

Advisor ARN	132061	Representative EUIN	E352389
Sub-broker ARN		Sub-broker/Branch Code	

The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder.

"I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."

Signature: First Holder/Sole applicant **X** Second Holder **X** Third Holder **X**

Transaction Charges (Refer Instruction)

Applicable for transactions routed through distributors/agents/brokers who have opted to receive transaction charges. For an existing mutual funds investor Rs.100 will be deducted

Existing Unitholder Information

Name of Sole / First Account holder (Leave space between first/middle/last name) Account No. _____

Customer Folio No. _____

Please read Product labeling details available on cover page of SID and KIM and instructions before filling this Form.

Redemption

Scheme _____ Account No. _____ Please redeem my/our Franklin Templeton units as per following details.

Amount (in figures) _____ Amount (in words) _____

Units (in figures) _____ Units (in words) _____ Please fill any one i.e. either Amount or number of Units.

Switch

(Source Scheme) (DOB: ____/____/____, Mandatory for investment in FIPEP)

Scheme Name _____ Plan _____ Option _____ Account No. _____

Please transfer _____ units or Rs. _____ to (Destination scheme name) _____ Destination Scheme

Account No (if available) _____ Plan/Option _____ Others Specify _____

Systematic Investment Plan (SIP) through PDC Application for Normal SIP ☐ Micro SIP ☐ (For Micro SIP, Please provide required proof /documentation)

Scheme _____ Plan _____ Option _____ Account No. _____

Frequency ☐ Monthly ☐ Quarterly; Date ☐ 1st ☐ 7th ☐ 10th ☐ 20th ☐ 25th Monthly/Quarterly Amount _____

Enrolment Period From ____/____/____ (mm/yy) To ____/____/____ (mm/yy) Cheque No(s). From _____ To _____ No. of Cheques _____

Cheque No(s). From _____ To _____ No. of Cheques _____

Drawn on Bank /Branch _____ City _____

Document proofs for Micro SIP (Please provide any one of the name of identification document as mentioned in the instructions)

Identification document _____ Field Issuing Authority _____ Document Identification No. _____

Disclaimer: In case the Micro SIP application is subsequently found to be incomplete in any respect or not supported by adequate documentation or if the existing aggregate investment instalments together with this proposed SIP instalments exceeds Rs.50,000/- in a year, the Micro SIP registration may be cancelled for future instalments and no refund may be made for the units already allotted.

Systematic Transfer Plan (STP)

(Source Scheme)

Scheme Name _____ Plan _____ Option _____ Account No. _____

Please transfer ☐ Fixed Amount Rs. _____ OR ☐ Capital Appreciation to (Destination scheme name) _____

Destination Scheme Account No (if available) _____ Plan/Option _____ Others Specify _____

Frequency ☐ Daily ☐ Weekly ☐ Monthly ☐ Quarterly

Weekly ☐ 7 ☐ 14 ☐ 21 ☐ 28 Monthly/Quarterly Specify date _____ Enrolment Period From ____/____/____ (dd/mm/yy) To ____/____/____ (dd/mm/yy)

However, the following schemes/plans/options are not available as Source Scheme: • FIPP • FIT • FIGSF - PF Plan

Dividend Transfer Plan (DTP)

Scheme Name _____ Plan _____ Option _____ Account No. _____

I/We would like to transfer Dividend to the following: ☐ New Scheme Name/Plan/Option ☐ Existing Account No., if any in this scheme

Systematic Withdrawal Plan (SWP)

Scheme Name _____ Plan _____ Option _____ Account No. _____

Frequency ☐ Monthly ☐ Quarterly ☐ Fixed Amount Rs. _____ OR ☐ Capital Appreciation

Date: ☐ 15th ☐ Last business day of month (Applicable for fixed amount), Enrolment Period From ____/____/____ (mm/yy) To ____/____/____ (mm/yy)

Franklin Templeton 'Easy' Services

1. **Franklin Templeton Easy e-Update:** Receive account statements, annual reports and other information instantly by Email *

Email Address: _____

☐ I / We wish to receive the above by email; ☐ I / We do not wish to receive the above by email

2. **Franklin Templeton Easy Web:** Access your account and transact online. Register online for Easy web by visiting our website www.franklintempletonindia.com

3. **Franklin Templeton Easy Call:** Just call 1800 425 4255 or 6000 4255 to access your account using TPI ☐ Yes, I would like to receive my TPIN

4. **Franklin Templeton Easy Mobile:** Get instant SMS alerts to confirm your transactions * Mobile Number _____

I/We wish to register for SMS updates on my/our mobile phone. ☐ Yes ☐ No

* Note: Where the investor has not opted for any option or has opted for both options, the application will be processed as per the default option, i.e., receive the account statement, annual report and other correspondence by E-mail and receive SMS updates on mobile.

Declaration

Having read and understood the contents of the Statement of Additional Information (SAI) of Franklin Templeton Mutual Fund (FTMF), Scheme Information Document (SID) and Key Information Memorandum (KIM) of the scheme(s) and the date of this investment, I/We confirm that the monies invested in the scheme(s) of FTMF legally belong to me / us and I/ we have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment.

I/We have read and understood the terms and features of the scheme(s) and associated risk factors and have satisfied myself/ourselves about suitability of the scheme(s) for my/our investment in light of my/our risk appetite and investment horizon.

* I / We confirm that I am / we are Non-Resident Indians / Persons of Indian Origin / Qualified Foreign Investors but not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, or as defined by the U.S. Commodity Futures Trading Commission, as amended from time to time or residents of Canada, and I / we hereby further confirm that the monies are remitted from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Franklin Templeton Investments or their employees or agents liable for any consequences in case of any of the above particulars being false, incorrect or incomplete. I/ We hereby undertake to promptly inform FTMF of any changes to the information provided hereinabove and agree and accept that FTMF, its sponsor, AMC, trustees, their employees, authorised agents, service providers, representatives or the distributors (The Authorised Parties) are not liable or responsible for any losses, costs, damages arising out of any actions undertaken or activities performed by them on the basis of the information provided by me/us as also due to my/our not intimating / delay in intimating such changes.

I/We hereby authorise Franklin Templeton Investments to disclose, share, remit in any form, mode or manner, all / any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/ us, to any of the Authorised Parties or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit India (FIU-IND), the tax / revenue authorities and other investigation agencies without any obligation of advising me/us of the same. I/ We hereby agree to provide any additional information / documentation that may be required by the Authorised Parties, in connection with this application.

* I / We confirm that I/we do not have any other existing investment in the schemes of Franklin Templeton Mutual Fund which together with this proposed investment will result in aggregate investments exceeding Rs.50,000/- in a year. Further, I/we understand and accept that in case Franklin Templeton Mutual Fund processes this investment / first SIP instalment and the application is subsequently found to be incomplete in any respect or not supported by adequate documentation or if the existing aggregate investment together with this proposed investment exceeds Rs.50,000/- in a year, the SIP registration under the Micro investment route will be cancelled for future instalments and no refund shall be made for the units already allotted.

I/We confirm and declare that I/ we have read and understood the terms and conditions for HPIN usage and online transactions/ TPIN/ Email Services and also the disclaimer and terms and conditions as posted on FTMF's website www.franklintempletonindia.com. I/ We agree and shall abide by the norms, terms and conditions for HPIN usage and online transactions/ TPIN/ Email services and agree not to hold Franklin Templeton Investments or their employees or agents responsible for any action relating to the use of HPIN / TPIN / Email services facility. 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.

Sole/First Holder/Guardian **X** Second Holder **X** Third Holder **X**

Date: _____