

ARN-4464

E032737 VIKRAM S. BAGADTHEY

THIRD PARTY PAYMENT DECLARATION (Should be enclosed with each payment)

Payments by : Parent / Grand-Parents/Related Persons Other than the Registered Guardian
 Payments to : To a Minor Folio only; In consideration of: Natural love and affection or as gift only
 Maximum Value : Not Exceeding ₹ 50,000/- (each regular purchase or per SIP installment)

Application and Payment Details (All details below are Mandatory, including relationship, PAN & KYC):

Folio No.		Application Form No.	
Beneficial Minor's Name			
Investment Amount in ₹			
Payment Cheque No.		Dated	D D M M Y Y Y Y
Cheque Drawn on Bank			
Cheque Drawn on A/c. No.			

Declaration and Signatures:

	Parent / Grand-Parents / Related Persons Other than the Registered Guardian	Guardian of Minor, as registered in the Folio
Name		
Relationship with Minor		
Income Tax PAN		
KYC Acknowledgement	<input type="checkbox"/> Attached (Mandatory for any amount)	<input type="checkbox"/> Attached (Mandatory for any amount)
Declaration	I hereby declare and confirm the minor stated above is the beneficial owner of the investment details mentioned above and I am providing the funds for these investments on account of my natural love and affection or as gift from my bank account only.	I confirm that I am the legal guardian of the Minor, registered in folio and have no objection to receiving these funds on behalf of the Minor.
Signature		
Contact Number		

BANKER'S CERTIFICATE in case of Demand Draft / Pay Order / Any Other pre-funded instrument

To whomsoever it may concern, we hereby confirm the following details regarding the instrument issued by us:

Instrument Details:

Instrument Type	<input type="checkbox"/> Demand Draft	<input type="checkbox"/> Pay Order / Banker's Cheque
Instrument Number		Date D D M M Y Y Y Y
Investment Amount in ₹		
In Favour of / Favouring		
Payable At		

Details of Bank Account Debited for issuing the instrument:

Bank Account No.		Account Type
Account Holder Details	Name	Income Tax PAN
1		
2		
3		

If the issuing Bank branch is outside India:

We further declare that we are registered as a Bank / branch as mentioned below:

Under the Regulator	Name of the Regulator
In the Country	Country Name
Registration No.	Registration Number

We confirm having carried out necessary Customer Due Diligence with regard to the Beneficiary and to the source of the funds received from him, as per the standards of Anti-Money Laundering laws and other applicable relevant laws in our country.

Branch Manager/ Declarant(s)

Signature _____
 Name _____
 Address _____ Bank & Branch Seal
 City _____ State _____ Postal Code _____
 Country _____ Contact Number _____

Important Note: It is clarified that the bankers certificate suggested above is recommendatory in nature, as there may be existing Bank Letters / Certificates / Declarations, which will confirm to the spirit of the requirements, if all required details are mentioned in the certificate.

CUSTODIAN ON BEHALF OF AN FII OR CLIENT (Should be enclosed with each Third party payment. See Instruction bv) on page 16)

To whomsoever it may concern

Application and Payment Details (All details below are Mandatory)

Folio No.		Application Form No.	
Beneficial Applicant / Investor Name			
Investment Amount in ₹			
Payment Mode	<input type="checkbox"/> Cheque	<input type="checkbox"/> Fund Transfer	<input type="checkbox"/> RTGS <input type="checkbox"/> NEFT
Payment Cheque / UTR No.		Dated	D D M M Y Y Y Y
Payment from Bank			
Payment from A/c. No.			

We further declare that we are registered as a Custodian with SEBI under Registration No. _____

We confirm the beneficial owner as stated above and that this payment is issued by us in our capacity to the Applicant / Investor. The source of this payment is from funds provided to us by the Applicant / Investor.

Signature of Declarant(s) : _____

Name of Declarant(s) : _____

Income Tax PAN : _____

Address of Declarant(s) : _____

City : _____ State : _____

Postal Code : _____ Country : _____

PAYMENT BY EMPLOYER ON BEHALF OF EMPLOYEE (Under Systematic Investment Plans or Lump sum / one-time subscription, through Payroll deductions or deductions out of expense reimbursements. Should be enclosed with each Third party payment. See Instruction bv) on page 16)

To whomsoever it may concern

We hereby declare that the Applicant Form No/s. _____ for subscription of units in _____

(Name of the Scheme / Plan / Option) is accompanied by

Cheque No. _____ Dated _____

Drawn on _____ (Name of the Bank / Branch).

We confirm that the beneficial owner(s) of the investment in these units is / are _____

(Name of the Employee/s, with employee number/s).

who is / are my / our employee/s and am providing the funds for these investments through the payroll deduction or deductions out of expense reimbursements.

Signature of Declarant(s) : _____

Name of Declarant(s) : _____

Income Tax PAN : _____ KYC Acknowledgement attached (Mandatory for any amount)

Address of Declarant(s) : _____

City : _____ State : _____

Postal Code : _____ Country : _____

Signature of Beneficiary (ies) : _____

Signature of Beneficiary (ies) : _____