

# PAN/ KYC UPDATION REQUEST FORM

Please read the instructions carefully and complete the relevant sections legibly in black / dark coloured ink and in BLOCK LETTERS.  
Please strike off unused section(s) to avoid unauthorised use.

ARN-4464

E032737 VIKRAM S. BAGADTHEY

1.

**FOLIO DETAILS**

FOLIO NO.

2.

**PAN/ KYC UPDATION**

Details of Sole/ First Applicant/ Guardian	Details of Second Applicant	Details of Third Applicant
Name	Name	Name
Permanent Account Number (PAN)	Permanent Account Number (PAN)	Permanent Account Number (PAN)

3.

**MANDATORY DOCUMENTS TO BE ATTACHED** [Please shade (●)]☐ Self-attested Copy of PAN Card for all holder(s)☐ KYC Acknowledgement Copy for all holder(s)

4.

**DECLARATION & SIGNATURES** (To be signed by ALL UNIT HOLDERS if mode of holding is JOINT)

I/We have read and understood the contents of the Statement of Additional Information, Scheme Information Document and Key Information Memorandum of the respective Scheme(s) and agree to abide by the same including any addendum(s) thereto and any terms, conditions, rules and regulations of the scheme(s) applicable from time to time. I/We will not hold Union Asset Management Company Private Limited, Union Trustee Company Private Limited, Union Mutual Fund, and its Registrar liable for any loss due to delayed execution or rejection of the request for reason of incomplete / incorrect information. I/We hereby declare and confirm that the information provided in this form is true and correct and is duly supported by the document proof enclosed alongwith the form. In case of non submission of any of the documents or if the documents are not found to be in order, the AMC reserves the right to not register the application submitted. The AMC/Mutual Fund shall not be liable and/or responsible for any loss or damage that I/we may incur if the form is rejected.

Signature Sole/ First Applicant/ Guardian/ POA/ Authorised Signatory	Signature Second Applicant/ POA/ Authorised Signatory	Signature Third Applicant/ POA/ Authorised Signatory
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**ACKNOWLEDGEMENT SLIP** (To be filled in by the investor)

Application No.

Folio No.

Date: 

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

an application for PAN/ KYC Updation Request

Collection centre's stamp with  
date and time of receipt

Please address all future communication(s) in connection with this application to  
the Registrar & Transfer Agent of the Scheme:

**Computer Age Management Services Pvt. Ltd.,**

Unit: Union Mutual Fund

158, Rayala Tower 1, 1st Floor, Anna Salai, Chennai - 600002.

Email: enq\_uk@camsonline.com | Website: www.camsonline.com

**Union Asset Management Company Pvt. Ltd.**Unit 503, 5th Floor, Leela Business Park, Andheri Kurla Road,  
Andheri (East), Mumbai - 400059.

Toll Free : 1800 200 2268/1800 572 2268 | Tel No. : 022 67483333

Website: www.unionmf.com | Email : investorcare@unionmf.com