RF.

DSP BLACKROCK D AGRICULTURE FU

NFO Application Form Please read instructions before filling this Form

Application No.:

	• •	NFO Opens: S	September 30, 201	1 NFO Closes: Octobe	er 14, 2011	- 44			
istributor Name and ARN	Sub	Broker Code	Branch / RM	Code		For Office	e use only		
ARN-0155 / NJ India Invest Distributor Contact No:		55537							
		_	ed Distributors base	d on the investors' asse	essment of vari	ous factors includ	ling the service rendered by the distribute		
. FIRST APPLICANT'S						-			
Name of First Applicant (Sho	ula match v	with PAN Card)		Gender	■ Male	L Femal	e Title Mr. Ms. Ms. M/		
Existing Folio No			/	(If you have an exist number here and s	ing folio numl kip to section	per with PAN and 5. All details will	KYC validation, please mention the be as per existing folio number)		
Date of Birth	For Investments "On behalf of						r": (Refer Instruction 1-e)		
Mandatory for minor) PAN	,		(* Attach Mandatory Documents as per instructions). Proof of DoB ■ Birth Certificate ■ School Certificate / Mark sheet						
1st Applicant / Guardian)					attached * ■ Passport ■ Any other				
Enclose KY	C Acknowle	edgement		Guardian na			Mother La Court Appointed*		
Name of Guardian if minor /	Contact P	erson for non-ind	dividuals / PoA	Holder name:	PoA PAN				
Correspondence Address							*PoA PAN & KYC is mandato		
_andmark									
<mark>City</mark>		(1	Pin Code Mandatory)		Stat	e			
Superannuation / Pension Function Occupation (Please ✓) □ S DSPBR eServices [mail ID]							(Please specif		
(in capital) Mobile	. 01			Fav			[Refer instruction		
DSPBR eSMS STD Cod		T 1 ((0.0)	Fax		. (5 :)			
310 000		Tel. (Uffj		16	el. (Resi.)			
DSPBR Online PIN (Please tick /)	an	d Usage as availab	le in SID/SAI an	•	ock.com (R	eferinstructio	s and conditions of PIN Issuance on 1(f) for mandatory details).		
2. JOINT APPLICANTS			, Mobile Namber	PAN are manuatory	y details for i	ssuance of File	and Online Pacifity.		
Made of Holding (Please tisk	./\ F	Joint (Default)	Anyono or (Survivor Sino	ulo.				
Mode of Holding(Please tick Name of Second Applicant (S			■ Anyone or S	Survivor Sing	ite		Title T Mr T Mr T M/		
Name of Second Applicant (S	noutu mate	ii witii FAN Caru)					Title 🗖 Mr. 🗖 Ms. 🗖 M/		
PAN (2nd applicant)			Er	nclose	cknowledge	ment			
Name of Third Applicant (Sho	uld match	with PAN Card)					Title ☐ Mr. ☐ Ms. ☐ M/		
PAN (3rd applicant)			Er	nclose	cknowledge	ment			
ACKNOWLEDGEMENT	SLIP (Id	be filled in by the	e investor)			DSP BLA	CKROCK MUTUAL FUN		
Received, subject to realisation, verificat		•		s mentioned in the app	lication form	DOI DEA	Application No.		
-rom		, , , , , , , , , , , , , , , , , , , ,					, , , , , , , , , , , , , , , , , , , ,		

DSP BlackRock World Agriculture Fund

3. BANK	ACCOUNT DETAI	LS (Refer Instruction	on 3 and avail	Multiple Bank Re	egistratio	n Facility)				
Bank Name										
Bank A/C No).			A/C Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others						
Branch Addi	ress									
				City		Pin				
IFSC code: (11 digit)				MICR code (9 digit)	(This is a 9	digit number next to y	our cheque number)			
4. INVEST	MENT DETAILS	(Please 🗸)								
DSP Blac	kRock World Agi	riculture Fund	0	Growth (Default) Option		Dividend Payout	Dividend Reinvest			
One ti	me Lump sum Investn	nent: 📭 Please fill	the details he	reunder. 🕼 Do n	ot submit	SIP Auto Debit	Form.			
Payment	Mode: Cheque	DD RTGS N	IEFT 🗖 Funds	transfer Cheq	ue/RTGS/	D D	M M / Y Y Y Y			
Cheque/	Cheque/DD/RTGS/NEFT No.			Paym	/DD Date nent from					
₹	Amount (Rs.) (i)				A/c No.					
	ges, (Rs.)(ii)				Name					
	nount (Rs.) (i) + (ii)			Brand			A PART PART PART			
Documer.	rds hts Attached to avoid Th	ird Party Payment Pei	action where a		unt Type		Current NRE NRO FCNR			
							a Failty Dectarations			
First SIF	ystematic Investment Cheque Details: (Me		-				4(i) on Third Party Payments)			
<u> </u>	/ DD No.			rawn on Bank A/c N			ay In A/c No.			
	DD Date D D /		Y Y B	ank & Branch						
E NOMIN	ATION DETAILS	(Bofor Instruct	ion E) ladivid	uala (single es isint s	annlicante)	are advised to a	vail Namination facility			
	vish to nominate.				аррисанся		: Applicant Signature (Mandatory)			
	Nominee Na		Guardian N	ame (In case of M	inarl	Allocation %	Nominee Signature			
Nominee 1	Nominee Na	me	Guardian N	ame (in case of M	inor)	Attocation %	Nominee Signature			
Nominee 2										
Nominee 3 Address					_					
						Total = 100%				
6 DECL	ARATION & SIGN	ATURES								
			ation Document a	nd Statement of Additi	onal In <u>f</u> orm	ation, Ķey Informa	ation Memorandum, Instructions and			
the terms and investment.	ed by DSP BlackRock Mut I conditions, rules and red / We hereby nominate th	ual Fund, I / We, hereby a gulations of the Scheme. e above nominee to rec	pply to the Truste I / We have neith eive all the amou	ee of DSP BlackRock M ner received nor been ints to my/our credits	futual Fund induced by in the ever	for Units of the re any rebate or gifts at of my/our death	levant Scheme and agree to abide by , directly or indirectly in making this grand have read the instructions for			
nomination. S the amount in Notification, D	ignature of the nominee a nyested in the Scheme is)irections or any other a	cknowledging receipts of through legitimate sour oplicable laws enacted l	my/our credit will ces only and is r by the Governme	ll constitute full discha not designed for the p nt of India, or any Sta	arge ofliabil ourpose of c tutory Auth	ities of DSP BlackI contravention or e ority. The ARN ho	ation Memorandum, Instructions and levant Scheme and agree to abide by so directly in making this in and have read the instructions for Rock Mutual Fund I/ We declare that vasion of any Act, Regulation, Rule, older has disclosed to me/us all the atual Funds from amongst which the blity / Origin and I/We hereby confirm r Non-Resident External / Ordinary			
Scheme is bei that the fund	In the form of trail comming recommended to me/i s for subscription have b	ilssion or any other mode us. Applicable to NRIs or been remitted from a <u>br</u>	e), payable to him nly: I/We confirm oad through, nor	i for the different comp that I am/We are Non mal_banking_channel	peting Sche -Resident(s Is or from f	mes of various Mu) of Indian Nationa funds in my / our	ality / Origin and I/We hereby confirm Non-Resident External / Ordinary			
Account/FCNI	R Account(s).If NRI(🗸	Repatriation basis	Non-Repatriatio	n basis						
Sol	le / First Applicant / Guar	dian	Secor	nd Applicant			Third Applicant			
Email: service@dspblackrock.com Contact Centre: 1800 200 4499										
	Website: www	w.dspblackrock.co	om		oomacc	ocinire. 1000	200 4477			
Ouick	Nome Address	arroath, arrainn a F	ull ask	o oloo aastaa ta	tions	A didition of the	month provided if investment is			
Chocklist	Name, Address are coEmail ID / Mobile nun					not pre-printed	ments provided if investor name is on payment cheque or if			
153	■ PAN / KYC requireme	nts are enclosed	Nomination facilit	ty opted	_	Demand Draft is Additional docu	s used. ments provided in case			
	 Complete Bank detail 	s provided	orm is signed by	all applicants	_		ptional Third Party Payments.			