

## MEHTA EQUITIES LTD CLIENT CODE:



Broker/ Agent code ARN:		SUB-BROK	SUB-BROKER:		EUIN:		
Unit Holder informat		l.					
Name Of First Applic	cant:						
Pan Number:		KYC:		Date of B	irth:		
Father Name:		1	Mother Name:				
Name of Guardian:					Pan:		
Contact Address:					T GIT.		
OUTHOUT AND 1833.							
City:	Pincode:	State:				Country:	
Tel. (Off):		Tel.(Res):		Email:			
Fax (Off) Fax (Res):					Mobile		
Income Tax Slab/Networth:					Occupation Details:		
Place of Birth:					Country of Tax Residence:		
Tax Id No.:							
Politically exposed person / Related to Politically exposed person				? Yes No			
Mode of Holding:					Occupation :		
Name of Second Applicant :							
PAN Number : KYC:					Date of Birth :		
Income Tax Slab/Networth :				Occupation Details			
Place of Birth : Country of Tax Residence :							
Tax Id No. :							
Politically exposed person / Related to Politically exposed person etc.? Yes						No	
Name of Third Applicant :							
PAN Number :					KYC: Date of Birth:		
Income Tax Slab/Networth :					Occupation Details		
Place of Birth:					Country of Tax Residence :		
Tax Id No. :							
Politically exposed person / Related to Politically exposed person etc.? Yes No							
Other Details of Sole/ 1st Applicant							
Overseas Address : (In case of NRI investor)							
	(						
City:		Pincode:		Country:			
Bank Mandate Details							
Name of Bank :					Branch:		
A/C No. :					IFSC Code:		
Bank Address :							
City:		Pincode :		State :		Country:	
Nomination Details							
Nominee Name :					Relationship:		
Guardian Name (If Nominee is Minor) :							
Nominee Address :							
Nominico Address .							
City:		Pincode :			State :		
	naturo	i incode .			Otato .		
Declaration and Signature							
I/We confirm that details provided by me/us are true and correct. The ARN holder has to disclosed to me/us all the commission (In the form of trail commission or any other mode),payable him for the different competing							
Schemes of various Mutual Funds From amongst which the scheme is being recommended to me/us.							
Date :					Place:		
Dale.				riace.			
1st applicant Signatur	e:	2nd applicant Signatu	ıre :	3rd applic	cant Signat	ure:	

NACH/ECS/AUTO DEBIT MANDATE INSTRUCTION FORM Tick (~)  Sponsor Bank Code	Utility Code Date D D M M Y Y Y Y					
CREATE	to debit (tick 🗸) SB/CA/CC/SB-NRE/SB-NRO/Other					
CANCEL Bank a/c number						
with Bank IFSC IFSC	or MICR					
an amount of Rupees	₹					
FREQUENCY Mthly Qtly H-Yrly Yrly As & when presented	DEBIT TYPE Fixed Amount V Maximum Amount					
Reference 1 (Mandate Reference No.)	Phone No.					
Reference 2 (Unique Client Code-UCC)	Email ID					
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.						
PERIOD From						
Or Until Cancelled 12.	3					
- This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/ Corporate to debit my account, based on the instructions as agreed and signed by me I have understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User entity/ Corporate or the bank where I have authorized the debit.						