

Offer of Units at Applicable NAV

Continuing a tradition of trust.

Key Information Memorandum and Application Form

Name of the AMC :
HDFC Asset Management Company Limited

Investors must read the Key Information Memorandum and Instructions before completing this Form.

Application No.

The Application Form should be completed in English and in BLOCK LETTERS only.

KEY PARTNER / AGENT INFORMATION			FOR OFFICE USE ONLY			
Name and AMFI Reg. No. (ARN)	Sub Agent's Name and Code / Bank Branch Code	M O Code	Date of Receipt	Folio No.	Branch Trans. No.	ISC Name & Stamp
ARN 0155 / NJ India Invest						

Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

1. EXISTING UNIT HOLDER INFORMATION (If you have existing folio, please fill in section 1 and proceed to section 5. Refer instruction 2).

Folio No. _____ / _____ The details in our records under the folio number mentioned alongside will apply for this application.

NAME OF FIRST / SOLE APPLICANT Mr. Ms. M/s. _____

2. STATUS (of First/Sole Applicant) [Please tick (✓)]

<input type="checkbox"/> Resident Individual	<input type="checkbox"/> NRI-Repatriation	<input type="checkbox"/> NRI-Non-Repatriation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> HUF	<input type="checkbox"/> AOP	<input type="checkbox"/> PIO	<input type="checkbox"/> Company	<input type="checkbox"/> FIs
<input type="checkbox"/> Minor through guardian	<input type="checkbox"/> BOI		<input type="checkbox"/> Body Corporate	<input type="checkbox"/> LLP
<input type="checkbox"/> Society / Club	<input type="checkbox"/> Others _____ (please specify)			

MODE OF HOLDING [Please tick (✓)]

<input type="checkbox"/> Single
<input type="checkbox"/> Joint
<input type="checkbox"/> Anyone or Survivor

OCCUPATION (of First/Sole Applicant) [Please tick (✓)]

<input type="checkbox"/> Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional
<input type="checkbox"/> Housewife	<input type="checkbox"/> Business	<input type="checkbox"/> Retired
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	
<input type="checkbox"/> Others _____ (please specify)		

3a. UNIT HOLDER INFORMATION (refer instruction 3)

NAME OF FIRST / SOLE APPLICANT (in case of Minor, there shall be no joint holders) Mr. Ms. M/s. _____ DATE OF BIRTH@ _____ DD MM YYYY Proof of date of birth@ Attached

Nationality _____ PAN# _____ KYC# [Please tick (✓)] Proof Attached (Mandatory for any amount)

NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON – DESIGNATION (in case of non-individual Investors) Mr. Ms. M/s. _____

Nationality _____ Designation _____ Contact No. _____

PAN# _____ KYC# [Please tick (✓)] Proof Attached (Mandatory for any amount)

Relationship with Minor@ [Please tick (✓)] Father Mother Court appointed Legal Guardian. Proof of relationship with minor@ (Please ✓) Attached

NAME OF THE SECOND APPLICANT (Mandatory) [Please tick (✓)] Resident Individual NRI (Second Applicant not allowed in case of minor as first/sole applicant)

Mr. Ms. M/s. _____ PAN# _____ KYC# [Please tick (✓)] Proof Attached (Mandatory for any amount)

NAME OF THE THIRD APPLICANT (Mandatory) [Please tick (✓)] Resident Individual NRI (Third Applicant not allowed in case of minor as first/sole applicant)

Mr. Ms. M/s. _____ PAN# _____ KYC# [Please tick (✓)] Proof Attached (Mandatory for any amount)

Nationality _____ PAN# _____ KYC# [Please tick (✓)] Proof Attached (Mandatory for any amount)

MAILING ADDRESS OF FIRST / SOLE APPLICANT (P.O. Box Address may not be sufficient)

CITY _____ STATE _____ PIN CODE _____

OVERSEAS ADDRESS (Mandatory in case of NRIs/FIs/PIOs) (P.O. Box Address may not be sufficient)

CITY _____ STATE _____ PIN CODE _____

CONTACT DETAILS OF FIRST / SOLE APPLICANT

Telephone : Off. _____ Res. _____ Mobile _____

Fax _____ E-Mail _____

Please attach Proof. If PAN/KYC is already validated please don't attach any proof. Refer instruction No. 14 for PAN and No 16 for KYC. @ Mandatory in case of Minor.

3b. POWER OF ATTORNEY (PoA) HOLDER DETAILS

NAME OF PoA Mr. Ms. M/s. _____ KYC** [Please tick (✓)] Proof Attached (Mandatory for any amount) # Refer instruction 13. ** Refer Instruction No. 15

4. BANK ACCOUNT (PAY-OUT) DETAILS OF FIRST / SOLE APPLICANT (refer instruction 4) Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details

Account No. _____ Name of the Bank _____

Branch _____ Bank City _____

Account Type [Please tick (✓)] SAVINGS CURRENT NRE NRO FCNR OTHERS _____ (please specify)

IFSCCode*** _____ The 9 digit MICR Code number of my/our Bank & Branch is** _____

*** Refer Instruction 4C (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank) ** Refer Instruction 9 (Mandatory for Dividend Payout via ECS) (The 9 digit code appears on your cheque next to the cheque number)

5. MODE OF PAYMENT OF REDEMPTION / DIVIDEND PROCEEDS (refer instruction 9) [Please tick (✓)]

Unit holders will receive redemption/ dividend proceeds directly into their bank account (as furnished in Section 4) via Direct credit/ NEFT/ECS facility

We want to receive the redemption / dividend proceeds (if any) by way of a cheque / demand draft instead of direct credit / credit through NEFT system / credit through ECS into my / our bank account

... continued overleaf

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 60006767 (Do not prefix STD Code) or 18002336767 (Toll Free)]

HDFC MUTUAL FUND
Head Office : Ramon House, 3rd Floor, H.T. Parekh Marg, 169, Backbay Reclamation, Churchgate, Mumbai 400020
Date :

Received from Mr./Ms./M/s. _____ an application for purchase of Units of HDFC Multiple Yield Fund HDFC Multiple Yield Fund - Plan 2005 alongwith Cheque / Demand Draft as detailed overleaf.

Please Note : All Purchases are subject to realisation of cheques / demand drafts.

Application No.

ISC Stamp & Signature

TEAR HERE

6. eSERVICES OPTIONS (SAVE PAPER, SAVE TREES) [Please tick (✓)] (refer instruction 10)

- i) **HDFCFMF Online & HDFCFMF Mobile - I /** We would like to register for my / our HDFCFMF Personal Identification Number (HPIN) to transact online.
Mandatory information to be provided:
 a) **Email address:** _____
 (if the address given herein is different from the email address under section 3(a), the email address under section 6(i) will be considered during registration for HPIN).
 b) **Mother's maiden name:** _____
 I / We have read and understood the terms and conditions and confirm that I/we shall be bound by them (Terms & Conditions available in the eServices booklet as well as on our website)
- ii) **eDocs :** I / We wish to receive account statements, newsletters, annual reports and other statutory information documents by email in lieu of physical documents (Email address is mandatory).
- iii) **eAlerts :** I / We would like to receive SMS updates (Mobile number in section 3(a) is mandatory).

7. INVESTMENT DETAILS - (refer instruction 5)

Scheme Name	<input type="checkbox"/> HDFC MULTIPLE YIELD FUND	<input type="checkbox"/> HDFC MULTIPLE YIELD FUND - PLAN 2005
Option	<input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment	<input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment

8. PAYMENT DETAILS - (refer instruction 6&7) (Please write application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.) Please attach a separate Cheque/DD for each Scheme. Please write Cheque/DD in favour of 'the Specific Scheme A/c PAN' or 'the Specific Scheme A/c Investor Name'.

Payment Type [Please (✓)]	<input type="checkbox"/> Non-Third Party Payment <input type="checkbox"/> Third Party Payment <small>(Please attach 'Third Party Payment Declaration Form')</small>	<input type="checkbox"/> Non-Third Party Payment <input type="checkbox"/> Third Party Payment <small>(Please attach 'Third Party Payment Declaration Form')</small>
Cheque / DD No.		
Cheque / DD Date		
Amount of Cheque/DD/RTGS in figures (₹) (i)		
DD charges, if any, in figures (₹) (ii)		
Total Amount (i) + (ii)	in figures (₹)	
	in words	
Drawn on Bank/Branch Name		
Pay-in Bank Account No. (For Cheque Only)		
Account Type [Please (✓)]	<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> OTHERS _____ (please specify)	<input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> OTHERS _____ (please specify)

9. NOMINATION (refer instruction 12) (Mandatory for new folios of individuals where mode of holding is single)

I / We _____ (Unit holder 1), _____ (Unit holder 2)
 and _____ (Unit holder 3) *do hereby nominate the person(s) more particularly described hereunder/ and*/
 cancel the nomination made by me/ us on the _____ day of _____ in respect of the Units under Folio No. _____
(* strike out which is not applicable)

Name and Address of Nominee(s)	Date of Birth	Name and Address of Guardian (to be furnished in case the Nominee is a minor)	Signature of Nominee / Guardian of Nominee (Optional)	Proportion (%) in which the units will be shared by each Nominee (should aggregate to 100%)
Nominee 2				
Nominee 3				

OR

NON INTENTION TO NOMINATE : (Mandatory for new folios of individuals where mode of holding is single and who do not wish to nominate)

I/We hereby confirm that I/we do not wish to exercise the right of nomination in respect of units subscribed / purchased by me / us.

SIGNATURE(S)

First / Sole Applicant

Second Applicant

Third Applicant

10. DOCUMENTS ENCLOSED (Please ✓)

- Memorandum & Articles of Association Trust Deed Bye-Laws Partnership Deed
 Certificate of Incorporation LLP Agreement Resolution / Authorisation to invest
 Power of Attorney PAN Proof List of Authorised Signatories with Specimen Signature(s)

APPLICATIONS ENCLOSED (Please ✓)

- SIP Enrolment Form (For Investments through Post Dated Cheques)
 SIP Enrolment Form (For Investments through ECS /Direct Debit Facility/Standing Instruction)
 STP Enrolment Form Third Party Payment Declaration Form Multiple Bank Account Registration Form

11. DECLARATIONS & SIGNATURE/S (refer instruction 11)

I/We have read and understood the contents of the Scheme information Document(s) of HDFC Multiple Yield Fund/ HDFC Multiple Yield Fund - Plan 2005 and Statement of Additional Information of HDFC Mutual Fund. I/We hereby apply to the Trustee of HDFC Mutual Fund for allotment of Units of the respective Scheme(s) and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s) and I/we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. **The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.**

I / We hereby declare that I / We am / are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I / We declare that the information given in this application form is correct, complete and true stated.

Applicable to NRIs 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 normal banking channels or from funds in my / our Non-Resident External / Ordinary Account / FCNR Account.

- Please (✓) Yes No
 If yes, (✓) Repatriation basis
 Non-repatriation basis

DD	MM	YYYY

SIGNATURE/S

First / Sole Applicant / Guardian	Please write application Form No. / Folio No. on the reverse of the Cheque / Demand Draft.
Second Applicant	
Third Applicant	

Particulars

Scheme Name / Option	<input type="radio"/> HDFC MULTIPLE YIELD FUND <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment	<input type="radio"/> HDFC MULTIPLE YIELD FUND - PLAN 2005 <input type="checkbox"/> Growth Option <input type="checkbox"/> Dividend Option <input type="radio"/> Payout <input type="radio"/> Reinvestment
Cheque / DD No. / Date		
Drawn on (Name of Bank and Branch)		
Amount in figures (₹)		