SIM - Special Investment Mandate Form Please read Product Labeling available on the Front Inside Cover Page and instructions before filling to (all points marked * are mandatory)



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Please note: All purchases are subject to realization of cheques and as per applicable load structure (please refer Scheme Information Document)

sms IQ to 5757590

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NON TOLL FREE +91 40 23433150

WEBSITE www.edelweissmf.com 00

EMAIL : INVESTORS emfhelp@edelweissfin.com

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Gross Annual Income	Inlesse v 1*			Legal Status* [please ✓]	
	[hiease ,]	Occupation* [plea			
Dolow 1				culturist Resident Individual FII's Society/Club	
Below 1 Lac	1-5 Lacs 5-10 Lacs 10-25 Lac			aucrat AOP/BOI NRI/PIO FI HUF	
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			y Others <u>Please Spe</u>	Company/Body Corporate NPO	
			litically Exposed Person (PEP) Yes No Others Please Specify	
FATCA INFORMATION	(3rd Applicant)*	Investor* Re	lated to PEP Yes No		
Country of Birth:		ntry of Citizenship/ Nat	ionality: India USA	Others (please specify)	
Country of Tax Residen		ers (please specify)		Tax Reference Number:	
POWER OF ATTO	RNEY (POA) If investment is being made l	by a Constitutional Atta	orney, please submit notarise	d copy of POA	
POA Name Mr	Ms.			PAN	
FATCA INFORMATIO	N				
Country of Birth:			tionality: India USA	Others (please specify)	
Country of Tax Resider	ncy: India USA Othe	ers (please specify)		Tax Reference Number:	
	DETAILS* (Refer Instruction No. IV for	multiple bank regist	tration)		
A/c Type [please ✓]	SB Current N	RO NRE	FCNR		
Account No			Bank Name		
Branch Address					
Pin	IFSC Code			MICR Code	
INVESTMENT DET	AILS FOR SIM (Refer Instruction No. V	1)			
	Invest in (Gross Amount)	Fall In	Switch	5% or 10% of the investment amount to	
'Prepaid'	Plan: Existing Direct	(both benchmarks		g to 100 in case more than 1 scheme is selected	
SIP	Option: Growth^^ Dividend Payout	can be selected)	-	-	
	Edelweiss Absolute Return Fund [#]			Growth Equity Top 100 (E.D.G.E. Top 100) Fund (Ratio) ders Fund (Ratio) ④ Edelweiss ELSS Fund (Ratio)	
Investment	Edelweiss Arbitrage Fund [#]	0.50%1%2%		Fund* (Ratio) 5) Edelweiss Value Opportunities Fund (Ratio)	
Details*	Edelweiss Liquid Fund^	CNX Mid-Cap	🗌 Edelweiss Emergi	ng Leaders Fund	
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Switch from Edelweis	s Absolute Return Fund (being a Source Sch	neme) to Edelweiss Ah	solute Return Fund (being a	designated Target Scheme) is not applicable.	
Switch on	Edelweiss Liquid Fund On the occurrence of trigger the entire unit balance will be sw				
Arhitrage		runu	On the occurrence		
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Partnership Deed Overseas Auditor Certificate Notarised POA Proof of Address Copy of PAN Card KYC Compliance PIO Card Foreign Inward Remittance Certificate

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10 NOMINATION DETAILS* (Refer Instruction No. IX)

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 (If Nominee is minor)	Allocation (%)	Name of Legal Guardian/Parent (If Nominee is minor)	Relationship with nominee	Address of Nominee/ Legal Guardian

11 DECLARATION AND SIGNATURE(S)

Having read and understood the contents of the Scheme Information Document of the Scheme and Statement of Additional Information and subsequent amendments thereto including the section on who cannot invest, "Prevention of Money Laundering" and "Know Your Customer", *IWe* hereby apply to the Trustee of Edelweiss Mutual fund for units of the Scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the Scheme. *IWe* further declare, *I* am / we are authorised to invest the amount & that the amount invested by me/us in the above mentioned Scheme(s) is derived through legitimate sources 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 from our constitutional documents to invest in the units of the Scheme(s) and the AMC/Trustee/Fund would not be responsible if the investment is ultra vires thereto and the investment Kanager to the Edelweiss Mutual Fund, has full right to refund the excess to me/us to bring my/our investment helew 25%. *IWe* have not received nor been induced by any rebate or gifts, directly or indirectly in making this investments. *I We* hereby authorize you to disclose, share, remit in any form, mode or manner, all/ any of the information provided by me/us, including all changes, update to such information as and when provided by me/ us to Edelweiss Mutual Fund/ Edelweiss Asset Management Limited to any Indian or foreign governmental or statutory or judicial authorities/ geneeits, the avy increases the two or gints interestment in any of the scheme and its restrictly or judicial authorities/ ageneeits, the tax/ revenue authority and other investigation agencies without obligation on advising me/ us of the same. *IWe* authorise Edelweiss Mutual Fund to reject the application, revert the units credited/redeem units created at applicable NAV, restrain me/us from making any further

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 further agree that the Fund/AMC can send us all types of SMS relating to the products offered by them.

Applicable to investors who have not opted for nomination facility. I/We hereby confirm that it is my/our informed decision not to avail the nomination facility offered by Edelweiss Mutual Fund.

1/We confirm that I am/We are not resident(s) of United States under the laws of United States or resident(s) of Canada. In case of change to this status, I / We shall notify the AMC, in which event the AMC reserves the right to redeem my/our investments in the Scheme(s).

Applicable to NRI only: I/We confirm that I am / we are Non Resident of Indian Nationality/Origin 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. Please (<) (Including amount of Additional Purchase Transaction made in future)
Repatriation Non Repatriation

For Detailed Instructions on Filling the Application Form please refer to Page no. 44.