



Application Form for Equity, Balanced, MIP and ELSS Schemes

HDFC GROWTH FUND • HDFC EQUITY FUND • HDFC TOP 200 FUND • HDFC CAPITAL BUILDER FUND
HDFC BALANCED FUND • HDFC PRUDENCE FUND • HDFC LONG TERM ADVANTAGE FUND (an open - ended equity linked savings scheme with a lock-in period of 3 years) • HDFC TAXSAVER (an open - ended equity linked savings scheme with a lock-in period of 3 years) • HDFC INDEX FUND • HDFC CORE & SATELLITE FUND
HDFC PREMIER MULTI-CAP FUND • HDFC MF MONTHLY INCOME PLAN (an open-ended income scheme. Monthly income is not assured and is subject to availability of distributable surplus)

CEQ

Continuing a tradition of trust.

Investors must read the Key Information Memorandum and the instructions before completing this Form.

1. KEY PARTNER / AGENT INFORMATION

Name and AMFI Reg. No. (ARN)	Sub Agent's Name and ARN
ARN- KETAN SAMPAT ARN - 12673	

FOR OFFICE USE ONLY

2. EXISTING UNIT HOLDER INFORMATION (Please fill in your Folio No. and all other details in the Application Form - refer Instruction 2)

Folio No. _____ / _____

3. STATUS (of First/Sole Applicant) [Please tick (✓)]

<input type="checkbox"/> Individual	<input type="checkbox"/> NRI	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> HUF	<input type="checkbox"/> AOP	<input type="checkbox"/> Company	<input type="checkbox"/> FIs
<input type="checkbox"/> Minor through guardian	<input type="checkbox"/> BOI	<input type="checkbox"/> Body Corporate	
<input type="checkbox"/> Society / Club	<input type="checkbox"/> Others _____ (please specify)		

MODE OF HOLDING [Please tick (✓)]

<input type="checkbox"/> Single
<input type="checkbox"/> Joint
<input type="checkbox"/> Anyone or Survivor

OCCUPATION (of First/Sole Applicant) [Please tick (✓)]

<input type="checkbox"/> Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional
<input type="checkbox"/> Housewife	<input type="checkbox"/> Business	<input type="checkbox"/> Retired
<input type="checkbox"/> Agriculture		
<input type="checkbox"/> Others _____ (please specify)		

4. UNIT HOLDER INFORMATION (refer instruction 3)

DATE OF BIRTH

NAME OF FIRST / SOLE APPLICANT

Mr. Ms. M/s. _____ DD MM YYYY

PAN* (mandatory if amount invested is Rs. 50,000 or more)

ENCLOSED PAN Proof Form 60 Form 61

NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / CONTACT PERSON - DESIGNATION (in case of non-individual Investors)

Mr. Ms. _____

PAN* (mandatory if amount invested is Rs. 50,000 or more)

ENCLOSED PAN Proof Form 60 Form 61

NAME OF THE SECOND APPLICANT [Please tick (✓)] Resident NRI

Mr. Ms. _____

PAN* (mandatory if amount invested is Rs. 50,000 or more)

ENCLOSED PAN Proof Form 60 Form 61

NAME OF THE THIRD APPLICANT [Please tick (✓)] Resident NRI

Mr. Ms. _____

PAN* (mandatory if amount invested is Rs. 50,000 or more)

ENCLOSED PAN Proof Form 60 Form 61

(* refer instruction 13 on 'Permanent Account Number')

MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O. Box Address may not be sufficient)

CITY _____ STATE _____ PIN CODE _____

OVERSEAS ADDRESS (in case of NRIs/FIs) (P.O. Box Address may not be sufficient)

CONTACT DETAILS OF FIRST / SOLE APPLICANT

Telephone : Off. _____ Res. _____ Mobile _____

Fax _____ E-mail _____

I N B L O C K L E T T E R S

5. BANK ACCOUNT DETAILS (refer instruction 4) Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details

Name of the Bank _____ Branch _____

Account No. _____ Bank City _____

Account Type [Please tick (✓)] SAVINGS CURRENT NRE NRO FCNR

6. E-MAIL COMMUNICATION (refer instruction 7) I/We wish to receive the following documents via e-mail in lieu of physical document(s) [Please tick (✓)]

Account Statement Newsletter Annual Report Other Statutory Information

7. ELECTRONIC CLEARING SERVICE (ECS) (refer instruction 8)

You may choose to receive dividend, if declared, in your bank account through the Electronic Clearing Service. The 9 digit MICR Code number of my/our Bank & Branch is :

I / We authorise HDFC Mutual Fund to credit my / our dividend through ECS. Please (✓) _____

(The 9 digit code appears on your cheque next to the cheque number)

8. PERSONAL IDENTIFICATION NUMBER (PIN) (refer instruction 10)

Do you want a PIN assigned ? Yes No

... continued overleaf

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

HDFC MUTUAL FUND

Head office : Ramon House, 3rd Floor, H.T. Parekh Marg, 169, Backbay Reclamation, Churchgate, Mumbai 400020

CEQ

Date :

Received from Mr. / Ms. / M/s. _____
an application for Purchase of Units of HDFC Growth Fund HDFC Equity Fund HDFC Top 200 Fund HDFC Capital Builder Fund
 HDFC Balanced Fund HDFC Prudence Fund HDFC Long Term Advantage Fund HDFC TaxSaver HDFC Index Fund
 HDFC Core & Satellite Fund HDFC Premier Multi-Cap Fund HDFC MF Monthly Income Plan

alongwith Cheque / DD as detailed overleaf. Please Note : All Purchases are subject to realisation of cheques / demand drafts.

ISC Stamp & Signature

9. INVESTMENT DETAILS – Please (✓) Choice of Scheme / Plan / Option (refer instruction 5)

<input type="checkbox"/> HDFC Growth Fund <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC Equity Fund <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC Top 200 Fund <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment	
<input type="checkbox"/> HDFC Capital Builder Fund <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC Balanced Fund <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC Prudence Fund <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment	
<input type="checkbox"/> HDFC Long Term Advantage Fund (Lock-in Period : 3 years) <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC TaxSaver (Lock-in Period : 3 years) <input type="checkbox"/> Growth Plan <input type="checkbox"/> Dividend Plan <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC Index Fund <input type="checkbox"/> SENSEX Plan <input type="checkbox"/> Nifty Plan <input type="checkbox"/> SENSEX Plus Plan Growth Option only	
<input type="checkbox"/> HDFC Core & Satellite Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC Premier Multi-Cap Fund <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment		<input type="checkbox"/> HDFC MF Monthly Income Plan <input type="checkbox"/> Short Term Plan <input type="checkbox"/> Long Term Plan <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Monthly <input type="radio"/> Quarterly <input type="radio"/> Monthly <input type="radio"/> Quarterly <input type="radio"/> Payout <input type="radio"/> Payout <input type="radio"/> Payout <input type="radio"/> Payout <input type="radio"/> Reinvestment <input type="radio"/> Reinvestment <input type="radio"/> Reinvestment <input type="radio"/> Reinvestment	

10. PAYMENT DETAILS (refer instruction 6)

Scheme Name	Plan	Option
Cheque / DD No.	Cheque / DD Date	
Amount of Cheque/DD in figures (Rs.) (i)	Drawn on (Bank /	
DD charges, if any, in figures (Rs.) (ii)	Branch Name)	
Total Amount (i) + (ii)	in figures (Rs.)	
	in words	
Account Type [Please (✓)]	<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR	

11. NOMINATION (refer instruction 12)

I / We do hereby nominate the person more particularly described hereunder to receive the amount to my / our credit in event of my / our death.

NOMINEE DETAILS

Name :	_____	The Nominee is a minor	_____
Address :	_____	whose guardian is	_____
Date of Birth :	_____	Address of the Guardian	_____
Relationship :	_____	Signature of the Guardian	_____
(to be furnished in case the Nominee is a minor)		(to be deleted if not applicable)	

Note : The Nomination shall supercede previous nomination, if any.

12. DOCUMENTS ENCLOSED (Please ✓)

Memorandum & Articles of Association
 Trust Deed Bye-Laws Partnership Deed
 Resolution / Authorisation to invest
 List of Authorised Signatories with Specimen Signature(s)
 Power of Attorney

APPLICATIONS ENCLOSED (Please ✓)

Systematic Investment Plan
 Cheques
 SIP Auto Debit Facility

13. DIRECT CREDIT OF REDEMPTION / DIVIDEND PROCEEDS - IF ANY (refer instruction 9)

Unit holders having bank accounts with **ABN AMRO Bank NV, Citibank N.A, Centurion Bank of Punjab Ltd., Deutsche Bank AG, HDFC Bank Limited, The Hongkong and Shanghai Banking Corporation, ICICI Bank Limited, IDBI Bank Limited, Kotak Mahindra Bank Ltd., Standard Chartered Bank, UTI Bank Limited** will receive their redemption / dividend proceeds (if any) directly into their bank account.
 In case you wish to receive a cheque / demand draft, please indicate your preference below :
 I / We want to receive the redemption / dividend proceeds (if any) by way of a cheque / demand draft instead of direct credit into my / our bank account. (Please ✓ in this box)

14. DECLARATIONS & SIGNATURE/S (refer instruction 11)

I / We have read and understood the terms and contents of the Offer Documents of the respective Scheme(s) of HDFC Mutual Fund. I / We hereby apply to the Trustee of HDFC Mutual Fund for allotment of Units of the Scheme(s) of HDFC Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I / We have understood the details of the Scheme(s) and I / we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.

Applicable to NRIs only :
 I / We confirm that I am / We are Non-Resident of Indian Nationality / Origin and I / We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my / our Non-Resident External / Ordinary Account / FCNR Account.

Please (✓) Yes No
 If yes, (✓) Repatriation basis Non-repatriation basis

DD	MM	YYYY

SIGNATURE / S	First / Sole Applicant / Guardian	_____
	Second Applicant	_____
	Third Applicant	_____

Particulars	SCHEME NAME / PLAN / OPTION
Scheme Name / Plan / Option	
Cheque / DD No. / Date	
Drawn on (Name of Bank and Branch)	
Amount in figures (Rs.)	