<i>PICICI</i>
PRUDENTIAL TO
MUTUAL FUND

ICICI Prudential Bharat Consumption Fund

(An open ended equity scheme following consumption theme)

Application No.

New Fund Offer Opens on: March 26, 2019

New Fund Offer Closes on: April 09, 2019

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.

OKER CODE (ARN CO ARN-48012

Long term wealth creation

SUB-BROKER ARN CODE

This Product is suitable for investors who are seeking*:

An open ended equity scheme that aims to provide capital appreciation by investing in equity and

equity related securities of companies engaged in consumption and consumption related activities.

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

SUB-BROKER CODE (As allotted by ARN holder)

FOLIO No.

#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.

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 has not charged any advisory fees on this transaction.

SIGNATURE OF SOLE / FIRST APPLICANT

FIRST NAME

SIGNIATURE OF SECOND APPLICANT

SIGNATURE OF THIRD APPLICANT

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

MIDDLE NAME

2 APPLICANT(S) DETAILS [Please Refer to Instruction No. II (b)] (Names should be as per PAN)

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. 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.

EXISTING UNITHOLDERS INFORMATION – (If you have an existing folio no. with PAN & KYC validation, please mention your name & folio No. and proceed to Step 4)

AST NAME

Investors' names should be as per PAN

Mr. Ms. M/s

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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.

Guardian/Parent Name (If nominee is a minor): Address: Signature of Nominee or Parent / Guardian/Parent Name (If nominee is a minor): 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 te 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 co 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 lial in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. DECLARATION FOR AVAILING INSURANCE COVER: I am informed about the arrangement between ICICI Prudential Mutual Fund and the Insurance Company and about the details of the Document. I understand that I am eligible to avail cover under such arrangement and hereby wish to avail the said insurance cover. Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)	Depository Participant (DP) ID (NSDL only) Benefici	iary Account Number (NSDL only)	CDSL: Depository Participant (DP) II	D (CDSL only)
NOMINATION FOR SIP PLUS (Nominee details for insurance benefit at folio level): I/We do hereby nominate the underment inee to receive Insurance Coverage benefit to my / our credit in this folio no. in the event of my / our death. I / We also understand that all payments and made to such Nominee (upon such documentation) shall be a valid discharge by the AMC/Mutual Fund/Trustees. (*Please refer to terms & conditions for for Insurance coverage benefit) Nominee Name				
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 to 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 content 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 in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. DECLARATION FOR AVAILING INSURANCE COVER: I am informed about the arrangement between ICICI Prudential Mutual Fund and the Insurance Company and about the details of the Document. I understand that I am eligible to avail cover under such arrangement and hereby wish to avail the said insurance cover. Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)	o receive Insurance Coverage benefit to my to such Nominee (upon such documentation	/ our credit in this folio no. in the e	event of my / our death. I / We also	o understand that all payments and settlements
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 to 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 co 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 lial in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. DECLARATION FOR AVAILING INSURANCE COVER: I am informed about the arrangement between ICICI Prudential Mutual Fund and the Insurance Company and about the details of the Document. I understand that I am eligible to avail cover under such arrangement and hereby wish to avail the said insurance cover. Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)	ee Name		Relationship:	Date of Birth: / /
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 to 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 condition to 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 in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. DECLARATION FOR AVAILING INSURANCE COVER: I am informed about the arrangement between ICICI Prudential Mutual Fund and the Insurance Company and about the details of the Document. I understand that I am eligible to avail cover under such arrangement and hereby wish to avail the said insurance cover. Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)	an/Parent Name (If nominee is a minor):			
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 corother 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 lial in crediting the scheme collection accounts by the Service Providers which may result in a delay in application of NAV. DECLARATION FOR AVAILING INSURANCE COVER: I am informed about the arrangement between ICICI Prudential Mutual Fund and the Insurance Company and about the details of the Document. I understand that I am eligible to avail cover under such arrangement and hereby wish to avail the said insurance cover. Signature(s) as per ICICI Prudential Mutual Fund Records (Mandatory)				Signature of Nominee or Parent / Guardian
	CONFIRMATION/DECLARATION: I/We ng Rs.50, 000 in a year as described in the Instruction ode), payable to him for the different competing Sch	hereby declare that I/we do not have any n No.IV(d) of the common application form emes of various Mutual Funds from among	existing Micro SIPs which together wit i. The ARN holder has disclosed to me/us gst which the Scheme is being recomme	th the current application will result in a total investment all the commissions (in the form of trail commission or ar
Sole/First Holder Andrer Holder Holder	CONFIRMATION/DECLARATION: I/We ng Rs.50, 000 in a year as described in the Instruction odd), payable to him for the different competing Sching the scheme collection accounts by the Service PRATION FOR AVAILING INSURANCE COVER: I am int. I understand that I am eligible to avail cover under	hereby declare that I/we do not have any n No.IV(d) of the common application form emes of various Mutual Funds from among roviders which may result in a delay in applinformed about the arrangement between ler such arrangement and hereby wish to av	existing Micro SIPs which together wit . The ARN holder has disclosed to me/us gst which the Scheme is being recomme blication of NAV. ICICI Prudential Mutual Fund and the Insu	th the current application will result in a total investment all the commissions (in the form of trail commission or are unded to me/us. The AMC would not be liable for any delay