

Common Application Form for FIBCF, FIPF, FIPP, FIOF, TIGF, FIIF, FIFCF, FIF, FFF, FPF, TICAP, TIPP, FIT, TIEIF, FIHGCF, FTIBF, FTDPEF & FTLF

Sl. No. _____

Distributor information		For Office Use Only
Advisor Code*	Sub-Advisor Code* :	Application received
	Branch :	
* AMFI Registered Distributors		
	Representative :	

Existing Unitholders (Please provide the following details in full; Please refer Instruction 2)

First Applicant Name _____
 Customer Folio No. _____ Account No. _____

Unit Holder Information

(To be filled in Block Letters. Use one box for one alphabet leaving one box blank between name and surname)

Name of First/Sole Applicant _____

 Proof of KYC enclosed* or KYC Application No.* _____ Date of Birth# | D D M M Y Y Y Y |
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy or Form 49A & Form 60 ^ | Gender Male Female
Status: Resident Individual NRI/PIO Company/Body Corporate Partnership Trust Society HUF Bank AOP
 Sole Proprietorship Minor through Guardian# FI FII Others (Please specify) _____
 Nationality and Country of Residence _____

Name of Second Applicant _____

 Proof of KYC enclosed* or KYC Application No.* _____ Date of Birth# | D D M M Y Y Y Y |
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy or Form 49A & Form 60 ^ | Gender Male Female
Status: Resident Individual NRI/PIO Minor through Guardian# Others (Please specify) _____
 Nationality and Country of Residence _____

Name of Third Applicant _____

 Proof of KYC enclosed* or KYC Application No.* _____ Date of Birth# | D D M M Y Y Y Y |
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy or Form 49A & Form 60 ^ | Gender Male Female
Status: Resident Individual NRI/PIO Minor through Guardian# Others (Please specify) _____
 Nationality and Country of Residence _____

Name of Guardian _____

 Proof of KYC enclosed* or KYC Application No.* _____ Date of Birth | D D M M Y Y Y Y |
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy or Form 49A & Form 60 ^ | Gender Male Female
Status: Resident Individual NRI/PIO Others (Please specify) _____
 Nationality and Country of Residence _____ Relationship with Minor Parent Guardian

*Please provide any one of the following: 1. Copy of the KYC acknowledgement issued by CVL or 2. KYC Application with necessary documents. (Mandatory for all Investors). \$PAN: In terms of SEBI circular dated April 27, 2007, verification of PAN is mandatory for all Unitholders (including joint holders, guardians in case of minors and NRIs) w.e.f. July 2, 2007 irrespective of the amount of transaction. Please submit photocopy of the PAN card (alongwith the original for verification, which will be returned across the counter). ^ Submission of form 60 is mandatory for investments of Rs.50,000 and above #Date of Birth - mandatory for Minors and all investments in TIPP (in TIPP, only individuals may invest).

I/We would like to invest in	Mode of Operation
<p>Separate cheque/demand draft required for each investment, drawn in favour of scheme name (see point 4 on page 5). Please fill up the scheme name(s) and the plan/option you may refer to the KIM for more details. Investors in Templeton India Pension Plan and Templeton India Children's Asset Plan are requested to also fill in the option exercise form available at the ISC.</p> <p>Scheme Names (Please tick (✓))</p> <p><input type="checkbox"/> FIBCF <input type="checkbox"/> FIPF <input type="checkbox"/> FIPP <input type="checkbox"/> FIOF <input type="checkbox"/> TIGF <input type="checkbox"/> TIEIF <input type="checkbox"/> FIHGCF <input type="checkbox"/> FIFCF <input type="checkbox"/> FIF <input type="checkbox"/> FPF <input type="checkbox"/> FFF <input type="checkbox"/> TIPP <input type="checkbox"/> FIT <input type="checkbox"/> FTIBF <input type="checkbox"/> FTDPEF</p> <p><input type="checkbox"/> 20's Plan <input type="checkbox"/> 30's Plan <input type="checkbox"/> Education Plan <input type="checkbox"/> BSE Sensex Plan</p> <p><input type="checkbox"/> FTLF <input type="checkbox"/> 40's Plan <input type="checkbox"/> 50's Plan <input type="checkbox"/> TICAP <input type="checkbox"/> Gift Plan <input type="checkbox"/> FIIF <input type="checkbox"/> NSE Nifty Plan</p> <p><input type="checkbox"/> 50's Plus Floating Rate Plan</p> <p>Plan /Options (Please tick (✓))</p> <p><input type="checkbox"/> Lumpsum <input type="checkbox"/> Growth</p> <p><input type="checkbox"/> Systematic Investment Plan <input type="checkbox"/> Dividend Reinvestment <input type="checkbox"/> Dividend Payout</p> <p>Amount Invested _____ (Less DD Charges)</p> <p>Net Amount Paid _____</p> <p>Payment Details*</p> <p>Cheque/DD No. _____ Bank, Bank A/C No. and Branch _____</p>	<p><input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Either or Survivor(s)</p> <p>Power of Attorney (POA) Details</p> <p>Name of POA Holder _____</p> <p>Proof of KYC enclosed* <input type="checkbox"/> or KYC Application No.* _____</p> <p>Date of Birth D D M M Y Y Y Y </p> <p>Status: (Please tick (✓))</p> <p><input type="checkbox"/> Resident Individual <input type="checkbox"/> NRI/PIO</p> <p><input type="checkbox"/> Others (Please specify) _____</p> <p>Gender:</p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female</p>

Please use separate application forms for Lumpsum and Systematic Investment Plan, please fill the SIP Auto Debit (ECS/Direct Debit) form alongside and submit it together with the application form. If you have an existing account in the scheme mentioned above, this purchase will be treated as an additional purchase in the same account. If you prefer to have a new account in the same scheme please tick here

Instructions: * a) For payments by demand draft of Rs. 50,000 & above, please attach proof of debit to your bank account by way of a copy of the DD request evidencing debit to your account or a letter from your banker confirming the account debited for issue of the DD. b) If the payment is not made from the investor's account, issuers of the payment instrument must complete a "3rd Party Declaration".

Acknowledgement Sl. No. _____

Received from _____ Pin _____

Scheme Name	Plan/Option	Payment Details
_____	<input type="checkbox"/> Lumpsum <input type="checkbox"/> Systematic Investment Plan	Amount _____ Cheque/DD No. _____ Date _____ Bank and Branch details _____

