COMMON APPLICATION FORM (Continuous Offer of units at Applicable NAV)

QUANTUM MUTUAL FUND

Quantum Long Term Equity Fund (An Open-ended Equity Scheme)
Quantum Liquid Fund (An Open ended Liquid Scheme)
Quantum Tax Saving Fund (An Open ended Equity Linked Savings Scheme)

Quantum Equity Fund of Funds (An Open-ended Equity Fund of Funds Scheme)
Quantum Gold Savings Fund (An Open-ended Fund of Fund Scheme)
Quantum Multi Asset Fund (An Open Ended Fund of Funds Scheme)

Quantum Dynamic Bond Fund (An Open-ended Debt Scheme with Defined Credit Exposure and Dynamic Maturity Profile)

and only India's 1ˢᵗ Direct to Investor Mutual Fund

505, Regent Chambers, 5th Floor, Nariman Point, Mumbai - 400021. www.QuantumMF.com

Application No: QMFP

1 INTERMEDIARY INFORMATION | FOR OFFICE USE ONLY

Name & ARN Code	Sub-Broker Code	EUIN	E- Code
132061		E352389	

Please refer instruction No. 5 for EUIN. Please read the instructions carefully, before filling up the application. Kindly use this form if you are making a one time investment. For SIP investments please use the separate SIP Form. Investors should consult their financial advisers if in doubt whether the product is suitable for them. (All sections to be filled in English and in BLOCK LETTERS). **Fields marked with (*) are mandatory.**

2 EXISTING UNIT HOLDER INFORMATION (Please note that Applicant details & mode of holding will be as per existing Folio Number) (Refer Instruction No. 3)

Folio No. _____ Name of First Applicant _____

3a

	* PAN (Refer Instruction No.4A) Please attach certified PAN copy	* Know Your Customer (KYC) (Refer Instruction No. 4B)	AADHAAR Number
1st Applicant /Guardian		Yes ☐ (Please submit Proof)	
2nd Applicant		Yes ☐ (Please submit Proof)	
3rd Applicant		Yes ☐ (Please submit Proof)	
POA Holder		Yes ☐ (Please submit Proof)	

3b CKYC Details

1st Applicant /Guardian	2nd Applicant
3rd Applicant	

4 * APPLICANT INFORMATION (Refer Instruction No. 6) (TO BE FILLED IN BLOCK LETTERS)

Name of Sole/ 1st Applicant ☐ Mr. ☐ Ms. ☐ M/s. ☐ Others _____ Please Specify   Date of Birth/ Date of Incorporation D D M M Y Y Y Y

Proof of Date of Birth (In case of Minor) ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Others _____ Please Specify

Mobile No. _____ Email ID _____

Parent/ Guardian Name of 1st Applicant - (in case of Minor)/Contact person (in case of non individual applicant) _____ Relationship with Minor/ Designation _____

If the sole / first applicant is differently abled; then please tick the preferred mode of communication: ☐ Email & SMS ☐ Voice ☐ Both

Name of 2nd Applicant ☐ Mr. ☐ Ms. ☐ M/s.   Date of Birth D D M M Y Y Y Y

Mobile No. _____ Email ID _____

Name of 3rd Applicant ☐ Mr. ☐ Ms. ☐ M/s.   Date of Birth D D M M Y Y Y Y

Mobile No. _____ Email ID _____

Mode of Holding ☐ Single ☐ Joint ☐ Any one or survivor(s) (Default option in case of more than one applicant)

1ˢᵗ Holder

Legal Status Please (✓): ☐ Resident Individual ☐ Minor ☐ FII ☐ Society/Club ☐ AOP/BOI ☐ LLP ☐ HUF ☐ NRI/PIO Repatriation Basis ☐ NRI/PIO Non-Repatriation Basis ☐ Partnership Firm ☐ Trust ☐ Bank ☐ Body Corporate ☐ Company ☐ Others _____ Please Specify

Occupation Please (✓): ☐ Private Sector Service ☐ Public Sector / Gov. Service ☐ Business ☐ Professional ☐ Agriculturist ☐ House Wife ☐ Student ☐ Politically Exposed Person ☐ Related to Politically Exposed Person ☐ Forex Dealer ☐ Retired ☐ Others _____ Please Specify

Income Please (✓): ☐ Upto 1 Lac ☐ 1 to 5 Lacs ☐ 5 to 15 Lacs ☐ 15 to 25 Lacs ☐ 25 Lacs & above Individuals (optional) Networth as on date is ₹ _____ Non-Individuals (mandatory) Networth as on date is ₹ _____

2ⁿᵈ Holder

Legal Status Please (✓): ☐ Resident Individual ☐ NRI/PIO Non-Repatriation Basis ☐ NRI/PIO Repatriation Basis

Occupation Please (✓): ☐ Private Sector Service ☐ Public Sector / Gov. Service ☐ Business ☐ Professional ☐ Agriculturist ☐ House Wife ☐ Student ☐ Politically Exposed Person ☐ Related to Politically Exposed Person ☐ Forex Dealer ☐ Retired ☐ Others _____ Please Specify

Income Please (✓): ☐ Upto 1 Lac ☐ 1 to 5 Lacs ☐ 5 to 15 Lacs ☐ 15 to 25 Lacs ☐ 25 Lacs & above Individuals (optional) Networth as on date is ₹ _____

3ʳᵈ Holder

Legal Status Please (✓): ☐ Resident Individual ☐ NRI/PIO Non-Repatriation Basis ☐ NRI/PIO Repatriation Basis

Occupation Please (✓): ☐ Private Sector Service ☐ Public Sector / Gov. Service ☐ Business ☐ Professional ☐ Agriculturist ☐ House Wife ☐ Student ☐ Politically Exposed Person ☐ Related to Politically Exposed Person ☐ Forex Dealer ☐ Retired ☐ Others _____ Please Specify

Income Please (✓): ☐ Upto 1 Lac ☐ 1 to 5 Lacs ☐ 5 to 15 Lacs ☐ 15 to 25 Lacs ☐ 25 Lacs & above Individuals (optional) Networth as on date is ₹ _____

Address: Mailing Address of Sole/First Applicant (P.O. Box alone may not be sufficient) This address will be replaced with the address as per your KYC records on validation of your KYC data. Overseas Investor must provide Indian Address.

City _____ State _____ Country I N D I A Pin code _____

Contact Details of Sole/ First Applicant

Tel No - STD Code _____ Res. _____ Off. _____ Fax _____

Overseas Address (mandatory for NRI/FII applicant). Applications from investors residing in USA or Canada shall not be accepted   Address for correspondence (for NRI applicants) ☐ Indian ☐ Overseas

City _____ Country _____ Zip code _____

✂ --- ✂

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)   Application No: QMFP

Quantum Mutual Fund-505, Regent Chambers, 5th Floor, Nariman Point, Mumbai - 400021. www.QuantumMF.com

Please scan this code, and fill in your details. Our representative will get in touch with you.

Date D D M M Y Y Y Y Received from: Mr. / Ms. / M/s _____

an application for allotment Scheme _____

vide Cheque No./ RTGS / NEFT / IMPS Reference No. _____ Dated _ / _ / _

Amount (₹) _____

Drawn on Bank and Branch _____

Please note: All purchases are subject to realization of cheques (please refer Scheme Information Document)

Collection Center's Stamp & Receipt Date and Time

5 POWER OF ATTORNEY (POA) (Refer Instruction Nos. 2(f) & 7)

POA Name Mr./Ms.	
Address	
	City	Pin code

If investment is being made by a Constitutional Attorney, please submit notarised copy of POA

6 BANK ACCOUNT DETAILS (Refer Instruction No. 10)

A/c Type [please ✓]	☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR
Account No	
Bank Name	
Branch	
Branch Address	
City	Pin code
IFSC	MICR Code

A/C PAYEE
PAY **QUANTUM MUTUAL FUND PAN XXXXXXXX** **OR BEARER**
RUPEES _____ ₹ [ ]
11 DIGIT IFSC Code
9 DIGIT MICR Code
IFSC QTMF7654321
"4153872": 265291538 123456" 23

Preferred mode of payment Electronic Credit. RTGS IFSC/NEFT code will help us transfer the amount to your bank account quicker, electronically.

✱Mandatory – Please attach either a Cancelled Cheque with first applicant name and account number pre-printed on the face of the cheque or a Bank Statement with current entries not older than 3 months or a Certified Bank Passbook with current entries not older than 3 months or a Bank Letter/Certificate duly signed by Bank Branch Manager/Authorized Personnel.

7 ✱ INVESTMENT DETAILS (Please ✓) Choice of Scheme/Option/Facility (Refer Instruction No. 1)

Scheme			
Option		Facility	

8 ✱ PAYMENT DETAILS (Refer Instruction No. 11)

Mode of Payment	☐ RTGS/NEFT	☐ Transfer Letter / Direct Credit (DC)	☐ Cheque	☐ DD	☐ IMPS
RTGS/NEFT/IMPS/DC Ref. No. & Date			Date	D D M M Y Y Y Y	
Cheque No. & Date:			Date	D D M M Y Y Y Y	
Gross Amt (₹)		DD Charges (₹)		Net Amt (₹)	
Bank /Branch & City					
Account Type	☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR				

9 ✱ NOMINATION DETAILS (If you wish to nominate more than one nominee please fill up separate form for nomination) (Refer instruction no. 12)

I/We hereby nominate the under mentioned nominee to receive the amounts to my/our credit in event of my/our death. I/We also understand that all payments and settlements made to such Nominee shall be a valid discharge by the AMC/Mutual Fund/ Trustee Company.

Name of Nominee		Date of Birth of Nominee	D D M M Y Y Y Y
Address		PAN No. of Nominee	
	City	Relationship With Applicant	☐ Mother ☐ Father ☐ Spouse ☐ Others ____
Pin Code	State		
Name of Guardian/Parent (If Nominee is minor)		Relationship With Nominee (If Nominee is minor)	☐ Mother ☐ Father ☐ Legal Guardian
Address of Guardian		PAN No. of Guardian/Parent	
	City	Pin Code	**I do not wish to Nominate** ☐

| Proof of Date of Birth* | ☐ Birth Certificate | ☐ School Leaving Certificate | ☐ Passport | ☐ Others _____ Please Specify |
| Proof of Relationship* | ☐ Birth Certificate | ☐ School Leaving Certificate | ☐ Passport | ☐ Others _____ Please Specify |

10 DEMAT ACCOUNT DETAILS (Please ✓) (Please refer Instruction no. 13)   ☐ NSDL ☐ CDSL (Switch not allowed. Redemption Stock Exchange Platforms / Depository Participants only)

I would like to be allotted units in DEMAT mode. ☐ Yes ☐ No (Please ✓) (Non - ticking of this box would result in allotment of units in physical form).
Please ensure that the name of the investor in the application form matches with the account held with the depository participant.

NSDL	I N	BENEFICIARY Account No. (NSDL Only)
CDSL		

| Enclose for Demat Option: | ☐ Client Master List | ☐ Transaction / Holding Statement | ☐ DIS Copy |

11 SOURCE OF INFORMATION How did you come to know about Quantum Mutual Fund?   ☐ Advertisement ☐ Friend/Relative ☐ Sales Team ☐ IFA / Intermediary
Name & ARN Code of Intermediary _____   ☐ Others

Investor Awareness: Please ✓ to acknowledge that you have been explained the following aspects of investing by Quantum Mutual Fund and / or its representative(s) / intermediary(s) and hereby confirm having understood the same before investing with Quantum Mutual Fund.

Name of the Invested Scheme(s): _____

☐ I/We have asked, and have been explained and understood to my/our satisfaction all the features of the scheme(s) from the scheme related Documents (KIM/SID/SAI) that I/We have chosen to invest in and have understood all the Terms and Conditions of the scheme(s).

☐ I/We confirm that I/We have reviewed and understood the Expense Ratio, Tax Implication, Cut-off time for subscription / redemption / Switch, Turnaround time for processing of transactions, Exit Load which will be calculated on First in First Out (FIFO) basis, product label and riskometer of the scheme(s).

☐ I/We am/are also aware that investing in Mutual Fund schemes come with an inherent risk which I/We have also understood from the product label and Riskometer of the Scheme(s). I / We have not been paid any incentive or have not been promised any assured returns while investing in this scheme(s).

☐ I/We am/are aware of my own risk appetite, my/our time horizon for investment, my/our objective for investment and the investment objective, performance of the Scheme(s) and performance of the Benchmark of the scheme(s) and it is appropriate for me/ us to undertake investment in the scheme(s). I/we confirm that the scheme(s) in which I/we am/are investing is appropriate for me/ us keeping in mind the investment objective and risk of the scheme(s).

☐ I/We am/are also aware of the Charter of Investor Rights, Privacy Policy Grievance Redressal and Dispute Resolution Policy and procedure at Quantum Mutual Fund and am/are aware of whom to contact in case of any discrepancies.

☐ I/We hereby declare that I/We have understood the nature of questions in the Application Form and the importance of disclosing all the material information required. I/We declare the facts disclosed in the application and the acknowledgement forms are true and correct to the best of my/our knowledge.

☐ I / We hereby authorize you to verify / confirm details and documents submitted by me / us independently from my Banker and / or any source and / or through the independent third party appointed by you. In case, if any of the information / documents provided is found to be incorrect, you have the right to reject my application.

☞ **TO COMPLETE THE FORM, PLEASE SIGN IN THE APPROPRIATE BOX AT THE BOTTOM OF THE FOLLOWING PAGE.** ☜

Contact Us

WEBSITE
www.QuantumMF.com

TOLL FREE HELPLINE
1800 22 3863 / 1800 209 3863

Missed Call Facility
022-61073807

EMAIL
CustomerCare@QuantumAMC.com

SMS
<Quantum> to 9243 22 3863

DECLARATION: I/We have read and understood the terms & contents of the Scheme Information Document(s) of the respective scheme(s) and Statement of Additional Information and Addenda of Quantum Mutual Fund thereto. I/We hereby apply to the Trustee of Quantum Mutual Fund for purchase/allotment of units of the scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the Scheme. I/We further declare, I am / we are authorized to invest the amount & that the amount invested by me/us in the above mentioned scheme is derived through legitimate sources and legally belong to me/us and not of any third party and is not held or designed for the purpose of contravention of any acts, rules, regulations or any statute or legislation or any other applicable laws or notifications, directions issued by the governmental or statutory authority in India or of the country where I/we for the time being reside from time to time. It is expressly understood that I/We have the express authority from our constitutional documents to invest in the units of the scheme and Quantum AMC/Trustee/Fund would not be responsible if the investment is ultra vires thereto and the investment is contrary to the relevant constitutional documents. I/We agree that in case my/our investment in the Scheme is equal to or more than 25% of the corpus of the scheme, then Quantum Asset Management Ltd., Investment Manager to the Quantum Mutual Fund has full right to refund the excess to me/us to bring my/our investment below 25%. I/We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investments. I/We hereby authorize Quantum Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s) / Quantum Mutual Fund's bank(s) or to any authority / agency, statutory or otherwise. I/We authorize this Fund to reject the application, revert the units credited/redeem units created at applicable NAV(less exit load, if any), restrain me/us from making any further investment in any of the schemes of the fund, recover/debit my/our folio(s) with the penal interest and take any appropriate action against me/us in case the cheque(s)/ payment instrument is/are returned by my/our banker for any reason whatsoever. I/We undertake that these investments are my/our own and acknowledge that Quantum AMC reserves the right to call for such other additional information/ documents as required to comply with KYC norms. I/ We understand that and further authorize Quantum AMC, Quantum Mutual Fund to source my data / documents / information specimen signature from third party / KRA and Quantum Mutual Fund, Quantum AMC has the right to use the same / specimen signature for validation to process any future transactions that are submitted by me / us; besides Quantum Mutual Fund / Quantum AMC can further insist on seeking verification of my signature by my / our default bank. I/We hereby, further agree that the Fund can directly credit all the dividend payouts and redemption amount to my bank details given above. I/We hereby declare that the particulars above are correct. I/We further agree not to hold Quantum Mutual Fund liable for any consequences in case of any of the above particulars being false, incorrect or incomplete. I/We hereby undertake to promptly inform Quantum Mutual Fund of any changes to the information provided hereinabove and agree and accept that Quantum Mutual Fund, their authorized agents and representatives are not liable or responsible for any loss, costs, damages arising out of any actions undertaken or activities performed by them on the basis of information provided by me/us as also due to not intimating/delay in intimating such changes. I/We hereby authorize Quantum Mutual Fund to disclose, share, remit in any form, mode or manner, directly to them or indirectly through any entity, the information provided by me to any Regulatory Authority(ies); including Financial Intelligence Unit, India (FIU-IND) and/or any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authority and other investigation agencies; including all changes, updates to such information as and when provided by me without any obligation of advising me/us of the same. I/We hereby authorize Quantum AMC to verify/validate with my/our Bankers or with any entity/source, the bank account details provided by me/us in the initial /additional subscription as well as any subsequent multiple bank mandate registrations submitted by me/us while investing in Schemes of Quantum Mutual Fund. FATCA/ Foreign tax laws: I/We understand that Tax Regulations relevant under Foreign Account Tax Compliance Act Provisions (commonly known as FATCA) contained in the US Hire Act 2010, require Quantum Mutual Fund to collect information about each investor's tax residency. I/We authorize Quantum Mutual Fund to share information on my/our account with relevant tax authorities, if I/We provide a valid self-certification / information on US Tax Identification Number etc under the relevant FATCA/Foreign Tax Laws to Quantum Mutual Fund. In case no information on US Tax Identification Number etc is provided by me / us, it will be deemed that I/We are not a US citizen or resident and Quantum Mutual Fund under certain circumstances may be obliged to share information on my / our account with relevant tax authorities. I/We have read the contents of the SAI, SID, KIM which is for informational purposes only and does not have any regard to my/our specific investment objectives, financial situation or my/ our particular needs. I/We have understood that the past performance of any fund or manager/ sub-manager of the fund are not necessarily indicative of future performance. Opinions and any other contents which are provided by Quantum Mutual Fund are for personal use and informational purposes only and are subject to change without notice. I/We hereby confirm that nothing contained in the SAI, SID, KIM or website constitutes investment, legal, tax or other advice nor is it to be relied on while making an investment or other decision. I/We hereby confirm that descriptions or questions answered by me/us in the questionnaire which is used to understand my profile are fair, clear and not misleading. I/We also confirm that all investments made by me either on my own and / or on the advice of the relationship manager are after evaluating my/our investment objective and analyzing my/our risk profile and have been explained all the features of the scheme(s) to my/our satisfaction. I/We have understood the nature and risk of the products selected for my/our investments based on my investment objective/s and financial situation as provided by me/us. I/We hereby confirm that purchase of units of any particular scheme either independently and / or if and whenever a recommendation is given to me/us to purchase a particular scheme, it is based upon a reasonable assessment i.e. whether the structure and risk reward profile of the scheme is consistent with my experience, knowledge, investment objectives, risk appetite, time horizon for investment and capacity for absorbing loss. I/We hereby confirm that I have independently understood either on my own and / or through the AMC's relationship manager (if any) assigned to me/us who has disclosed all material information about the business, fund's history, the terms and conditions on which advisory services are offered (if any), affiliations with other intermediaries, any actual or potential conflicts of interest arising from any connection to or association with any issue of products/ securities, including any material information or facts that might compromise its objectivity or independence in carrying out of investment advisory services, key features of the products or securities, particularly, performance track record, transaction norms such as cut off time for subscription / redemption, TAT for redemption, activation of SIP/STP/SWP, NAV applicability, the expense ratio of the scheme(s), the exit load structure of each scheme as well as the exit load that will be charged and calculated on FIFO basis and such other information as is necessary so as to take a decision on investing and the services that will be provided in future. I/We am aware about the product label warnings, disclaimers in documents, advertising materials relating to an investment product which is/are recommended to me/us and Tax implications of my/our investment pertaining to all schemes of Quantum Mutual Fund as explained to me/us by my relationship manager. I / We also confirm that the Scheme in which I / we have invested is appropriate for me / us keeping in mind my investment objective and my risk appetite and the investment objective and inherent risk of the Scheme. I / We also confirm that I / We have not been paid any incentive or have not been promised any assured returns while investing in the scheme(s). 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. "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." I/We hereby declare that I have understood the nature of questions in the KIM / application form and the importance of disclosing all the material information required and the facts disclosed in the application and the details provided by me/us in the Investor Awareness section are true and correct. I / We hereby agree and authorize Quantum AMC / Mutual Fund to provide my / our Personal / Investment(s) details to intermediaries by ways of feeds or such other means / medium for my / our investment that are routed / executed by me / us through the intermediaries.

I/We am also aware of the Grievance Redressal and Dispute Resolution policies and procedures at Quantum Mutual Fund and am aware of whom to contact in case of any discrepancies in understanding or otherwise.

Applicable to NRI only: I/We confirm that I am / we are Non Resident of Indian Nationality/Origin but not a person residing in Canada or a United States within the meaning of Regulation(s) under the United States Securities Act of 1933, as amended from time to time or of any country not compliant under the FATF Agreements and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels from funds in my/our Non-Resident External/Ordinary Account/FCNR Account. (Including amount of Additional Purchase Transaction made in future). I/We authorize this fund to reject the application, revert the units crediting/redeem units created at applicable NAV (less exit load, if any), restrain me/us from making any further investment in any of the schemes of the fund, in case I/we have not provided details of me/us being resident of Canada or USA or any country not compliant under the FATF Agreements either at the time of investment or subsequently.

Date | D D M M Y Y Y Y Place _____

Signature(s)

Sole/1st Applicant/Guardian / Authorised Signatory	POA Signatory	2nd Applicant / Authorised Signatory	3rd Applicant / Authorised Signatory