

Application Form
Please read Key Information Memorandum, the instructions and product labelling before filling this application

KEY PARTNER/AGENT INFORMATION (Investors	Applying under direct pla	on should mention "DIRECT	" in APN Column)
KET PARTNER/AGENT INFORMATION (INVESTORS	Applying under direct pia		
Distributor/ RIA Code S	Sub Agent ARN	Sub Agent Code/Bank Branc Internal Code	Number (EUIN)
ARN-181211			E528682
* EUIN Declaration (Only where EUIN box is left blank) - EUIN Declaration			
or advice by the employee/relationship manager/sales person of the a person of the distributor/sub broker and the distributor has not charged			ness, if any, provided by the employee/ relationship manager/sales
Signature of Sole/First Applicant/Guardian	Signature of Se	econd Applicant	Signature of Third Applicant
1. EXISTING INVESTOR FOLIO NUMBER		2. MODE OF	HOLDING [Please tick (✓)]
		Single	Joint (Default) Any one or Survivor
3. TRANSACTION CHARGES FOR APPLICANTS T	HROUGH DISTRIBUTOR	S ONLY (Please Refer Instru	uction No.V) [Please tick (√)]
☐ I am a First time investor across Mutual Funds OR	I am an existing investo	r in Mutual Funds	
In case the purchase/subscription amount Rs 10,000/- o			charges, the same are deductible as applicable from the
purchase/subscription amount and paid the distributor. Ur			
4. APPLICANT DETAILS (Mention name as per you sole/First	ur PAN / Income Tax Dep	artment (ITD)) (Mandatory to	
Applicant Mr. /Ms./M/s			DOB D D M M Y Y Y Y
Name of Guardian if first applicant is minor/ Contact Person for non individuals Mr. /Ms./M/s			
	uardian's Relationship with I	Minor Proof	of Date of Birth and Guardian's Relationship with Minor
of Guardian	Father Mother Court	Appointed Guardian	rth Certificate
PAN / PEKRN	CKYC ID		
	(CKIN)		Note: LEI No. is Mandatory for transaction amount ₹50 Crs and above for Non Individual. (Refer instruction No.XV)
LEI No.:	Valid upt		
Resident Individual Sole Proprietor Public Limited Company	FPI Category I Banks		iety/ NGOs* (Enter Registration No. of Darpan Portal)
	FPI Category II Defence Establishment		Organization/Charities* (Enter Registration No. of Darpan Portal) * Mandatory to fill Point No. 11 of this
On Behalf of Minor Financial Institutions Partnership Firm/LLP	FPI Category III Government Body	☐ Mutual Fund FOF Schemes ☐ Others (PI	ease specify) Application Form.
Are you involved / providing any of the mentioned services : (Applicable only for Non In	ndividuals) Foreign Exchange/ Money Lending / Par	Money Changer Services wning	Gaming / Gambling / Lottery / Casino Services None of the above
Correspondence Address (Address details will be updated as per you	r KYC records with CKYC / KRA)	Overseas Address (Mandatory for N	IRI / FPI Applicants & PIO's)
House/Flat No.			House/Flat No.
Street Address			Street Address
City/Town State		City/Town	State
Country Pin Code		Country	ZIP Code
Tel. (Res.) (STD Code)	Tel. (Off.) (Country Code)		Fax (Country Code)
Mobile No.	Email ID (CAPITAL	Letters Only)	
Email ID belongs to Self Spouse Depend	ent Children		☐ Guardian in case of minor ☐ Others
	ent Children Dependent S		Guardian in case of minor Others
Investors providing Email Id would mandatorily receive Statement of Ac	counts/ Annual Report / Abridged S	Summary/ Statutory & other documents	on email. Please register your Mobile No & Email Id with us to get
transaction alerts via SMS & Email, respectively. I hereby declare that I s Physical mode (Applicable only for investors who have not specified the		e in Mobile Number/Email ID. 🗌 I wish t	o receive scheme wise annual report or abridged summary through
Second Mr. (Ma. (M/a	<u> </u>		DOB D D M M Y Y Y Y
Applicant Mr. /Ms./M/s	CKYC ID		
PAN / PEKRN	(CKIN)		STATUS : Resident Individual NRI
Mobile No.	Email ID (CAPITAL	Letters Only)	
Email ID belongs to	ent Children 🗌 Dependent S	Siblings Dependent Parents	☐ Guardian in case of minor ☐ Others
	ent Children 🔲 Dependent S	Siblings Dependent Parents	☐ Guardian in case of minor ☐ Others
Third Applicant Mr. /Ms./M/s			DOB D D M M Y Y Y
PAN / PEKRN	CKYC ID (CKIN)		STATUS : Resident Individual NRI
Mobile No.	Email ID (CAPITAL	Letters Only)	
	ent Children Dependent S		Guardian in case of minor Others
Mobile No. belongs to Self Spouse Depend	ent Children	Siblings	Guardian in case of minor Others
HELIOS MUTUAL FUNNAME of the Investor Mr/Ms/M/s :	ND - ACKNOWLEDGEME	NT SLIP	FOLIO NO.
Name of the Investor Mr/Ms/M/s : Scheme Name, Plan & Option:	Plan:	Option:	
Amount (₹):			PAN NO.
All purchases are subject to realization of payment instrument. Please retain your account statement.	this slip, duly acknowledged by the offic	cial collection center till you received APF	PLICATION NO.
www.heliosmf.in	a customercare		18002100168 (Toll Free Number)

e DEM	AT AGGGU	IT INCODMAT	ION (Massalata		41									
		NT INFORMAT estment in demater							ransaction Cum I	Holding Stateme	nt/ Cancelle	d delivery i	instruction slip.	
NSDL	DP Name				_ DP	ID I N				eficiary ount No.				
CDSL	DP Name					neficiary count No.								
6. BAN	IK ACCOUN	T DETAILS MA	ANDATORY fo	or Redempti	on / IDCW	/ Refunds.	if anv	Refer in	struction No	.III)				
Accoun			M a	<u> </u>	t o r	у				•	3 🗌 Curre	nt 🗌 NR	O NRE FCNR	
Name of	f Bank	M	a n d a	t o r	у				Bank E	3ranch				
Branch	City		PIN		lF:	SC Code F	or C	redit	via RT		ICR Code			
Please ens	sure the name on the	nis application form a	nd in your bank, acco	ount is the same. N	Mandatory to atta	ach proof in case	the pay-ou	it bank accou	nt is different from	the bank account	from where i	nvestment i	is made.	
7. INVE	STMENT &	PAYMENT DE	TAILS (Separate A	Application Form i	is required for in	vestment in each	n Plan/Opti	on. Multiple c	heques not permit	ted with Single Ap	plication For	m) (Refer	instruction No.IV)	
Scheme	e: Helios									Plan (Select	any one)	☐ Dire	ect Regular	
Option	Growth (c	default)	☐ Income	Distribution Cu		thdrawal optio	•	')		ency (if any)	e)			
Mode of	f Payment	Cheque	DD		OTBM Facilit	ty (One Time I	Bank Ma	ndate)	RTGS / NEF	T	-			
Investm	ent Amount (₹)	DD Charges (₹) Net Amou	unt (₹) Insti	ument No/TR	No.	Date		Drawn on B	ank	Bank Bra	nch	City	
						D D N	VI M V	YYY						
8. FAT	CA and CRS	DETAILS - M	andatory for Ind	lividuals - No	n Individual	Investors sho	ould mar	datorily fil	l separate FAT	CA/CRS deta	ils Form (R	lefer insti	ruction No.XIV)	
Please in		ntries in which yo		for tax purpos				on Numbe	r and it's Identi	fication type e				
		st Applicant/Gua Tax Payer	ardian Identification	2		Second Appli Tax Payer		Identificat	tion		Third A	•	Identification	
Cour	ntry	Ref. ID No	Туре	' Cour	ntry	Ref. ID No		Туре	Co	ountry	Ref. ID		Туре	
2														
3														
Country				Country of						y of Birth y of Nationality	,			
	of Nationality	idence is only India	then details of Cour		of Nationality	ot be provided. I	n case Ta	x Identification				ınctional ed	guivalent.	
										. ,	<u> </u>		•	
9. ADD	ITIONAL KY	C DETAILS (F	or Non Indivi	duals, pleas	e attach m	andatory U	JBO De	claration	Form) (Mai	ndatory)				
9. ADD	7	C DETAILS (For overnment Service Public Sector			Business		JBO De	claration Student	Agriculturist	ndatory) Forex Dealer	Others			
	ATION G	overnment Service	e/ Private Sector									se specify)		
OCCUP	ATION Go	overnment Service	e/ Private Sector								[(pleas	se specify)		
OCCUP.	icant Go	overnment Service	Private Sector Service	Professional	Business	Housewife	Retired				(pleas			
OCCUPA 1 st Appli 2 nd Appl	icant licant	overnment Service	Private Sector Service	Professional	Business	Housewife	Retired				(pleas	se specify)		
1st Appli 2nd Appli 3rd Appli Guardia	icant licant licant	overnment Service	Private Sector Service	Professional	Business	Housewife	Retired		Agriculturist	Forex Dealer	(pleas	se specify)	Date	
1st Appli 2nd Appl 3rd Appli Guardia GROSS 1st Appli	icant licant licant an ANNUAL INC	overnment Service Public Sector	el Private Sector Service	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business	Housewife	Retired	Student	Agriculturist	Forex Dealer	(plea: (se specify) se specify) se specify)	MMYYYY	
OCCUPA 1st Appli 2nd Appli 3rd Appli Guardia GROSS 1st Appli 2nd Appli	icant licant licant an ANNUAL INC	overnment Service Public Sector	el Private Sector Service	Professional	Business	Housewife	Retired	Student	Agriculturist	Forex Dealer	(pleasing pleasing p	se specify) se specify) se specify) D D D D	M M Y Y Y Y M M M Y Y Y Y	
1st Appli 2nd Appl 3rd Appli Guardia GROSS 1st Appli	icant licant licant an ANNUAL INC	overnment Service Public Sector	el Private Sector Service	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business	Housewife	Retired	Student	Agriculturist	Forex Dealer	(pleasing pleasing p	se specify) se specify) D D D D D	M M Y Y Y Y M M M Y Y Y Y	
OCCUP. 1st Appli 2nd Appl 3rd Appli Guardia GROSS 1st Appli 2nd Appl 3rd Appli	icant licant licant an ANNUAL INC	overnment Service Public Sector	el Private Sector Service	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business	Housewife	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student	Agriculturist	Forex Dealer	(plear (se specify) se specify) D D D D D	M M Y Y Y Y M M M Y Y Y Y	
OCCUP. 1st Appli 2nd Appl 3rd Appl Guardia GROSS 1st Appli 2nd Appl 3rd Appli Guardia PEP DE Are you	icant licant licant an ANNUAL INC icant licant licant licant an	overnment Service Public Sector OME DETAILS	el Private Sector Service □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Housewife ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student 25 Lacs-1 (Agriculturist	re NET-WOI (Net word not be than 1	(plear (se specify) se specify) se specify) D D D D D D	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
OCCUP. 1st Appli 2nd Appl 3rd Appli Guardia GROSS 1st Appli 2nd Appl 3rd Appli Guardia PEP DE Are you	icant licant licant an ANNUAL INC icant licant licant licant licant related to a Po	overnment Service Public Sector OME DETAILS Posed Person (P	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Person (PEP)	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Housewife □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student Control Contr	Agriculturist □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re NET-WOI (Net word not be than 1 3rd Applicant Yes No	(plea: (se specify) se specify) se specify) D D D D VY	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
OCCUP. 1st Appli 2nd Appl 3rd Appli Guardia GROSS 1st Appli 2nd Appl 3rd Appli Guardia PEP DE Are you 10. PO	icant licant licant an ANNUAL INC icant licant licant licant licant related to a Po	overnment Service Public Sector OME DETAILS	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Person (PEP)	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Housewife □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student Control Contr	Agriculturist □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re NET-WOI (Net word not be than 1 3rd Applicant Yes No	(plea: (se specify) se specify) se specify) D D D D VY	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
OCCUP. 1st Applit 2nd Appl 3rd Applit Guardia GROSS 1st Applit 2nd Applit 2nd Applit Guardia PEP DE Are you Are you of F	icant licant licant an ANNUAL INC icant licant licant icant irant irant an ANNUAL INC icant licant irant irant an ANNUAL INC icant licant irant irant irant an ANNUAL INC icant licant irant ira	OWE DETAILS Posed Person (P litically Exposed	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Below ₹1 Below ₹1	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Housewife □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student Control Contr	Agriculturist □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re NET-WOI (Net word not be than 1 3rd Applicant Yes No	(pleasing (pleasing pleasing	se specify) se specify) se specify) D D D D VY	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
OCCUP. 1st Applit 2nd Appl 3rd Applit Guardia GROSS 1st Applit 2nd Applit 2nd Applit Guardia PEP DE Are you Are you of F	icant licant licant an ANNUAL INC icant licant licant icant licant icant	OWE DETAILS Posed Person (P litically Exposed	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Below ₹1 Below ₹1	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Housewife □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student Control Contr	Agriculturist □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	re NET-WOI (Net word not be than 1 3rd Applicant Yes No Yes No	(pleasing (pleasing pleasing	se specify) se specify) se specify) D D D D VY	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
1st Appli 2nd Appl 3rd Appli Guardia GROSS 1st Appli 2nd Appli Guardia PEP DE Are you Are you 10. PO of F	icant licant licant an ANNUAL INC icant licant lica	posed Person (P litically Exposed TORNEY (POA	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Below ₹1 Below ₹1 Below ₹1	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Housewife	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student C5 Lacs-1 (C) pplicant No No Se by a Cc	Agriculturist □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Forex Dealer Representation of the second o	(plear (se specify) se specify) se specify) se specify) D D D D D D D D D D D D D D D D D D D	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
OCCUP. 1st Appli 2nd Appl 3rd Appl Guardia GROSS 1st Appli 2nd Appl 3rd Appli Guardia PEP DE Are you Are you 10. PO of F First Ap PAN Original P	icant licant licant an ANNUAL INC icant licant licant icant licant icant in ETAILS a Politically Ex related to a Po WER OF AT POA Holder) pplicant POA M	posed Person (P litically Exposed TORNEY (POA	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Below ₹1 Contact Private Sector Service Below ₹1 Contact	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business CS ₹5-10 La CS ₹5-10 La CS No C	Housewife	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student 25 Lacs-1 (pplicant No aby a Co	Agriculturist □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Forex Dealer Representation of the second o	(plear (se specify) se specify) se specify) se specify) D D D D D D D D D D D D D D D D D D D	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
1st Appli 2nd Appl 3rd Appl Guardia GROSS 1st Appli 2nd Appl 3rd Appli Guardia PEP DE Are you Are you 10. PO of First Ap PAN Original P	icant licant licant an ANNUAL INC icant licant lica	posed Person (P litically Exposed TORNEY (POA Mr. /Ms.	Private Sector Service Below ₹1 Below ₹1 Below ₹1 Below ₹1 CAN HOLDER DOM/M/S OA needs to be sully N (NPO) DECI	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business CS ₹5-10 La Applicant No No No No No No No No No N	Housewife □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student 25 Lacs-1 (pplicant No applicant v XVI).	Agriculturist Agriculturist Crore >₹1 Crore Agriculturist	re NET-WOI (Net word not be than 1 3rd Applicant Yes No Yes No ttorney, ple	(pleasing (pleasing pleasing	se specify) se specify) se specify) se specify) y Y Y Sh the (M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
1st Appli 2nd Appl 3rd Appl Guardia GROSS 1st Appli 2nd Appl 2nd Appli 2nd Appli 2nd Appli 2nd Appli Guardia PEP DE Are you Are you 10. PO of F First Ap PAN Original P	icant licant licant an ANNUAL INC icant licant licant icant licant icant licant icant licant icant cont licant icant in ETAILS a Politically Ex related to a Po WER OF AT POA Holder) poplicant POA M POA document or IN-PROFIT O are falling under 11 (43 of 1961), ar	Divernment Service Public Sector Divernment Service Public Sector Publi	Private Sector Service Below ₹1	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business CS ₹5-10 La Applicant No No Interpretation Inte	Housewife	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student 25 Lacs-1 (pplicant No aby a Cc applicant w	Agriculturist	Forex Dealer Reparate POA, the section 2 of the	(plear (se specify) se specify) se specify) y(y(shape of the content of	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
1st Applii 2nd Appl 3rd Appli Guardia GROSS 1st Applii 2nd Appli 2nd Appli 3rd Applii 2nd Applii 4nd Applii Guardia PEP DE Are you Are you Are you Are you To PO of F First Ap PAN Original P 11. NO	icant licant licant an ANNUAL INC icant licant lica	posed Person (P litically Exposed TORNEY (POA lame Mr. /Ms.	Private Sector Service Below ₹1 B	Professional Lac ₹1-5 La 1s Ye Ye ETAILS (If ti	Business CS ₹5-10 La Applicant No No Interpretation Inte	Housewife	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student 25 Lacs-1 (pplicant No aby a Cc applicant w	Agriculturist	Forex Dealer Reparate POA, the section 2 of the	(plear (se specify) se specify) se specify) y(y(shape of the content of	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	
1st Applii 2nd Appl 3rd Applii Guardia GROSS 1st Applii 2nd Appli 3rd Applii 2nd Applii Guardia PEP DE Are you Are you 10. PO of F First Ap PAN Original P 11. NO We 196 the in lif ye entity	icant licant licant licant licant an ANNUAL INC icant licant lica	posed Person (P litically Exposed TORNEY (POA Imme Mr. /Ms. Proposed Person (P Interest of the proposed Posed TORNEY (POA Interest of the proposed Posed Interest of the proposed Posed	Private Sector Service Below ₹1 B	Professional □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Business CS ₹5-10 La t Applicant No No he investment th Please Re tuted for religious Registration Lure to get above applicable. We	Housewife	Retired □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Student	Agriculturist Agriculturist Crore >₹1 Cro Agriculturist Agric	re NET-WOI (Net word not be than 1 3rd Applicant Yes No Yes No ttorney, ple DO eparate POA, tt	(pleasing (pleasing pleasing	se specify) se specify) se specify) your se specify) You shall be provided the pro	M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y M M Y Y Y Y	

Helios Capital Asset Management (India) Private Limited 515 A, 5th Floor, The Capital Plot C70, Bandra-Kurla Complex Bandra East, Mumbai-400 051.

Computer Age Management Services Ltd New No 10. Old No. 178, Opp. to Hotel Palm Grove, MGR Salai (K.H. Road), Chennai-600 034.

⊕ www.heliosmf.in	customercare@helioscapital.in	18002100168 (Toll Free Number)

A) I/We wish to nominate as under	imp	olications / issues involved in non- / our legal heir(s) would need to s	appointment of any n submit all the requisit	point any nominee(s) for my mutual to ominee(s) and am/ are further aware e documents issued by the Court or so funits in favour of the legal heir(s), ba	that in case of my demise / dea such other competent authority,	th of all the unit ho as may be requir	olders in the folio, red by the Mutual		
Name of Nominee(s) (IN CAPITALS) (Mandatory)	PAN	Nominee Relationship (Mandatory)* (Proof to be attached)	Date of Birth	Name of the Guardian (Mandator PAN and Address of Guardian (Optional)	Relationship with	Signature of Nominee (Optional)/	Allocation % to each Nominee (should		
			(Mandatory to	be furnished in case the Nominee is a minor)	Nominee (Mandatory)	Guardian of Nominee (Mandatory)	aggregate to 100%) (Mandatory)		
				NAME	Mother Father				
Nominee 1			DD MM YYYY	PAN	Legal Gaurdian				
Nominee 2			DD MM YYYY	NAME	☐ Mother ☐ Father				
			DD WIWI Y Y Y Y	PAN	Legal Gaurdian				
Nominee 3			DD MM YYYY	NAME	☐ Mother ☐ Father ☐ Legal Gaurdian				
I/We have read and understood the ir of the folio(s) mentioned above. To be signed by ALL holders, irrespect		•	abide by the same.	The instructions contained herein s	supercedes all previous nomi	nations made by	me/us in respec		
cannot	gnature of Sole/First Ap	plicant	Signature of	Second Applicant	Signature of	Signature of Third Applicant			
3. RESOLUTION OF DISPU	. `	· · · · · · · · · · · · · · · · · · ·		struction No.XVII) ion and/or online arbitration ir	nstitution in India.				
4. DECLARATION AND SI	GNATURE								
We have read, understood the terms an ax Compliance Act (FATCA) and Commo is may be applicable to me/us from time is follows: I/We am/are eligible Investor(s aws. I/We am/are authorised to make this hand the amount invested in the Scheme is by the Government of India or any Statut of all Schemes managed by you, to the all edifferent competing Schemes of varione/us are correct and complete. I/We het he Fund, its Sponsor/s, Trustees, Asset udicial, quasi-judicial authorities/agencies/olicy of the AMC, for which my/our detail my indicative portfolio and/or any indicatirhis will override the registry on DND / DI	n Reporting Standards (CRS to time and agree to comply) as per the scheme related is investment as per the Conthrough legitimate sources ory Authority. RIA Declaration over-mentioned SEBI-Regis us Mutual Funds from amore deby agree and authorize you Management Company, its including but not limited to F is can be shared with various ve yield by the Fund/AMC/fits	o) under FATCA & CRS provision or with the same as a Unitholder. I / documents and not prohibited fron stitutive documents/ authorization(nnly and is not designed for the proving the proving of the province of the proving of the province of the proving of the province of the proving of the	If the Central Board of We hereby apply to that a accessing capital manners, I/We have not rec- pose of contravention nsent to share/provide ARN holder has dis- commended to me/u- prm/manner/mode that y service providers, S. J-IND) etc without an ted in foregoing Para	Direct Taxes notified Rules 114 F to 1'ne Trustees for allotment of Units of tharkets by any order/ruling /Judgment elved nor been induced by any rebate or evasion of any Act / Regulations / e the transactions data feed/portfolio closed to me/us all the commissions (s. I/We hereby declare that the above a above information and/or any part o SEBI registered intermediaries for sing vintimation/advice to me/us. I/We hav and I/We hereby consent to the same	14H, as part of the Income-tax R les Scheme(s) of Helios Mutual I setc. passed by SEBI/Statutory A e or gifts, directly or indirectly, in R les Notifications / Directions holdings/NAV etc. in respect of in the form of trail commission of it individually in the unc if it including the changes/up- de gle updation / submission, any e read and understood the purp b. I/we hereby confirm that I/we	ules, 1962, and su- Fund ('Fund') and uthority or Courts making this investor or any other Appli my/our investmen or any other mode dersigned and the ates that may be p Indian or foreign sose(s), as describ have not been offe	ich other regulatio confirm and decla in India and Forei thement. I/We decla icable Laws enact ts under Direct Pl., payable to him particulars given provided by me/us statutory, regulato d under the Priva ered/ communicat		
Signature of Sole/First	Applicant/Guardian	Si	gnature of Seco	and Applicant	Signature of	Third Applic	ant		

CHECKLIST FOR APPLICATION FORM

IMPORTANT POINTS TO BE NOTED:

- * Effective from April 1, 2024, KYC status for the investors new to Helios Mutual Fund should be Validated or the application should be submitted along with the duly completed Re-KYC form with valid proofs. For more information refer following link: https://www.heliosmf.in/kyc-norms/
- * As per the New PAN validation process effective from April 30, 2024, name & date of birth on the application should be mentioned as per Income Tax Department (ITD) / PAN Card.
- Effective from May 15, 2024, Non-Resident Indian (NRI) Investors, can transact in Mutual Fund till April 30, 2025, if their KYC status is "Registered.
- It is mandatory to provide nomination details or opt out declaration for folios opened by individuals with single mode of holding. Nomination shall be optional for jointly held Mutual Fund folios.

Please submit the following documents with your application (where applicable)

SR.No.	Documents	Individuals	NRIs/ PIO/ OCI	Minors	Companies / Body Corporates	Trusts	Societies	HUF	Partnership Firms / LLP	FPIs	Investments through Constituted Attorney
1	Signed A/c Payee cheque/draft favouring the scheme	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
2	Copy of cancelled cheque (Required where pay out bank details are different from the instrument bank)	✓	✓	~	✓	✓	✓	✓	✓	✓	✓
3	Resolution / Authorisation to invest				✓	✓	✓		✓	✓	
4	List of Authorised Signatories with Specimen Signature(s)				✓	✓	✓		✓	✓	✓
5	Memorandum & Articles of Association				✓						
6	Trust Deed					✓					
7	Bye-Laws						✓				
8	Partnership Deed / Deed of Declaration							✓	✓		
9	Proof of PAN & KYC / CKYC - KIN number (including for guardian)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
10	Foreign Inward Remittance Certificate		✓							✓	
11	Date of Birth Certificate or School Living Certificate or Passport of Minor evidencing relationship with Guardian			✓							
12	Declaration for Identification of Beneficial ownership				✓	✓	✓	✓	✓	✓	✓
13	FATCA / CRS	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
14	PIO/OCI (As applicable)		✓								