

Application No.:

Distributor/RIA name and ARN/Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUIN (Refer note below)	For Office use only
ARN - 3280		SWSA		

I/We confirm that the EUIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.
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.

I am a First Time Investor in Mutual Fund Industry. I am an Existing Investor in Mutual Fund Industry.

Sole / First Applicant's Signature Mandatory

1. FIRST APPLICANT'S DETAILS

Name of First Applicant (Should match with PAN Card)		PAN (1st Applicant / Guardian)	<input type="checkbox"/> KYC
Existing Folio Number		Name of Guardian (if minor)/POA/Contact Person	PAN (POA) <input type="checkbox"/> KYC
On behalf of Minor	Date of Birth (* Attach Mandatory Documents as per instructions). Minor's	Date of Birth	Guardian named is :
		Proof attached * <input type="checkbox"/>	<input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court Appointed

2. CONTACT DETAILS AND CORRESPONDENCE ADDRESS (As per KYC records)

Email ID (in capital)	Tel (STD Code)		Address Type (Mandatory) <input type="checkbox"/> a. Residential & Business <input type="checkbox"/> b. Residential <input type="checkbox"/> c. Business <input type="checkbox"/> d. Registered Office
Mobile +91			
Address			
Landmark			
City	Pin Code (Mandatory)	State	

3. KYC DETAILS (Mandatory)

3a. Status of Sole/1st Applicant (Please tick ✓) Indian Resident Individual Minor (Resident) Minor (Repatriable) Minor (Non Repatriable)
 NRI (Repatriable) NRI (Non-Repatriable) PIO Sole Proprietorship HUF - Indian HUF - NRI Partnership Firm Limited Partnership (LLP) Public Ltd. Co.
 Private Ltd. Co. Body Corporate Bank Fls Insurance Companies Government Body AOP/BOI Trust Society Provident Fund
 Superannuation / Pension Fund Gratuity Fund Mutual Fund FI FPI-Category I/II/III FCRA GDN Defence Establishment NPS Trust
 Others _____ (Please specify)

Are you a Non-Profit Organization [NPO] or Company u/s 25 (Companies Act 1956) or u/s 8 of Companies, Act, 2013: Yes No

3b. Occupation Details (Please tick ✓) Private Sector Service Public Sector Service Government Service Business Professional
 Agriculturist Retired Housewife Student Forex Dealer Others _____ (Please specify)

3c. Gross Annual Income (Please tick ✓) Below 1 Lac 1-5 Lacs 5-10 Lacs 10-25 Lacs >25 Lacs-1 crore >1 crore
 Net-worth in (Mandatory for Non-Individuals) ₹ _____ as on DD / MM / YYYY (Not older than 1 year)

3d. For Individuals (Please tick ✓)
 Not Applicable I am Politically Exposed Person I am Related to Politically Exposed Person

4. JOINT APPLICANTS (IF ANY) DETAILS

Mode of Holding (Please tick ✓) Joint (Default) Anyone or Survivor

2nd Applicant Name (Should match with PAN Card)	PAN (2nd Applicant)	<input type="checkbox"/> KYC
a. Occupation Details (Please tick ✓) <input type="radio"/> Private Sector Service <input type="radio"/> Public Sector Service <input type="radio"/> Government Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Forex Dealer <input type="radio"/> Others _____ (Please specify)		
b. Gross Annual Income (Please tick ✓) <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore		
c. Others (Please tick ✓) <input type="radio"/> Not Applicable <input type="radio"/> Politically Exposed Person (PEP) <input type="radio"/> Related to a Politically Exposed Person (PEP)		
3rd Applicant Name (Should match with PAN Card)	PAN (3rd Applicant)	<input type="checkbox"/> KYC
a. Occupation Details (Please tick ✓) <input type="radio"/> Private Sector Service <input type="radio"/> Public Sector Service <input type="radio"/> Government Service <input type="radio"/> Business <input type="radio"/> Professional <input type="radio"/> Agriculturist <input type="radio"/> Retired <input type="radio"/> Housewife <input type="radio"/> Student <input type="radio"/> Forex Dealer <input type="radio"/> Others _____ (Please specify)		
b. Gross Annual Income (Please tick ✓) <input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore		
c. Others (Please tick ✓) <input type="radio"/> Not Applicable <input type="radio"/> Politically Exposed Person (PEP) <input type="radio"/> Related to a Politically Exposed Person (PEP)		

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

DSP BLACKROCK MUTUAL FUND

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

From

Scheme	Cheque no.	Amount
DSPBR		

Application No.

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

Sole/First Applicant/Guardian			2nd Applicant			<input type="checkbox"/> 3rd Applicant			<input type="checkbox"/> POA		
Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY	Place & Country of Birth	PLACE	COUNTRY
Nationality <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Other _____			Nationality <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Other _____			Nationality <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Other _____			Nationality <input type="checkbox"/> Indian <input type="checkbox"/> U.S. <input type="checkbox"/> Other _____		

Please indicate all Countries, other than India, in which you are a resident for tax purpose, associated Taxpayer Identification Number and it's Identification type eg. TIN etc.
 *If TIN is not available or mentioned, please mention reason as: 'A' if the country does not issue TINs to its residents; 'B' & mention why you are unable to obtain a TIN; 'C' if the authorities of the country of tax residence entered above do not require the TIN to be disclosed.

Country #	Tax Identification Number	Identification Type/Reason*	Country #	Tax Identification Number	Identification Type/Reason*	Country #	Tax Identification Number	Identification Type/Reason*
1			1			1		
2			2			2		
3			3			3		

6. BANK ACCOUNT DETAILS (Avail Multiple Bank Registration Facility)

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)

7. INVESTMENT AND PAYMENT DETAILS (Default plan/option/sub option will be applied incase of no information, ambiguity or discrepancy)

Cheque/DD should be in favour of: "DSP BlackRock Mutual Fund" if single cheque with multiple schemes OR "Scheme Name", in case of single scheme / scheme wise cheques.

One time Lumpsum Investment SIP: Systematic Investment Plan. Attach OTM form, if not already registered. Mention First SIP Cheque Details below and in SIP form.

Full Scheme/Plan/Option/Sub Option	Amount (₹)	Payment Mode: <input type="checkbox"/> Cheque <input type="checkbox"/> DD
1. DSPBR - Scheme Plan Option/Sub Option		<input type="checkbox"/> RTGS <input type="checkbox"/> NEFT <input type="checkbox"/> Funds transfer
2. DSPBR - Scheme Plan Option/Sub Option		Cheque/DD/RTGS/NEFT Details:
3. DSPBR - Scheme Plan Option/Sub Option		Ref. No. _____
Total	Amount in words _____ Amount in Figures _____	Date <input type="text"/> / <input type="text"/> / <input type="text"/> DD charges, if any _____

Payment from Bank A/c No. _____ Pay In A/c No. _____ A/c. Type Savings Current NRE NRO FCNR Others _____

Bank Name & Branch _____

Documents Attached to avoid Third Party Payment Rejection, where applicable: Bank Certificate, for DD Third Party Declarations

8. NOMINATION DETAILS Individuals (single or joint applicants) are advised to avail Nomination facility.

I/We wish to nominate. I/We DO NOT wish to nominate and sign here _____ 1st Applicant Signature (Mandatory)

	Nominee Name	Guardian Name (In case of Minor)	Allocation %	Nominee/ Guardian Signature
Nominee 1				
Nominee 2				
Nominee 3				
Address	Total = 100%			

9. UNIT HOLDING OPTION:

In Account Statement Mode (default): In Demat mode: NSDL: I N _____

Depository Participant (DP) ID (NSDL only) _____

Beneficiary Account Number (NSDL only) _____

CDSL: _____

Enclose for demat option:
 Client Master List
 Transaction/Holding Statement
 DIS Copy

10. DECLARATION & SIGNATURES

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund from time to time, I / We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme/Plan/Option and agree to abide by the terms and conditions, rules and regulations. I / We have understood the information requirements of the application form, including FATCA and CRS requirements, terms and conditions (read along with instructions and scheme related documents) and hereby accept the same and further confirm that the information provided by me/us on this form is true, correct, and complete. 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.

Sole / First Applicant / Guardian _____

Second Applicant _____

Third Applicant _____

POA holder, if any _____

Email: service@dspblackrock.com

Website: www.dspblackrock.com

Contact Centre: 1800 200 4499

- Quick Checklist**
- Name, Address are correctly mentioned
 - Email ID / Mobile number are mentioned
 - KYC information provided for each applicant
 - FATCA/CRS details provided for each applicant
 - Full scheme name, plan, option is mentioned
 - Pay-In bank details and supportings are attached
 - Nomination facility opted
 - Form is signed by all applicants
 - Additional documents provided if investor name is not pre-printed on payment cheque or if Demand Draft is used.
 - Non Individual investors should attach
 - FATCA Details and Declaration Form
 - UBO Declaration Form

Distributor / RIA Name and ARN / Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUIIN (Refer note below)	For Office use only
ARN - 3280		SWSA		

Name of Sole / First Unitholder (Leave space between first / middle / last name) Mr. Ms. M/s. Others _____ Folio Number _____

Scheme Name/Plan/Option*/Sub Option* **DSPBR -**

SYSTEMATIC INVESTMENT PLAN (SIP) POST DATED CHEQUES (PDC)
(Separate Cheque required for investment in different Scheme / Plan)
All Cheques should be of same date of the months / quarters.

Each SIP Amount (minimum Rs. 500) Rs. _____

SIP Date 1st 7th 10th 14th 15th 21st 25th 28th

Investment Frequency Monthly Quarterly

SIP Period From DD / MM / YY To DD / MM / YY
(Minimum 12 installments, 6 in case of DSPBR TaxSaver Fund)

Cheque Nos. From _____ To _____

Drawn on Bank _____

Branch _____ City _____

I/We confirm that the EUIIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

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.

Sole / FirstApplicant's Signature Mandatory

SYSTEMATIC TRANSFER PLAN (STP) (Please allow 7 days to register STP)

STP in To Scheme/Plan/Option*/Sub Option* **DSPBR -**

Transfer Amount Fixed Sum of Rs. _____ (Minimum Rs.500/-)
 Capital Appreciation, subject to Minimum of Rs.500/-

DIVIDEND TRANSFER PLAN (DTP) - ENROLMENT DETAILS
(Please allow 7 days to register DTP) (Refer Terms and Conditions)

(Please mention complete Scheme, Plan & Option)

Source Scheme (From where Dividend is to be transferred)
DSPBR -

To _____

Target Scheme (To where Dividend is to be transferred)
DSPBR -

STP DATES	FREQUENCY
<input type="checkbox"/> 1st* <input type="checkbox"/> 7th <input type="checkbox"/> 10th <input type="checkbox"/> 14th	<input type="checkbox"/> Monthly*
<input type="checkbox"/> 15th <input type="checkbox"/> 21st <input type="checkbox"/> 25th <input type="checkbox"/> 28th	<input type="checkbox"/> Quarterly

OR Daily

Transfer Period (Period to cover - minimum 6 STP transactions) From DD / MM / YY To DD / MM / YY

Investments done in schemes through STP will be treated as investments through SIP and the load structure for SIP will be applicable. * Default Option

SYSTEMATIC WITHDRAWAL PLAN (SWP) (Please allow 7 days to register SWP)

Withdrawal Amount Fixed Sum of Rs. _____ (Minimum Rs.500/-)
 Capital Appreciation, subject to Minimum of Rs.500/-

Withdrawal Date 1st* 7th 14th 21st 28th All five Dates

Frequency Monthly* Quarterly * Default Option

Withdrawal Period (Period to cover - minimum 6 SWP transactions) From DD / MM / YY To DD / MM / YY

DECLARATION & SIGNATURES (To be signed as per Mode of Holding)

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund, 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 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. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. 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.

If EUIIN is left blank/not mentioned; I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Sole / First Unit Holder
Second Unit Holder
Third Unit Holder
POA Holder, if any

INSTRUCTIONS

This form should be used by existing investors only by mentioning their folio number, name and Scheme details. Please read the Scheme related documents, Addenda, KIM and Instructions there-in and below mentioned instructions carefully before filling up the form. Investors should provide details/instructions only in the designated space provided in the form else the same may not be considered.

ADDITIONAL PURCHASE & PAYMENT DETAILS: Investors should fill name of the scheme, plan, option and sub-option. In case the details are not proper and clear or in case of incomplete details, non-clarity or ambiguity, default options will be considered and applied. Where the investor gives separate cheque/s for investments in separate scheme/s, each such cheque should be favouring the scheme name and crossed as Account Payee. Where the investor gives a single consolidated cheque for investments in more than one scheme such cheque should be crossed as Account Payee and drawn in favour of 'DSP BlackRock Mutual Fund'. Where the investor gives a cheque for an amount more than Rs 2 lakhs and wishes to do a fund transfer banking (in the banks supported by the fund) cheque should be drawn in favour of ' DSP BlackRock Mutual Fund Collection Account'.

The first unit holder should be one of the bank account holders in the pay-in bank account. Purchase application through Cheque/DD/RTGS/NEFT/Funds transfer requests should necessarily mention the pay-in bank account details i.e. account number and bank, branch name of the bank account used for issuing the payments to the fund. If this is not evidenced on the payment cheque/funds transfer/RTGS/NEFT request, or in case of demand drafts, unit holder should attach necessary supporting documents as required by the fund, like bank certificate, bank passbook copy or statement to prove that the funds are from a bank account held by first unit holder only. If the documents are not submitted with the application, the fund reserves the right to reject the application or call for additional details. Investors are advised to visit www.dsblackrock.com for details on documents, restrictions on third party payments or approach any of the offices of the fund.

ADDITIONAL PURCHASE THROUGH OTM FACILITY: If you are making payment through OTM facility registered in your folio, please tick the relevant box and do not attach any cheque. If more than one bank accounts are registered in your folio under OTM facility, please mention the bank account number and bank name where you wish the debit to happen. If the same is not mentioned or is not registered, default bank mandate under OTM facility will be considered to debit the purchase amount.

KYC COMPLIANCE: Investors shall note that KYC is mandatory and they need to comply with the 'Know Your Client' requirements as applicable from time to time. For more information on KYC, please log on to www.dsblackrock.com / www.amfiindia.com before investing. Applications are liable to be rejected without any intimation to the applicants, if required KYC compliance is not completed by all the applicants/unit holders.

REDEMPTION REQUEST: Redemption may not be processed if folio number and full scheme name including plan and option is not mentioned. Please ensure that either of amount or units is mentioned in the redemption request. The fund offers a facility to register multiple bank accounts and designate one of the bank account as "Default Bank Account". Default Bank Account will be used for all dividends and redemptions payouts including FMP schemes maturity proceeds unless investor specifies one of the existing registered bank account in the redemption request for receiving redemption proceeds. A new non-registered bank account specified in the specific redemption request for receiving redemption proceeds will not be considered. Consequent to introduction of "Multiple Bank Accounts Facility", the existing facility of redemption with change of bank mandate is discontinued by the fund. New bank accounts can only be registered using the designated "Bank Account Registration Form".

BANK ACCOUNT FOR REDEMPTION PROCEEDS: Please note the following important points related to payment of redemption proceeds: a) Proceeds of any redemption request will be sent only to a bank account that is already registered and validated in the folio at the time of redemption transaction processing. b) Unit holder(s) may choose to mention any of the existing registered bank accounts with redemption request for receiving redemption proceeds. If no registered bank account is mentioned, default bank account will be used. c) If unit holder(s) provide a new and unregistered bank mandate with a specific redemption request (with or without necessary supporting documents) such bank account will not be considered for payment of redemption proceeds.

POA REGISTRATION: Only a General Power of Attorney agreement without any restrictions and perennal validity is accepted. The PoA must be executed on stamp paper and registered in India and a duly notarized copy should be enclosed. The PoA must have signatures of the investor as well the POA holder. If the signature of POA holder is not available, the fund may call for additional documents or declarations on a case to case basis. PoA will be registered within 10 working days of receipt of all valid documents.

SYSTEMATIC INVESTMENT PLAN (SIP) / SYSTEMATIC WITHDRAWAL PLAN (SWP): Please allow upto 7 days for STP/ SWP to be registered and first STP/ SWP transaction to happen. Hence form should be submitted atleast 7 days before STP / SWP start date. STP/ SWP is available in all the schemes of the Fund. Please note the default options highlighted in the form which will be used in case of incorrect details in the form. For investors availing the transfer/ withdrawal of 'appreciation' option, where in any week, month or quarter, there is no appreciation or is less than Rs.500/-, switch/withdrawal as mentioned above, may not be carried out. You can choose to discontinue this facility by giving 30 days written notice to the Registrar.

DIVIDEND TRANSFER PLAN (DTP): Please allow upto 7 days for DTP to be registered. Hence form should be submitted atleast 7 days before the record date of any forthcoming proposed dividend. Please refer to www.dsblackrock.com > Services > Dividend Transfer Plan for list of Source Scheme, Target Schemes and detailed terms and conditions. The Minimum amount of dividend eligible for transfer under Dividend Transfer Plan is Rs. 500/-.

Distributor / RIA Name and ARN / Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUN (Refer note below)	For Office use only
ARN - 3280		SWSA		

Name of Sole / First Unitholder (Leave space between first / middle / last name) Mr. Ms. M/s. Others _____ Folio Number _____

Scheme Name/Plan/Option*/Sub Option* **DSPBR -**

SYSTEMATIC INVESTMENT PLAN (SIP) POST DATED CHEQUES (PDC)

(Separate Cheque required for investment in different Scheme / Plan)
All Cheques should be of same date of the months / quarters.

Each SIP Amount (minimum Rs. 500) Rs. _____

SIP Date 1st 7th 10th 14th 15th 21st 25th 28th

Investment Frequency Monthly Quarterly

SIP Period From DD / MM / YY To DD / MM / YY

(Minimum 12 installments, 6 in case of DSPBR TaxSaver Fund)

Cheque Nos. From _____ To _____

Drawn on Bank _____

Branch _____ City _____

SYSTEMATIC TRANSFER PLAN (STP) (Please allow 7 days to register STP)

STP in To Scheme/Plan/Option*/Sub Option*

DSPBR -

Transfer Amount Fixed Sum of Rs. _____ (Minimum Rs.500/-)

Capital Appreciation, subject to Minimum of Rs.500/-

STP DATES	FREQUENCY
<input type="checkbox"/> 1st* <input type="checkbox"/> 7th <input type="checkbox"/> 10th <input type="checkbox"/> 14th	<input type="checkbox"/> Monthly*
<input type="checkbox"/> 15th <input type="checkbox"/> 21st <input type="checkbox"/> 25th <input type="checkbox"/> 28th	<input type="checkbox"/> Quarterly

OR Daily

Transfer Period (Period to cover - minimum 6 STP transactions) From DD / MM / YY To DD / MM / YY

Investments done in schemes through STP will be treated as investments through SIP and the load structure for SIP will be applicable. * Default Option

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(Please mention complete Scheme, Plan & Option)

Source Scheme (From where Dividend is to be transferred)

DSPBR -

To

Target Scheme (To where Dividend is to be transferred)

DSPBR -

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Withdrawal Amount Fixed Sum of Rs. _____ (Minimum Rs.500/-)

Capital Appreciation, subject to Minimum of Rs.500/-

Withdrawal Date 1st* 7th 14th 21st 28th All five Dates

Frequency Monthly* Quarterly * Default Option

Withdrawal Period (Period to cover - minimum 6 SWP transactions) From DD / MM / YY To DD / MM / YY

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Sole / First Unit Holder	Second Unit Holder	Third Unit Holder	POA Holder, if any
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KYC COMPLIANCE: Investors shall note that KYC is mandatory and they need to comply with the 'Know Your Client' requirements as applicable from time to time. For more information on KYC, please log on to www.dsblackrock.com / www.amfiindia.com before investing. Applications are liable to be rejected without any intimation to the applicants, if required KYC compliance is not completed by all the applicants/unit holders.

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POA REGISTRATION: Only a General Power of Attorney agreement without any restrictions and perennal validity is accepted. The PoA must be executed on stamp paper and registered in India and a duly notarized copy should be enclosed. The PoA must have signatures of the investor as well the POA holder. If the signature of POA holder is not available, the fund may call for additional documents or declarations on a case to case basis. PoA will be registered within 10 working days of receipt of all valid documents.

SYSTEMATIC INVESTMENT PLAN (SIP) / SYSTEMATIC WITHDRAWAL PLAN (SWP): Please allow upto 7 days for STP/ SWP to be registered and first STP/ SWP transaction to happen. Hence form should be submitted atleast 7 days before STP / SWP start date. STP/ SWP is available in all the schemes of the Fund. Please note the default options highlighted in the form which will be used in case of incorrect details in the form. For investors availing the transfer/ withdrawal of 'appreciation' option, where in any week, month or quarter, there is no appreciation or is less than Rs.500/-, switch/withdrawal as mentioned above, may not be carried out. You can choose to discontinue this facility by giving 30 days written notice to the Registrar.

DIVIDEND TRANSFER PLAN (DTP): Please allow upto 7 days for DTP to be registered. Hence form should be submitted atleast 7 days before the record date of any forthcoming proposed dividend. Please refer to www.dsblackrock.com > Services > Dividend Transfer Plan for list of Source Scheme, Target Schemes and detailed terms and conditions. The Minimum amount of dividend eligible for transfer under Dividend Transfer Plan is Rs. 500/-.

Distributor / RIA Name and ARN / Code	Sub Broker ARN & Name	Sub Broker/Branch/RM Internal Code	EUN (Refer note below)	For Office use only
ARN - 3280		SWSA		

Name of Sole / First Unitholder (Leave space between first / middle / last name) Mr. Ms. M/s. Others _____ Folio Number _____

Scheme Name/Plan/Option*/Sub Option* **DSPBR -**

SYSTEMATIC INVESTMENT PLAN (SIP) POST DATED CHEQUES (PDC)
 (Separate Cheque required for investment in different Scheme / Plan)
 All Cheques should be of same date of the months / quarters.

Each SIP Amount (minimum Rs. 500) Rs. _____

SIP Date 1st 7th 10th 14th 15th 21st 25th 28th

Investment Frequency Monthly Quarterly

SIP Period From DD / MM / YY To DD / MM / YY
 (Minimum 12 installments, 6 in case of DSPBR TaxSaver Fund)

Cheque Nos. From _____ To _____

Drawn on Bank _____

Branch _____ City _____

I/We confirm that the EUN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

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.

Sole / FirstApplicant's Signature Mandatory

SYSTEMATIC TRANSFER PLAN (STP) (Please allow 7 days to register STP)

STP in To Scheme/Plan/Option*/Sub Option* **DSPBR -**

Transfer Amount Fixed Sum of Rs. _____ (Minimum Rs.500/-)
 Capital Appreciation, subject to Minimum of Rs.500/-

DIVIDEND TRANSFER PLAN (DTP) - ENROLMENT DETAILS
 (Please allow 7 days to register DTP) (Refer Terms and Conditions)

(Please mention complete Scheme, Plan & Option)

Source Scheme (From where Dividend is to be transferred)
DSPBR -

To _____

Target Scheme (To where Dividend is to be transferred)
DSPBR -

STP DATES	FREQUENCY
<input type="checkbox"/> 1st* <input type="checkbox"/> 7th <input type="checkbox"/> 10th <input type="checkbox"/> 14th	<input type="checkbox"/> Monthly*
<input type="checkbox"/> 15th <input type="checkbox"/> 21st <input type="checkbox"/> 25th <input type="checkbox"/> 28th	<input type="checkbox"/> Quarterly

OR Daily

Transfer Period (Period to cover - minimum 6 STP transactions) From DD / MM / YY To DD / MM / YY

Investments done in schemes through STP will be treated as investments through SIP and the load structure for SIP will be applicable. * Default Option

SYSTEMATIC WITHDRAWAL PLAN (SWP) (Please allow 7 days to register SWP)

Withdrawal Amount Fixed Sum of Rs. _____ (Minimum Rs.500/-)
 Capital Appreciation, subject to Minimum of Rs.500/-

Withdrawal Date 1st* 7th 14th 21st 28th All five Dates

Frequency Monthly* Quarterly * Default Option

Withdrawal Period (Period to cover - minimum 6 SWP transactions) From DD / MM / YY To DD / MM / YY

DECLARATION & SIGNATURES (To be signed as per Mode of Holding)

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund, 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 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. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. 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.

If EUN is left blank/not mentioned; I/We hereby confirm that the EUN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Sole / First Unit Holder	Second Unit Holder	Third Unit Holder	POA Holder, if any

INSTRUCTIONS

This form should be used by existing investors only by mentioning their folio number, name and Scheme details. Please read the Scheme related documents, Addenda, KIM and Instructions there-in and below mentioned instructions carefully before filling up the form. Investors should provide details/instructions only in the designated space provided in the form else the same may not be considered.

ADDITIONAL PURCHASE & PAYMENT DETAILS: Investors should fill name of the scheme, plan, option and sub-option. In case the details are not proper and clear or in case of incomplete details, non-clarity or ambiguity, default options will be considered and applied. Where the investor gives separate cheque/s for investments in separate scheme/s, each such cheque should be favouring the scheme name and crossed as Account Payee. Where the investor gives a single consolidated cheque for investments in more than one scheme such cheque should be crossed as Account Payee and drawn in favour of 'DSP BlackRock Mutual Fund'. Where the investor gives a cheque for an amount more than Rs 2 lakhs and wishes to do a fund transfer banking (in the banks supported by the fund) cheque should be drawn in favour of ' DSP BlackRock Mutual Fund Collection Account'.

The first unit holder should be one of the bank account holders in the pay-in bank account. Purchase application through Cheque/DD/RTGS/NEFT/Funds transfer requests should necessarily mention the pay-in bank account details i.e. account number and bank, branch name of the bank account used for issuing the payments to the fund. If this is not evidenced on the payment cheque/funds transfer/RTGS/NEFT request, or in case of demand drafts, unit holder should attach necessary supporting documents as required by the fund, like bank certificate, bank passbook copy or statement to prove that the funds are from a bank account held by first unit holder only. If the documents are not submitted with the application, the fund reserves the right to reject the application or call for additional details. Investors are advised to visit www.dsblackrock.com for details on documents, restrictions on third party payments or approach any of the offices of the fund.

ADDITIONAL PURCHASE THROUGH OTM FACILITY: If you are making payment through OTM facility registered in your folio, please tick the relevant box and do not attach any cheque. If more than one bank accounts are registered in your folio under OTM facility, please mention the bank account number and bank name where you wish the debit to happen. If the same is not mentioned or is not registered, default bank mandate under OTM facility will be considered to debit the purchase amount.

KYC COMPLIANCE: Investors shall note that KYC is mandatory and they need to comply with the 'Know Your Client' requirements as applicable from time to time. For more information on KYC, please log on to www.dsblackrock.com / www.amfiindia.com before investing. Applications are liable to be rejected without any intimation to the applicants, if required KYC compliance is not completed by all the applicants/unit holders.

REDEMPTION REQUEST: Redemption may not be processed if folio number and full scheme name including plan and option is not mentioned. Please ensure that either of amount or units is mentioned in the redemption request. The fund offers a facility to register multiple bank accounts and designate one of the bank account as "Default Bank Account". Default Bank Account will be used for all dividends and redemptions payouts including FMP schemes maturity proceeds unless investor specifies one of the existing registered bank account in the redemption request for receiving redemption proceeds. A new non-registered bank account specified in the specific redemption request for receiving redemption proceeds will not be considered. Consequent to introduction of "Multiple Bank Accounts Facility", the existing facility of redemption with change of bank mandate is discontinued by the fund. New bank accounts can only be registered using the designated "Bank Account Registration Form".

BANK ACCOUNT FOR REDEMPTION PROCEEDS: Please note the following important points related to payment of redemption proceeds: a) Proceeds of any redemption request will be sent only to a bank account that is already registered and validated in the folio at the time of redemption transaction processing. b) Unit holder(s) may choose to mention any of the existing registered bank accounts with redemption request for receiving redemption proceeds. If no registered bank account is mentioned, default bank account will be used. c) If unit holder(s) provide a new and unregistered bank mandate with a specific redemption request (with or without necessary supporting documents) such bank account will not be considered for payment of redemption proceeds.

POA REGISTRATION: Only a General Power of Attorney agreement without any restrictions and perennial validity is accepted. The PoA must be executed on stamp paper and registered in India and a duly notarized copy should be enclosed. The PoA must have signatures of the investor as well the POA holder. If the signature of POA holder is not available, the fund may call for additional documents or declarations on a case to case basis. PoA will be registered within 10 working days of receipt of all valid documents.

SYSTEMATIC INVESTMENT PLAN (SIP) / SYSTEMATIC WITHDRAWAL PLAN (SWP): Please allow upto 7 days for STP/ SWP to be registered and first STP/ SWP transaction to happen. Hence form should be submitted atleast 7 days before STP / SWP start date. STP/ SWP is available in all the schemes of the Fund. Please note the default options highlighted in the form which will be used in case of incorrect details in the form. For investors availing the transfer/ withdrawal of 'appreciation' option, where in any week, month or quarter, there is no appreciation or is less than Rs.500/-, switch/withdrawal as mentioned above, may not be carried out. You can choose to discontinue this facility by giving 30 days written notice to the Registrar.

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Switch Transaction Form

Date: _____

ARN: 3280 Sundaram Finance Limited	Sub Broker ARN: -----	Sub Agent Code: SWSA	EUIN:
--	---------------------------------	--------------------------------	--------------

Investor Name:

Mutual Fund / AMC Name:

Folio No. :

PAN (1st Holder) :

Switch Request:			
I /We wish to Switch Rs. _____		Or _____ Units	
From	Scheme:		
To	Scheme:		

*I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction".
If my/our unit/amount balance is inadequate to meet the request, I/We authorize you to switch out available units subject to minimum amount requirements of the Switch-In scheme.*

I/We have read and understood the contents of the Scheme Information Document(s), Key Information Memorandum and Addenda issued for the respective scheme(s). I/We hereby apply to the Trustee of the Mutual Fund and agree to abide by the terms and conditions, rules and regulations of the relevant scheme(s)/Mutual Fund(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable for the different competing Schemes of various Mutual Funds from amongst which this Scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered / communicated any indicative portfolio and/or any indicative yield by the respective Mutual Fund / its distributor for this investment. I/We am/are authorized to undertake this transaction.

Any other advisory charges shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

Note: Redemption/Switching of units is subject to realization of funds in the scheme by way of payment instrument / transfer or switch-in funding process.



Signature (1st Holder)

Signature (2nd Holder)

Signature (3rd Holder)

Switch Transaction Form

Date: _____

ARN: 3280 Sundaram Finance Limited	Sub Broker ARN: -----	Sub Agent Code: SWSA	EUIN:
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Folio No:

PAN (1st Holder):

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From	Scheme:		
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I/We have read and understood the contents of the Scheme Information Document(s), Key Information Memorandum and Addenda issued for the respective scheme(s). I/We hereby apply to the Trustee of the Mutual Fund and agree to abide by the terms and conditions, rules and regulations of the relevant scheme(s)/Mutual Fund(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable for the different competing Schemes of various Mutual Funds from amongst which this Scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered / communicated any indicative portfolio and/or any indicative yield by the respective Mutual Fund / its distributor for this investment. I/We am/are authorized to undertake this transaction.

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Folio No. :

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From Scheme:	
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From Scheme:	
To Scheme:	

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Switch Transaction Form

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From	Scheme:		
To	Scheme:		

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I/We have read and understood the contents of the Scheme Information Document(s), Key Information Memorandum and Addenda issued for the respective scheme(s). I/We hereby apply to the Trustee of the Mutual Fund and agree to abide by the terms and conditions, rules and regulations of the relevant scheme(s)/Mutual Fund(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable for the different competing Schemes of various Mutual Funds from amongst which this Scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered / communicated any indicative portfolio and/or any indicative yield by the respective Mutual Fund / its distributor for this investment. I/We am/are authorized to undertake this transaction.

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Signature (3rd Holder)

Switch Transaction Form

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Investor Name:

Mutual Fund / AMC Name:

Folio No:

PAN (1st Holder):

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From	Scheme:		
To	Scheme:		

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I/We have read and understood the contents of the Scheme Information Document(s), Key Information Memorandum and Addenda issued for the respective scheme(s). I/We hereby apply to the Trustee of the Mutual Fund and agree to abide by the terms and conditions, rules and regulations of the relevant scheme(s)/Mutual Fund(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable for the different competing Schemes of various Mutual Funds from amongst which this Scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered / communicated any indicative portfolio and/or any indicative yield by the respective Mutual Fund / its distributor for this investment. I/We am/are authorized to undertake this transaction.

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Investor Name:

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Switch Transaction Form

Date: _____

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Mutual Fund / AMC Name:

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Switch Transaction Form

Date: _____

ARN: 3280 Sundaram Finance Limited	Sub Broker ARN: -----	Sub Agent Code: SWSA	EUIN:
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*I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction".
If my/our unit/amount balance is inadequate to meet the request, I/We authorize you to switch out available units subject to minimum amount requirements of the Switch-In scheme.*

I/We have read and understood the contents of the Scheme Information Document(s), Key Information Memorandum and Addenda issued for the respective scheme(s). I/We hereby apply to the Trustee of the Mutual Fund and agree to abide by the terms and conditions, rules and regulations of the relevant scheme(s)/Mutual Fund(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable for the different competing Schemes of various Mutual Funds from amongst which this Scheme is being recommended to me/us. I/We hereby confirm that I/we have not been offered / communicated any indicative portfolio and/or any indicative yield by the respective Mutual Fund / its distributor for this investment. I/We am/are authorized to undertake this transaction.

Any other advisory charges shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

Note: Redemption/Switching of units is subject to realization of funds in the scheme by way of payment instrument / transfer or switch-in funding process.



Signature (1st Holder)

Signature (2nd Holder)

Signature (3rd Holder)

Redemption Transaction Form

Date: _____

ARN: 3280 Sundaram Finance Limited	Sub Broker ARN: -----	Sub Agent Code: SWSA	EUIN:
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Investor Name:

Mutual Fund / AMC Name:

Folio No. :

PAN (1st Holder) :

Redemption Request: I /We wish to redeem Rs. _____ Or _____ Units From Scheme:

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