



# ICICI PRUDENTIAL TRANSPORTATION AND LOGISTICS FUND

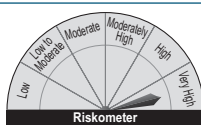
(An open ended equity scheme following transportation and logistics theme)

Application Form for Resident Indians and NRIs/PIOs. Investor must read Key Information Memorandum and Instructions before completing this form. All sections to be completed in ENGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS.

**This Product is suitable for investors who are seeking\*:**

- Long term capital appreciation
- An open ended equity scheme following transportation and logistics theme

\* Investors should consult their financial advisers if in doubt about whether the product is suitable for them



**Scheme Riskometer**  
Investors understand that their principal will be at Very High risk

Application No.

New Fund Offer Opens on	October 06, 2022
New Fund Offer Closes on	October 20, 2022

It may be noted that risk-o-meter of the Scheme specified above is based on the scheme characteristics and may vary post NFO, when the actual investments are made. The same shall be updated in accordance with provisions of SEBI circular dated October 5, 2020 on Product labelling in mutual fund schemes on ongoing basis.

ARN (BROKER CODE (ARN CODE)/ RISK METER CODE#)	SUB-BROKER ARN CODE	SUB-BROKER CODE (As allotted by ARN holder)	Employee Unique Identification No. (EUIN) <b>E053085</b>
<b>#By mentioning RIA/PMRN code, I/we authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund.</b>			
<b>Declaration for "execution-only" transaction (only where EUIN box is left blank) (Refer Instruction No. X). – I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.</b>			
SIGNATURE OF SOLE / FIRST APPLICANT	SIGNATURE OF SECOND APPLICANT	SIGNATURE OF THIRD APPLICANT	

### TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY [Refer Instruction IX]

In case the subscription (lumpsum) amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, Rs 150/- (for first time mutual fund investor) or Rs 100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid the distributor. Units will be issued against the balance amount invested.

Investor's name should be as per the PAN Card

<b>1 EXISTING UNITHOLDERS INFORMATION</b>	If you have an existing folio no. with PAN & KYC validation, please mention your name & folio No. and proceed to Step 4
Name Mr. Ms. M/s	FOLIO No.

### 2 APPLICANT(S) DETAILS [Please Refer to Instruction No. II (b)] (Applicant's name should be as per PAN)

<b>SOLE / 1<sup>ST</sup> APPLICANT</b>	Mr. Ms. M/s	FIRST	MIDDLE	LAST
PAN/PEKRN*	KYC Id No.¥	Enclosed (Please ✓)* <input type="radio"/> KYC Acknowledgement Letter		Date of Birth**
LEI Number	(Legal Entity Identifier Number is for Transaction value of INR 50 crore and above. See Instruction No. XIX)			
<b>NAME OF GUARDIAN (in case First/Sole applicant is minor)/CONTACT PERSON-DESIGNATION/PoA HOLDER (in case of Non-Individual Investors)</b>				
Mr. Ms.	FIRST	MIDDLE	LAST	
PAN/PEKRN*	<input type="checkbox"/> KYC Proof Attached (Mandatory)	Relationship with Minor applicant: <input type="radio"/> Natural guardian <input type="radio"/> Court appointed guardian		Date of Birth
KYC Id No.¥				D D M M Y Y Y Y

<b>2<sup>ND</sup> APPLICANT</b>	Mr. Ms. M/s	FIRST	MIDDLE	LAST
PAN/PEKRN*	KYC Id No.¥	Enclosed (Please ✓)* <input type="radio"/> KYC Acknowledgement Letter		Date of Birth
D D M M Y Y Y Y				

<b>3<sup>RD</sup> APPLICANT</b>	Mr. Ms. M/s	FIRST	MIDDLE	LAST
PAN/PEKRN*	KYC Id No.¥	Enclosed (Please ✓)* <input type="radio"/> KYC Acknowledgement Letter		Date of Birth
D D M M Y Y Y Y				

If mandatory information left blank, the application is liable to be rejected. ¥ Individual client who has registered under Central KYC Records Registry (CKYCR) has to fill the 14 digit KYC Identification Number (KIN).

### 3 BANK ACCOUNT (PAY-OUT) DETAILS OF SOLE/FIRST APPLICANT [Please Refer to Instruction No. V]

**Mandatory information – If left blank the application is liable to be rejected.** (Mandatory to attach proof, in case the pay-out bank account is different from the source bank account.) For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

<b>MANDATORY</b>	Account Number	Account Type	<input type="radio"/> Savings <input type="radio"/> Current <input type="radio"/> NRO <input type="radio"/> NRE <input type="radio"/> FCNR
	Name of Bank		
	Branch Name	Branch City	
	9 Digit MICR code	11 Digit IFSC Code	Enclosed (Please ✓): <input type="checkbox"/> Bank Account Details Proof Provided.

### 4 YOUR INVESTMENT DETAILS OF ICICI PRUDENTIAL TRANSPORTATION AND LOGISTICS FUND

<b>PLAN</b> [Please tick (✓)]:	<input checked="" type="checkbox"/> ICICI Prudential Transportation and Logistics Fund	<b>OPTIONS</b> [Please tick (✓)]:	<input type="checkbox"/> Growth option <input type="checkbox"/> IDCW Payout <input type="checkbox"/> IDCW Reinvestment
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**Target Scheme for IDCW Transfer: Any of the open ended schemes of ICICI Prudential Mutual Fund in which the IDCW declared to be transferred from the source scheme.**

**Target Scheme Name & Plan:** ICICI Prudential \_\_\_\_\_  
**Option & Sub-option:** \_\_\_\_\_

5 PAYMENT DETAILS

Amount Invested, Cheque/DD No., Cheque/DD Date, Account Type (For NRI Investors), BANK DETAILS, Account Number, BANK NAME, BRANCH & ADDRESS, City. Applications with Third Party Cheques, prefunded instruments etc. and in circumstances as detailed in AMFI Circular No.135/BP/16/10-11 shall be processed in accordance with the said circular.

6 MODE OF HOLDING

Single Joint Anyone or Survivor (Default)

7 TAX STATUS

[Please tick (✓)]

Resident Individual, On behalf of Minor, HUF, Financial Institution, NRI, Company, Body Corporate, Trust/Society/NGO, Partnership FIRM, AOP/BOI, Private Limited Company, Limited Partnership (LLP), Government Body, FPI category I, FPI category II, Public limited company, Sole Proprietorship, FPI category III, NON Profit Organization/Charities, Mutual Funds FOF Schemes, NPS Trust, Mutual Funds, Defence Establishment, Bank, Mutual Funds, Others (Please specify)

8 DEMAT ACCOUNT DETAILS (Optional - Please refer Instruction No. III)

NSDL: Depository Participant (DP) ID (NSDL only), Beneficiary Account Number (NSDL only), CDSL: Depository Participant (DP) ID (CDSL only)

9 CORRESPONDENCE DETAILS OF SOLE/FIRST APPLICANT:

Correspondence Address (Please provide full address)\*, Overseas Address (Mandatory for NRI / FII Applicants), HOUSE / FLAT NO., STREET ADDRESS, CITY / TOWN, STATE, COUNTRY, PIN CODE, Office, Residence

First Unitholder:

Mobile, Email, Mobile No.\* provided pertains to: Self, Spouse, Dependent Children, Dependent Siblings, Dependent Parents, Guardian, PMS, Custodian, POA

\*if above any option is not ticked (✓) or selected then [Self] option is considered as a default.

2nd Unitholder: Mobile, Email, 3rd Unitholder: Mobile, Email

Please tick (✓) if you wish to receive Annual Report or Abridged Summary via Post, Please tick (✓) if you wish to receive Account statement / Other statutory information via Post instead of Email, Please tick any of the frequencies to receive Account Statement through e-mail, \* Mandatory information, \*\* Mandatory in case of the Sole/First applicant is minor, # Name of Guardian/Contact Person is Mandatory in case of Minor/Non-Individual Investor.

10 FATCA AND CRS DETAILS FOR INDIVIDUALS (Including Sole Proprietor) (Mandatory)

Non-Individual investors should mandatorily fill separate FATCA Form (Annexure II) The below information is required for all applicants/guardian, Table with columns: Applicant, Place/City of Birth, Country of Birth, Country of Citizenship / Nationality

Are you a tax resident (i.e., are you assessed for Tax) in any other country outside India? Yes No [Please tick (✓)] If 'YES' please fill for ALL countries (other than India) in which you are a Resident for tax purpose i.e. where you are a Citizen/Resident / Green Card Holder / Tax Resident in the respective countries.

Table with columns: Applicant, Country of Tax Residency, Tax Identification Number or Functional Equivalent, Identification Type (TIN or other please specify), If TIN is not available please tick (✓) the reason A, B or C (as defined below)

- Reason A => The country where the Account Holder is liable to pay tax does not issue Tax Identification Numbers to its residents. Reason B => No TIN required (Select this reason Only if the authorities of the respective country of tax residence do not require the TIN to be collected) Reason C => Others, please state the reason thereof: \_\_\_\_\_

Address Type of Sole/1st Holder: Residential, Registered Office, Business; Address Type of 2nd Holder: Residential, Registered Office, Business; Address Type of 3rd Holder: Residential, Registered Office, Business

Annexure I and Annexure II are available on the website of AMC i.e. www.icicipruamc.com or at the Investor Service Centres (ISCs) of ICICI Prudential Mutual Fund.

11 KYC DETAILS (Mandatory)

Occupation [Please tick (✓)], Table with columns: Applicant, Sole/First Applicant, Second Applicant, Third Applicant, Private Sector Service, Housewife, Public Sector Service, Student, Government Service, Forex Dealer, Business, Others (Please specify), Professional, Agriculturist, Retired

<b>Gross Annual Income</b> [Please tick (✓)]									
<b>Sole/First Applicant</b>	<input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore Net worth (Mandatory for Non-Individuals) ₹ _____ as on <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> (Not older than 1 year)	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
<b>Second Applicant</b>	<input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore OR Net worth ₹ _____								
<b>Third Applicant</b>	<input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 crore <input type="radio"/> >1 crore OR Net worth ₹ _____								
<b>Others</b> [Please tick (✓)]									
<b>Sole/First Applicant</b>	<b>For Individuals</b> [Please tick (✓)]: <input type="radio"/> I am Politically Exposed Person (PEP) ^ <input type="radio"/> I am Related to Politically Exposed Person (RPEP) <input type="radio"/> Not applicable <b>For Non-Individuals</b> [Please tick (✓)] (Please attach mandatory Ultimate Beneficial Ownership (UBO) declaration form - Refer instruction no. XVII): (i) Foreign Exchange / Money Changer Services – <input type="radio"/> YES <input type="radio"/> NO; (ii) Gaming /Gambling /Lottery/Casino Services – <input type="radio"/> YES <input type="radio"/> NO; (iii) Money Lending / Pawning – <input type="radio"/> YES <input type="radio"/> NO								
<b>Second Applicant</b>	<input type="radio"/> Politically Exposed Person (PEP) ^ <input type="radio"/> Related to Politically Exposed Person (RPEP) <input type="radio"/> Not applicable								
<b>Third Applicant</b>	<input type="radio"/> Politically Exposed Person (PEP) ^ <input type="radio"/> Related to Politically Exposed Person (RPEP) <input type="radio"/> Not applicable								

## 12. NOMINATION

NOMINEE (OPT-IN) Details or OPT-OUT Declaration is **Mandatory** to process the application. Please tick (✓) from below **Option A** or **Option B** as appropriate. (Refer instruction VII).

**A) FOR NOMINATION OPT-IN:**  I/We hereby nominate the undermentioned nominee(s) to receive the amount to my/our credit in event of my/our death as follows:

Name and address of Nominee(s) [Mandatory]	PAN of the Nominee [Guardian PAN to be quoted if Nominee is Minor] [Mandatory]*	Relationship with Sole / First unit holder	Date of Birth [Mandatory]*	Name and address of Guardian [Mandatory if Nominee is Minor]*	Signature of Nominee / Guardian*	Guardian's Relationship with Nominee* [attach proof]	Allocation % to each nominee [Mandatory] (Aggregate should be 100%)
			dd/mm/yyyy			<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	
			dd/mm/yyyy			<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	
			dd/mm/yyyy			<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian	

\* Applicable in case the Nominee is a Minor. (Also, please attach a copy of the minor's birth certificate)

**B) FOR NOMINATION OPT-OUT:**  (Please tick (✓) if the unit holder does not wish to nominate anyone)

I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the issues involved in non appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my / our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

Signature of First Unit holder

Signature of 2nd Unit holder

Signature of 3rd Unit holder

## INVESTOR(S) DECLARATION & SIGNATURE(S)

The Trustee, **ICICI Prudential Mutual Fund**, I/We have read, understood and hereby agree to abide by the Scheme Information Document/Key Information Memorandum of the Scheme, Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) under FATCA & CRS provision of the Central Board of Direct Taxes notified Rules 114 F to 114H, as part of the Income-tax Rules, 1962. I/We apply for the units of the Fund and agree to abide by the terms, conditions, rules and regulations of the scheme and other statutory requirements of SEBI, AMFI, Prevention of Money Laundering Act, 2002 and such other regulations as may be applicable from time to time. I/We confirm to have understood the investment objectives, investment pattern, and risk factors applicable to Plans/Options under the Scheme(s). I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulations or any other applicable laws enacted by the Government of India or any Statutory Authority. I/We agree that in case my/our investment in the Scheme is equal to or more than 25% of the corpus of the plan, then ICICI Prudential Asset Management Co. Ltd. (the 'AMC'), has full right to refund the excess to me/us to bring my/our investment below 25%. I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs.50,000 in a year. 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 interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. I/we declare that the email address provided in the form belongs to me/us or to spouse, dependent children or dependent parents (applicable to individual investors only). I/We have read and understood the instructions on nomination and I/We hereby undertake to abide by the same. If you do not wish to receive, please call on tollfree no. 1800 222 999 (MTNL/BSNL) or 1800 200 6666 (Others).

Information/documents given in/with this application form is true and complete in all respects and I/we agree to provide any additional information that may be required by the AMC/the Fund/ Registrar and Transfer Agent (RTA). I/We agree to notify the AMC/the Fund immediately upon change in any information furnished by me.

SIGNATURE OF SOLE / FIRST APPLICANT

SIGNATURE OF SECOND APPLICANT

SIGNATURE OF THIRD APPLICANT



## ICICI Prudential Transportation and Logistics Fund

### ACKNOWLEDGEMENT SLIP (Please Retain this Slip)

To be filled in by the Investor. Subject to realization of cheque and furnishing of Mandatory Information.

Application No. \_\_\_\_\_

Name of the Investor: \_\_\_\_\_

EXISTING FOLIO NO. \_\_\_\_\_ / \_\_\_\_\_

ACKNOWLEDGEMENT

**ICICI Prudential  
Transportatio  
and  
Logistics Fund**

ICICI Prudential Transportation and Logistics Fund

**OPTION**  
[Please tick (✓)]:

Growth  IDCW Payout  
 IDCW Reinvestment  IDCW Transfer\*  
(\*Please fill in the Target Scheme details below:)

**Target Scheme (Any of the open ended schemes of ICICI Prudential Mutual Fund in which the IDCW declared to be transferred):**

**Scheme Name & Plan:** ICICI Prudential \_\_\_\_\_

**Option & Sub-Option:** \_\_\_\_\_

Amt. Rs. \_\_\_\_\_ Cheque/DD No. \_\_\_\_\_ dtd: \_\_\_\_\_ Bank & Branch \_\_\_\_\_

FOR ANY ASSISTANCE OR FURTHER INFORMATION PLEASE CONTACT US:

**ICICI Prudential Asset Management Company Limited**

Central Service Office, 2nd Floor, Block B-2, Nirlon Knowledge Park, Western Express Highway, Goregaon (East), Mumbai - 400 063, India

**TOLL FREE NUMBER:** 1800 222 999 (MTNL/BSNL) 1800 200 6666 (OTHERS)

**EMAIL:** enquiry@icicipruamc.com **WEBSITE:** www.icicipruamc.com

**For office use only**

Time stamp, date and receiver's signature

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**ICICI Prudential Transportation and Logistics Fund**  
PAN BASED MANDATE CUM SIP REGISTRATION FORM (For investment through NACH)

NFO Period: October 06, 2022  
to October 20, 2022



**PAN BASED MANDATE**

UMRN  **FOR OFFICE USE ONLY** Date

Sponsor Bank Code  **FOR OFFICE USE ONLY** Utility Code  **FOR OFFICE USE ONLY**

Tick  CREATE  MODIFY  CANCEL I/We hereby authorize **ICICI PRUDENTIAL ASSET MANAGEMENT COMPANY LIMITED** to debit (tick   SB  CA  CC  SB-NRE  SB-NRO  Other

Bank a/c number

with Bank  Name of customers bank  IFSC  or MICR

an amount of Rupees  Maximum Amount (Rupees in words)  ₹

FREQUENCY  Mthly  Qtrly  H-Yrly  Yrly  As & when presented DEBIT TYPE  Fixed Amount  Maximum Amount

PAN  Mobile No.

Reference  APPLICATION NUMBER Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

PERIOD From  To  Or  Until Cancelled

Sign: \_\_\_\_\_ Sign: \_\_\_\_\_ Sign: \_\_\_\_\_

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

**Declaration:** I/We hereby declare that the particulars given on this mandate are correct and complete and express my willingness and authorize to make payments referred above through participants in NACH/SI/any other mode as may be preferred by the AMC from time to time. I/We hereby confirm adherence to the terms of this facility offered by ICICI Prudential Asset Management Company Limited (the AMC) as specified in Terms & Conditions under Registration of OTM/PAN Based Mandate Facility and amended from time to time and of NACH (Debits). **Authorization to Bank:** This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity/corporate to debit my account. I/We have understood that I/we authorized to cancel/amend this mandate by appropriately communicating/amendment to the User entity/corporate or the or the bank where I have authorized the debit. This is to inform that I/we have registered for this facility and that my/our investment in ICICI Prudential Mutual Fund shall be made from my/our above mentioned bank account with your Bank and to debit my/our account for any charges towards mandate verification, registration, transactions, transactions, returns, etc, as applicable.



**ICICI Prudential Transportation and Logistics Fund**  
**SIP Registration-cum-Mandate Form for SIP**

Application No. \_\_\_\_\_

**New Fund Offer Opens on: October 06, 2022 | New Fund Offer Closes on: October 20, 2022**

**Investor must read Key Scheme Features and Instructions before completing this form. All sections to be completed in ENGLISH in BLACK/BLUE INK and BLOCK LETTERS.**

<b>BROKER CODE (ARN CODE)/ ARN - 48012#</b>	<b>SUB-BROKER ARN CODE</b>	<b>SUB-BROKER CODE (As allotted by ARN holder)</b>	<b>Employee Unique No. (EUIN) E053085</b>
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#By mentioning RIA code, I/We authorize you to share with the Investment Adviser the details of my/our transactions in the scheme(s) of ICICI Prudential Mutual Fund.

**TRANSACTION CHARGES FOR APPLICANTS THROUGH DISTRIBUTORS ONLY:** In case the purchase/subscription amount Rs 10,000/- or more and your Distributor has opted to receive transactions charges, the same are deductible as applicable from the purchase/subscription amount and paid the distributor. Units will be issued against the balance amount invested.

**Declaration for "execution-only" transaction (only where EUIN box is left blank) - I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.**

SIGNATURE OF SOLE / FIRST APPLICANT SIGNATURE OF SECOND APPLICANT SIGNATURE OF THIRD APPLICANT

The Trustee, ICICI Prudential Mutual Fund, I/We have read and understood the contents of the Scheme Information Document of the following Scheme and the terms and conditions of the SIP Enrolment.

FOLIO NO.   Registration via existing OTM [Please tick (✓)] Date of Birth (Refer point 21 under T&C)

Sole/First Applicant's Name (As per PAN): Mr./Ms./M/s  FIRST  MIDDLE  LAST

Scheme Name: **ICICI Prudential Transportation and Logistics Fund** | Plan: **Regular**  
OPTION: \_\_\_\_\_ SUB-OPTION: \_\_\_\_\_

Please refer instructions and Key Information Memorandum(s)/SIDs available on ICICI Prudential Mutual Fund website for options, sub-options and other facilities available under each scheme of the Fund.

Each SIP Amount: Rs.  In words: \_\_\_\_\_

SIP Frequency:  Daily (Only business days)  Weekly\*\*\*  Fortnightly\*\*  Monthly  Quarterly\* (Default is Monthly)

SIP Date#:  | SIP Start Month/Year  | SIP End Month/Year  | SIP Installments ^

\*In case of Quarterly SIP, only Yearly frequency is available under SIP TOP UP. \*\*Fortnightly is available on 1st and 16th of each moth, as applicable. \*\*\*Investors can choose anyday of the week from Monday to Friday to register under weekly frequency #In case the chosen date is a non-business day, the transaction would be processed on the next business day. ^ Number of installments have to be mentioned only in case of Daily/Weekly/Fortnightly frequencies. [Refer T&C no.12(f)]

SIP TOP UP (Optional) (Tick to avail this facility) Percentage:  10%  15%  20% other \_\_\_\_\_ (multiples of 5% only)  
TOP UP Amount: Rs. \_\_\_\_\_ \* TOP UP amount in multiples of Rs.100 only.  
Frequency:  Half Yearly  Yearly

SIP TOP UP CAP Amount: (Investor has to choose only one option - either CAP Amount or CAP Month-Year)  
Rs. \_\_\_\_\_  
OR Month-Year:

EXISTING OTM / FIRST INSTALLMENT BANK DETAILS: Cheque/DD No. \_\_\_\_\_ Cheque/DD Amount Rs. \_\_\_\_\_  
A/c No. \_\_\_\_\_ Bank Name: \_\_\_\_\_

(Please see overleaf)



**ACKNOWLEDGEMENT SLIP** (To be filled in by the investor)

**ICICI Prudential Transportation and Logistics Fund**

Folio No./ Application No. \_\_\_\_\_

Name of the Investor: \_\_\_\_\_

Scheme Name: \_\_\_\_\_ Plan & Option: \_\_\_\_\_

SIP TOP UP Amt. Rs. \_\_\_\_\_ TOP UP CAP:  Amt:Rs. \_\_\_\_\_ OR  Month-Year:

SIP Amount Rs. \_\_\_\_\_ SIP Frequency: \_\_\_\_\_ SIP Tenure: \_\_\_\_\_

Acknowledgement Stamp

**Mandatory fields in OTM form as per NPCI:** • Bank account number and Bank name • IFSC and/or MICR Code • PAN • Signatures as per bank records • SIP start date, end date or until cancelled • Account type to be selected • Name as per bank records • Transaction type to be selected • Maximum amount to be mentioned.

**GENERAL INSTRUCTIONS**

UMRN (Unique Mandate Reference Number) is provided by NPCI, which is assigned to every mandate that has been submitted to them.

Investor will not hold ICICI Prudential Mutual Fund, its registrars and other service providers responsible if the transaction is delayed or not effected or the investor bank account is debited in advance or after the specific SIP date due to various clearing cycles.

The Bank & AMC shall not be liable for, nor be in default by reason of, any failure or delay in completion of its obligations under this Agreement, where such failure or delay is caused, in whole or in part, by any acts of God, civil war, civil commotion, riot, strike, mutiny, revolution, fire, flood, fog, war, lightening, earthquake, change of Government policies, unavailability of Bank's computer system, force majeure events, or any other cause of peril which is beyond the Bank's reasonable control and which has effect of preventing the performance of the contract by the Bank.

The investor hereby agrees to indemnify and not hold responsible, AMC/Mutual Fund (including its affiliates), and any of its officers directors, personnel and employees, the Registrars & Transfer (R&T) agent and the service providers incase for any delay/wrong debits on the part of the bank for executing the debit mandate instructions for any sum on a specified date from your account. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, the investor would not hold the user institution responsible. Investor confirm to have understood that the introduction of this facility may also give rise to operational risks and hereby take full responsibility.

**Registration of OTM/PAN BASED MANDATE FACILITY:** As an investor I/we hereby request you to register me/us for availing the facility of OTM/PAN based mandate and carrying out transactions of additional purchase/redemption/switch in my/our folio through Call Centre and/or also authorize the distributor(s) to initiate the above transactions on my/our behalf. In this regard, I/we also authorize the AMC, on behalf of ICICI Prudential Mutual Fund (Mutual Fund) to call/email on my/our registered mobile number/email id for due verification and confirmation of the transaction(s) and such other purposes. The mobile number provided in the common application form will be used as registered mobile number for verification and confirmation of transactions. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information or non-confirmation/ verification of the transaction due to any reason, I/we shall not hold AMC, Mutual Fund, its sponsors, representatives, service providers, participant banks responsible in this regard. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. I/We hereby confirm that the information/documents provided by me/us in this form are true, correct and complete in all respect. I/We hereby agree and confirm to inform AMC promptly in case of any changes. I/We interested in receiving promotional material from the AMC via mail, SMS, telecall, etc. If you do not wish to receive, please call on tollfree no. 1800 222 999 (MTNL/BSNL) or 1800 200 6666 (Others).

**Maximum Amount:** The MAXIMUM AMOUNT is the per transaction maximum limit. Investor can register multiple SIPs but the amount should not exceed the maximum amount mentioned per transaction.

Generally speaking, your SIP amount will be lesser than this amount, but choosing a slightly higher limit helps you to undertake additional investments as per your choice. Always remember to mention an amount that is convenient to you.

**DEMAT ACCOUNT STATEMENT DETAILS (OPTIONAL – PLEASE REFER INSTRUCTION NO. 19)**

<b>NSDL: Depository Participant (DP) ID (NSDL only)</b>	<b>Beneficiary Account Number (NSDL only)</b>	<b>CDSL: Depository Participant (DP) ID (CDSL only)</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**YOUR CONFIRMATION/DECLARATION:** I/We hereby declare that I/we do not have any existing Micro SIPs which together with the current application will result in a total investments exceeding Rs.50, 000 in a year as described in the Instruction No.IV(d) of the common application form. 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. The AMC would not be liable for any delay in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV.

**Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)**

<b>Sole/First Holder</b>	<b>2nd Holder</b>	<b>3rd Holder</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>



## UBO - GENERAL INFORMATION AND INSTRUCTIONS

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of ultimate beneficiary owner (UBO) and submit appropriate proof of identity of such UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

### 1. Ultimate Beneficiary Owner [UBO]:

#### A. For Investors other than individuals or trusts:

- (i) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership of/entitlement to:
  - more than 25% of shares or capital or profits of the juridical person, where the juridical person is a company;
  - more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
  - more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

#### B. For Investors which is a trust:

The identity of the settlor of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

#### C. Exemption in case of listed companies / foreign investors

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies. Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client.

#### D. KYC requirements

Beneficial Owner(s) is/are required to comply with the prescribed KYC process as stipulated by SEBI from time to time with any one of the KRA & submit the same to AMC. KYC acknowledgement proof is to be submitted for all the listed Beneficial Owner(s).

#### E. UBO Codes:

UBO Code	Description
UBO-1	Controlling ownership interest of more than 25% of shares or capital or profits of the juridical person [Investor], where the juridical person is a company
UBO-2	Controlling ownership interest of more than 15% of the capital or profits of the juridical person [Investor], where the juridical person is a partnership
UBO-3	Controlling ownership interest of more than 15% of the property or capital or profits of the juridical person [Investor], where the juridical person is an unincorporated association or body of individuals
UBO-4	Natural person exercising control over the juridical person through other means exercised through voting rights, agreement, arrangements or in any other manner [In cases where there exists doubt under UBO-1 to UBO-3 above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests]
UBO-5	Natural person who holds the position of senior managing official [In case no natural person cannot be identified as above]
UBO-6	The settlor(s) of the trust
UBO-7	Trustee(s) of the Trust
UBO-8	The Protector(s) of the Trust [if applicable].
UBO-9	The beneficiaries with 15% or more interest in the trust if they are natural person(s)
UBO-10	Natural person(s) exercising ultimate effective control over the Trust through a chain of control or ownership.

For any queries/clarifications, please contact the nearest Customer/Investor Service Centres of the AMC. The list of our authorised centres is available in the section 'Contact Us' on our website [www.icicipruamc.com](http://www.icicipruamc.com).











—TARAKKI KAREIN!