## **FORM FOR UPDATION OF AADHAAR**



(For Individual / Sole Proprietors

To, Axis Mutual Fund	ARN-4464	E032737	VIKRA	MS.	BAG	ADT	HE
FOLIO NUMBER							
Folio No.							
I/We request Axis Mutual Fund to update my/o Registrar of Axis Mutual Fund to refer these de Agencies etc. and also authorize such agencies	etails to any of the appropriate author	orities including Unique Ide	entification Autho	rity of Indi	a (UIDA		
FIRST HOLDER			(	Gender _	_ M _	] F	Oth
Name		Aadha	r No.				
Enclosed Self attested copy of Aadhaar Card	Letter issued by UIDAI containing pr Aadhaar Enrolment	roof of KIN No.					
PAN / PEKRN	Date of Birth D	D M M Y Y Y	Pin Code				
Email ID			Mobile No.				
SECOND HOLDER				Gender	_ M _	] F	Oth
Name		Aadha	r No.				
Enclosed Self attested copy of Aadhaar Card	Letter issued by UIDAI containing pr Aadhaar Enrolment	roof of KIN No.					
PAN / PEKRN	Date of Birth D	D M M Y Y Y	Pin Code				
Email ID			Mobile No.				
THIRD HOLDER				Gender	] м [	] F [	Oth
Name		Aadha	r No				
Enclosed Self attested copy of Aadhaar Card	Letter issued by UIDAI containing pr						
PAN / PEKRN	Aadhaar Enrolment  Date of Birth	D M M Y Y Y	Pin Code			1	
Email ID			Mobile No.			_	
GUARDIAN				Gender	] M [	] F [	Oth
Name		Aadha					
Enclosed Self attested copy of Aadhaar Card	Letter issued by UIDAI containing pr		1140.				
PAN / PEKRN	Aadhaar Enrolment  Date of Birth	D M M Y Y Y Y	Pin Code			1	
Email ID	2000000		Mobile No.				
POA HOLDER				Gender [	] M [	le [	Oth
Name		Aadha					
Enclosed Self attested copy of Aadhaar Card	Letter issued by UIDAI containing pr	roof of	1 10.				
PAN / PEKRN	Aadhaar Enrolment  Date of Birth	KIN No.	Pin Code				
Email ID	Duic of Billi		Mobile No.				
CONSENT FOR AUTHENTICATION AND SHA  I/ We hereby provide my/our consent in accordance (iii) updating my/ our Aadhaar number(s) in acco sharing/disclosing of the Aadhaar number(s) inclu Transfer Agent (RTA) for the purpose of updating the	with Aadhaar Act, 2016 and regulation rdance with the Aadhaar Act, 2016 (ar ding demographic information with the	nd regulations made thereund	ecting, storing and der) and PMLA. I/	We hereby	provide r	ny/our d	onser
Signature of 1st Holder/ Guardian / POA	Signature of 2	2nd Holder	Sig	gnature of C	3rd Holde	er	
Axis Mutual Fund - Acknowledgeme					AXI		

## **GUIDELINES**

- 1. By filling up this Form, the investor authorizes Axis Asset Management Company Limited/Axis Mutual Fund/UIDAI/various KYC Registration Agencies/Authentication agencies etc. to receive and share the information physically or electronically related to Aadhaar and other related matters.
- 2. In case of any correction/change in name/address/mobile number/date of birth etc. recorded with UIDAI, please update the change with UIDAI's Aadhaar Self Service Update Portal, currently, https://ssup.uidai.gov.in/web/guest/update.
- 3. In case of any assistance, please contact the nearest Investor Service Centre of Axis Mutual Fund.
- 4. The purpose of collection/usage of Aadhaar number including demographic information is to comply with applicable laws/rules/ regulations and provision of the said data is mandatory as per applicable laws/rules/regulations. Post obtaining the Aadhaar number, we shall authenticate the same in accordance with the Aadhaar Act, 2016. We shall receive your demographic information which shall be used only to comply with applicable laws/rules/regulations.
- 5. Ensure all the details are as per PAN Card / KYC / Aadhaar Card.
- 6. If the name given in the application does not match with the name as appearing on the PAN Card / Aadhaar Card, authentication application may be liable to get rejected or further transaction may be liable to get rejected.
- 7. Aadhar No. is optional for minor & mandatory for guardian.

	CHECK LIST
Form has been completed and signed by all the holders.	Letter issued by UIDAI containing Aadhaar Number.
The copy of Self attested AADHAR card	If Aadhaar number is applied for, please enclose letter issued by UIDA containing proof of Aadhaar Enrolment.