

Common Application Form for TIIIF, TIIBA, TGSF, TISTIP, TPIF, TIOF, TMIP, FTIMP, TIUBF, TITMA, & TIMMA

Distributor Information		For Office Use Only	
Advisor Code*	Sub-broker/Branch Code	Application received	
ARN-9686		99990011137	
* AMFI Registered Distributors			

The upfront commission on investment made by the investor, if any, shall be paid to the ARN Holder (AMFI registered distributor) directly by the investor, based on the investor's assessment of various factors including service rendered by the ARN Holder.

Existing Unitholders (Please provide the following details in full; Please refer Instruction 2)

First Applicant Name _____ Account No. _____
 Customer Folio No. _____

Unit Holder Information

(To be filled in Block Letters. Use one box for one alphabet leaving one box blank between name and surname)

Name of First/Sole Applicant _____
 Proof of KYC enclosed* _____ Date of Birth# | D | D | M | M | Y | Y | Y | Y |
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy _____ Gender Male Female
 Status: Resident Individual NRL/PIO Company/Body Corporate Partnership Trust Society HUF Bank AOP
 Sole Proprietorship Minor through Guardian # FI FII Others (Please specify) _____
 Nationality and Country of Residence _____

Name of Second Applicant _____ Date of Birth# | D | D | M | M | Y | Y | Y | Y |
 Proof of KYC enclosed* _____ Enclosed: PAN Card Copy _____ Gender Male Female
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy _____
 Status: Resident Individual NRL/PIO Minor through Guardian # Others (Please specify) _____
 Nationality and Country of Residence _____

Name of Third Applicant _____ Date of Birth# | D | D | M | M | Y | Y | Y | Y |
 Proof of KYC enclosed* _____ Enclosed: PAN Card Copy _____ Gender Male Female
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy _____
 Status: Resident Individual NRL/PIO Minor through Guardian # Others (Please specify) _____
 Nationality and Country of Residence _____

Name of Guardian _____ Date of Birth | D | D | M | M | Y | Y | Y | Y |
 Proof of KYC enclosed* _____ Enclosed: PAN Card Copy _____ Gender Male Female
 PAN No. (Mandatory)\$ _____ Enclosed: PAN Card Copy _____
 Status: Resident Individual NRL/PIO Others (Please specify) _____

Nationality and Country of Residence _____ Relationship with Minor Parent Guardian

*Please provide copy of the KYC acknowledgement issued by CVL (Mandatory for all investors for investments of value Rs. 50,000 & Above), *PAN: In terms of SEBI circular dated April 27, 2007, verification of PAN is mandatory for all Unitholders (including joint holders, guardians in case of minors, PoA holders and NRIs) w.e.f. July 2, 2007 irrespective of the amount of transaction. Please submit photocopy of the PAN card (alongwith the original for verification, which will be returned across the counter); # Date of Birth - mandatory for Minors.

I/We would like to invest in

Separate cheque/demand draft required for each investment, drawn in favour of scheme name. Please fill up the scheme name(s) and the plan option you may refer to the Redimator for more details.

Scheme Names (Please tick (✓))		Power of Attorney (POA) Details	
<input type="checkbox"/> TIIIF <input type="checkbox"/> TIIBA <input type="checkbox"/> TGSF <input type="checkbox"/> TISTIP <input type="checkbox"/> TIOF	<input type="checkbox"/> TPIF <input type="checkbox"/> TIOF	Name of POA Holder _____	
<input type="checkbox"/> TMIP <input type="checkbox"/> FTIMP <input type="checkbox"/> TIUBF <input type="checkbox"/> TITMA <input type="checkbox"/> TIMMA	<input type="checkbox"/> TPIF <input type="checkbox"/> Short Term	Enclosed: * <input type="checkbox"/> Proof of KYC <input type="checkbox"/> PAN Card Copy	
Plan / Options (Please tick (✓))		Date of Birth D D M M Y Y Y Y	
<input type="checkbox"/> Lumpsum	Plan _____	PAN No. (Mandatory)\$ <input type="checkbox"/> _____	
<input type="checkbox"/> Systematic Investment Plan	Option _____ (Less DD Charges)	Status: (Please tick (✓))	
Net Amount Paid _____		<input type="checkbox"/> Resident Individual <input type="checkbox"/> NRL/PIO	
Payment Details* _____		<input type="checkbox"/> Others (Please specify) _____	
Cheque/DD No. _____ Bank, Bank A/C No. and Branch _____		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

Please use separate application forms for Lumpsum and Systematic Investment Plan, please fill the SIP Auto Debit (DCS/Direct Debit) form alongside and submit together with the application form.
 If you have an existing account in the selected optional above, this purchase will be treated as an additional purchase in the same account. If you prefer to have a new account in the same scheme please tick 'Yes' Instructions: 1, 2 For payments by demand draft of Rs. 50,000 & above, please attach proof of debit to your bank account by way of a copy of the DD request enclosing debit to your account or a letter from your banker confirming the account debited for issue of the DD. (b) If the payment is not made from the investor's account, issuers of the payment instrument must complete a 3rd Party Declaration.

Acknowledgement

Received from _____ Pin _____

Scheme Name	Plan/Option	Payment Details
_____	<input type="checkbox"/> Lumpsum <input type="checkbox"/> Systematic Investment Plan	Amount _____ Cheque/DD No. _____ Date _____ Bank and Branch details _____

Address (Mandatory if you have not completed your KYC process via CVL, else the address of the 1st Holder as registered with CVL will be automatically updated in our records)

City _____ State _____ Country _____ Pincode _____
Overseas Address for NRIs/PIOs _____
City _____ State _____ Country _____ Pin/Zip _____

Contact Details (Please provide your contact details even if you have already submitted your KYC acknowledgement)

If the Applicant is Sole Proprietorship Firm, please provide the name of Sole Proprietor. If HUF, please provide the name of Karta. In case of other Non-Individuals, please provide the details of Contact Person.

Name _____
Tel | _____ | Office _____ | Residence _____ | Mobile _____ | Fax _____
STD Code _____

Franklin Templeton 'Easy' Services

1. Franklin Templeton Easy e-Update: Receive account statements, annual reports and other information instantly by Email *
Email Address: _____
 I / We wish to receive the above by email
 I / We do not wish to receive the above by email
 2. Franklin Templeton Easy Web: Access your account and transact online at www.franklintempletonindia.com using your HPIN
 Yes, I would like to receive my HPIN
 No
 3. Franklin Templeton Easy Call: Just call 1800 425 4255 or 6000 4255 to access your account using TPIN
 Yes, I would like to receive my TPIN
 4. Franklin Templeton Easy Mobile: Get instant SMS alerts to confirm your transactions *
Mobile Number _____
I/We wish to register for SMS updates on my/our mobile phone. Yes No
- * Note: Where the investor has not opted for any option or has opted for both options, the application will be processed as per the default option, i.e., receive the account statement, annual report and other correspondence by E-mail and receive SMS updates on mobile.

Bank Details (Mandatory - For new investors) - For payment through electronic mode, please attach a cancelled cheque leaf or a copy of the cheque.

Bank Name _____
(Do not abbreviate)
Account No. _____ Branch/City _____
Please provide the full account number
Branch _____ Pin _____
Address _____
Account type For Residents Savings Current | For Non-Residents NRO NRE | Others _____
 Repatriable Non-Repatriable
*RTGS code _____ *NEFT code _____ *MICR code _____

*Note: For more details on RTGS/NEFT/MICR codes, please refer detailed instructions in page 33.

Direct Credit Facility is currently available with: ANB Amro Bank, Citibank, Development Credit Bank, Deutsche Bank, HDFC Bank, IDBI Bank, ICICI Bank, Koah Mahindra Bank, Standard Chartered Bank, YES Bank & Axis Bank. Please provide a cancelled, signed cheque of the bank account you wish to register for Direct Credit. If you do not provide a cancelled and signed cheque, Franklin Templeton will record the new bank details as provided, but reserves the right to effect payments of dividends and redemptions by way of a cheque or payment instrument till such time that the account details provided can be verified. I/We DO NOT wish to avail direct credit facility. (Please tick)
Please verify and ensure the accuracy of the bank details provided above and as shown in your account statement. Franklin Templeton cannot be held responsible for delays or errors in processing your request if the information provided is incomplete or inaccurate.

Nomination Details (To be signed by all the joint holders irrespective of the mode of holdings. In case of more than one nominee, please submit a separate form available with any of our ISCs or on our website).

Nominee Name & Address _____
Guardian name & address (if nominee is a minor) _____
Signature of Nominee/Guardian _____
Witness Name & Address _____
Signature of Witness _____

Declaration

Having read and understood the contents of the Statement of Additional Information, Scheme Information Document of the Fund, the Key Information Memorandum and the Addenda issued till date, I/ we hereby apply to the Trustees of Franklin Templeton Mutual Fund for units of scheme(s) of Franklin Templeton Mutual Fund as indicated above, and agree to abide by the terms, conditions, rules and regulations of the Fund as on the date of this investment and confirm that the monies invested in the fund legally belong to me / us. I / We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment.

* I / We confirm that I am / we are Non-Resident Indians / Persons of Indian Origin but not United States persons within the meaning of Regulation (S) under the United States Securities Act of 1933, as amended from time to time, and I / We hereby further confirm that the monies are remitted from abroad through approved banking channels or from my/our monies in my/our NRE/NRO Account.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I further agree not to hold Franklin Templeton Investments liable for any consequences in case of any of the above particulars being false, incorrect or incomplete. I hereby undertake to promptly inform the mutual fund of any changes to the information provided hereinabove and agree and accept that the Mutual Funds, their authorized agents, representatives, distributors (the Authorized Parties) are not liable or responsible for any losses, costs, damages arising out of any actions undertaken or activities performed by them on the basis of the information provided by me as also due to my not informing / delay in informing such changes. I hereby authorize the mutual fund to disclose, share, rent in any form, mode or manner, all / any of the information provided by me to Authorized Parties including financial intelligence unit-india (FIU-IND) including all changes, updates to such information as and when provided by me without any obligation of advising me/us of the same. I hereby agree to provide any additional information / documentation that may be required by the Authorized Parties, in connection with this application.

I/We confirm and declare that I / We have read and understood the terms and conditions for HPIN usage and online transactions / TPIN/ Email services and also the disclaimer and terms and conditions as posted on the website www.franklintempletonindia.com. I / We agree and shall abide by the norms, terms and conditions for HPIN usage and online transactions / TPIN/ Email services and agree not to hold Franklin Templeton Investments responsible for any action relating to the use of HPIN/ TPIN/ Email services facility.

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.

Date: _____ Place _____
* Applicable to Non-Resident investors
Disclaimer: In the event of any KYC Application Form being subsequently rejected for lack of information / deficiency / insufficiency of mandatory documentation, the investment transaction may be cancelled and the amount may be redeemed at applicable NAV, subject to payment of exit load, wherever applicable. However, in case of subscriptions in scheme where Units are under a lock - in period as prescribed in the respective Scheme Information Documents (including ELSS Schemes) or a New Fund Offer, allotment may be done only on confirmation from the Central Agency that the KYC is final and if the Central Agency informs that the KYC is cancelled the original amount invested may be refunded.



For investment related enquiries, please contact:
Franklin Templeton Investments Service Centres
Ph: 1-800-425 4255 or 6000 4255 (If calling from a mobile phone, please prefix the city STD code, local call rates apply for both numbers) from 8am to 9pm, Monday to Saturday.
Email: service@templeton.com
www.franklintempletonindia.com

CHECK LIST: Please ensure the following : • Application form is complete in all respects and signed by all Applicants • Bank Account details are filled
• You have registered Permanent Account Number (PAN) for all holders, including joint holders, guardians, PoA holders & NRI s and submitted the necessary proof (refer instructions) • Appropriate Options are filled up • Cheques/DDs should be drawn in favour of the respective fund name • If you are investing for the first time, please ensure that you fill in the contact details for us to contact you in case of any discrepancy in the form. • You have provided a copy of the KYC acknowledgement for all applicants, guardians for minors and POA holders