of peril which is beyond HDFC Bank's reasonable control and which has the effect of preventing the performance of the contract by HDFC Bank. I/we acknowledge that no separate intimation will be received from HDFC Bank in case of non-execution of the instructions for any reasons whatsoever.

Instructions To Fill Auto Debit Form and Terms and Conditions

- Following fields need to be filled mandatorily:-
    1. Date: In format DD/MM/YYYY
    2. Select the appropriate checkbox to create, modify or cancel the mandate
    3. Bank A/c Type: Tick the relevant box
    4. Fill Bank Account Number
    5. Fill name of Destination Bank
    6. IFSC / MICR code: Fill respective code
    7. Mention amount of mandate
    8. Select frequency of mandate
    9. Select whether the mandate amount is fixed value or maximum value
    10. Reference 1: Mention Folio Number
    11. Reference 2: Mention Application Number
    12. Telephone Number (Optional)
    13. Email ID (Optional)
    14. Period: Starting and Ending dates of NACH registration (in format DD/MM/YYYY). For perpetual SIP, please leave the end date blank and select 'until cancelled
    15. Signature as per bank account
    16. Name: Mention Holder Name as Per Bank Record
- Auto Debit Bank Mandate can be used for both SIP and Lump Sum Purchase.
- Investors are allowed to perform Lump sum purchase and SIP on a same day provided the Auto Debit bank account has the adequate funds to honor multiple debits
- Auto Debit Bank Mandate is applicable for both Individual and Non-Individual
- Registration of Multiple Auto Debit forms is acceptable with different Bank and Accounts.
- Per transaction limit should be less than or equal to the amount as mentioned in Auto Debit Form Mandate already registered or submitted, if not registered
- For cancelling / updating an Auto Debit mandate. Investor has to use a separate form – "Auto Debit Cancellation/ Update Form". Update option is only for updating the "Debit Amount"

- Investors are required to submit "New Auto Debit / NACH Mandate" registration first and only after successful registration an existing "Auto Debit Mandate" associated with a SIP can be cancelled.
- Auto Debit Mandate request will be accepted only if the "Bank" mentioned in the request form is listed in the NACH banks list. Please contact Franklin Templeton ISC / visit www.franklintempletonindia.com for updated list of banks eligible for Auto Debit Facility.
- Submitting Auto Debit/ NACH/Direct Debit form does not confirm your investments in FTMF unless supported by SIP Investment Form or Common Transaction forms
- Franklin Templeton will initiate debit instructions to the investor bank account only on receipt of valid investment instruction from the investor.
- For other Terms and Conditions governing NACH Auto Debit/NACH/Direct Debit payments please refer to SID or www.franklintempletonindia.com
- Auto Debit bank mandate is applicable only for investments via debit instructions
- By submitting the Auto Debit mandate the investor authorizes Franklin Templeton to utilize the information provided herein for the purpose of his/her investments in Franklin Templeton Mutual Fund
- Investors are deemed to have read and understood the requirements and contents of Statement of Additional Information (SAI), Scheme Information Document (SID) and all other scheme related documents

The following applications will be considered as 'not in good order' (NIGO) and are liable to be rejected:

- If folio number mentioned in the Fresh / Additional Purchase, SIP Auto Debit form, Switch, STP, SWP & NCT request does not match Folio Number mentioned in Auto Debit registration mandate Form.
- If the folio number mentioned in the Auto Debit mandate registration form does not match with our record, the Auto Debit mandate will not be registered.
- If the SIP period mentioned in SIP via Auto Debit form is beyond the Auto Debit Mandate validity period or Auto Debit validity period expired.
- Incase no frequency has been selected or multiple frequencies are selected
- Incase no debit type has been selected or multiple types are selected
- Incase no SIP end date mentioned or until cancelled not opted