COMMON APPLICATION FORM Application No. FOR SYSTEMATIC INVESTMENTS Please read INSTRUCTIONS (Page 24-26) carefully. All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS. ARN-2405 FOR OFFICIAL USE ONLY Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. 1 EXISTING UNITHOLDERS INFORMATIONIf you have an existing folio no. with PAN & KYC validation, please mention your name & folio No. and proceed to Step 4 Folio No. 2 APPLICANT(S) DETAILS (Please Refer to Instruction No. II (b)) Mandatory information – If left blank the application is liable to be rejected. Date of Birth* D D M M Y Y Y 1st Applicant PAN* Enclosed (Please ✓)§ Attested PAN Card ○ KYC Acknowledgement Letter Name of *# Natural guardian Enclosed (Please ✓)§ PAN* Relationship with KYC Acknowledgement Letter Minor applicant Court appointed guardian Date of Birth D D M M Y Y Y Y 2nd Applicant PAN* Enclosed (Please ✓)§ Attested PAN Card KYC Acknowledgement Letter D D M M Y Y Y Y Date of Birth 3rd Applicant PΔN* Enclosed (Please ✓)§ Attested PAN Card KYC Acknowledgement Letter § For PAN & KYC requirements, please refer to the instruction Nos. II b(4), V(I) & X * Name of Guardian/Contact Person is Mandatory in case of Minor/Non-Individual Investor. For documents to be submitted on behalf of minor folio refer instruction IIb(2) Mode of holding [Please tick (✓)] Status of First Applicant [Please tick (✓)] ○ Others Minor
 NRI/PIO Resident Individual ○ HUF Sole Proprietorship Partnership Firm ○ Single O Joint Anyone or Survivor Bank/FI AOP/Bol O FII (Default option: Anyone or Survivor) Trust Club/Society Correspondence Address (Please provide full address)* Overseas Address (Mandatory for NRI / FII Applicants) Tel. (Off.) Tel. (Res.) Fax Mobile **Fmail** Occupation [Please tick (/)] Professional Business Retired Housewife Service Student Others (Please specify) ○ Please ✓ if you wish to receive Account statement / Annual Report/ Other statutory information via Post instead of Email Please ✓ any of the frequencies to receive Account Statement through e-mail f: Daily Weekly Monthly Quarterly Half Yearly Annually * Mandatory information – If left blank the application is liable to be rejected. f Please refer to instruction no.IX 3 BANK ACCOUNT DETAILS OF FIRST APPLICANT (Please Refer to Instruction No. III) Account Number Account Type ○ Current ○ Savings ○ NRO ○ NRE ○ FCNR MANDATORY Name of Bank **Branch Details** 9 Digit MICR code 11 Digit IFSC Code ○ NSDL OR ○ CDSL 4 DEMAT ACCOUNT DETAILS OF FIRST APPLICANT (Please refer Instruction No. XI) Depository Participant (DP) ID (NSDL only) Beneficiary Account Number (NSDL only) Depository Participant (DP) ID (CDSL only)

> FOR ANY ASSISTANCE OR FURTHER INFORMATION PLEASE CONTACT US **ICICI Prudential Asset Management Company Limited**

3rd Floor, Hallmark Business Plaza, Sant Dyaneshwar Marg, Bandra (East), Mumbai - 400 051. India

Application No.

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