APPLICANT S) ET AILS (In case of Minor, there shall be no joint holders)  OLE/FIRST APPLICANT NAME  BIEST  MIDDLE  LAST NOCE  OR [] MINDLE  LAST NOCE  NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  NOCE  MINDLE  LAST NOCE  MINDLE  LAST NOCE  NOCE  MINDLE  LAST NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  LAST  NOCE  MINDLE  LAST NOCE  LAST  LAST  NOCE  LAST  LAST  NOCE  LAST  NOCE  LAST  LAST  LAST  NOCE  LAST  LAST	LIC NOMU	JRA N D	(	COMI	MON APPI	LICATION FOI	RM APP.	No			
ABN Code  Sub-horder S	Investors must read the l	Key Informatio	n Memorandum and	he instructio	ns before completing this Fe	orm. The Application Form should be	completed in English	and in BLOCK LETTE	RS only.		
Additional Designation   Des	KEY PARTNER / ARN HOL	DER INFORMAT	TON (Investors applying	ng under Direc	t Plan must mention "Direct"	in ARN code column) (Refer Instruction	n2 &3)				
The contraction of "conclusion of "immunicating tight without plant in the fail that of) [lead instruction to will be a provided by the provided by the fail to the control of the provided by the provided by the best instructional by the data in the control of the provided by the majoracy of classical to the fail to the control of the provided by the majoracy of classical to the distributor of the provided by the major y sleep service of the submission of the distributor of the distributor of the distributor of the provided by the major y sleep service of the submission of the distributor of the provided by the provided by the major y sleep service of the provided by the distributor of the provided by the pr	ARN Code Sub-broke		ıb-broker Code				RM Code	Time	Stamp No		
//We hereby confirms that the EUIN lose has been interdountally let blank by my /u so at this is an "execution-unity" transaction visitous any interaction or advice by the improvery retainable in any provided by the employer / relationship unity of the durindrate and the durindrate of the durindrate and the durindra								For of			
ARSACTION CIAGRAS TO ACTUAL STATEMENT THROUGH DISTRIBUTOS ONLY [Refer instruction 4]  Case the purchase/ subscription amount at 18 to 10,000 or more and your [Internation has oped in to receive Transaction Charge, the scare are deductible as applicable to the Bordivider unlaw will be paid directly by expert out to ARN Holder [AMT Trajectored Distributor base oped in to receive Transaction Charge, the scare are deductible as applicable to the Bordivider unlaw will be seen and various factors including the service rendered by the ARN Holder.  **EXESTING UNIT HOLDER INFORMATION (II) you have existing folio, pleane fill a reaction 1 and proceed to exist in 1-1.  **Did No.**  **The deducts in our records under the folio number mentiooed alongaide will apply for this application.  **APPLICANTS DETAILS (in case of Minor, there shall be no joint holders)  **DIG No.**  **APPLICANTS NAME**  **PIEST**  **STORMAN HOLDER INFORMATION (II) you have existing folio, pleane fill a reaction 1 and proceed to exist in 1-1.  **EXESTING UNIT HOLDER INFORMATION (II) you have existing folio, pleane fill a reaction 1 and proceed to exist in 1-1.  **The deduction our records under the folio number mentiooed alongaide will apply for this application.  **APPLICANTS AND (II) our pleane the properties of the state	I / We hereby confirm mployee/ relationshi	n that the EU ip manager/	JIN box has been i sales person of th	ntentionally e above dis	y left blank by me / us a tributor or notwithsta	as this is an "execution-only" tranding the advice of in-appropria	teness, if any, prov	vided b <u>y th</u> e emplo	advice by the yee / relationship		
COND APPLICANT SAME    PROPERTY	First/So										
e purchase's abbectiption anionant and payable to the Distributor. Dists will be issued against the balance amount invested. Ulfriont continuistion shall be part which the ARN Holder.  **ENSTINC UNIT HOLDER INFORMATION (if you have existing folto, please fill in section 1 and proceed to section 11.)  In the details in cour records under the folto number mentioned alongside will apply for this application.  **APPLICANT'S ID IT AILS [In case of Minor, there shall be no joint holders)  **DIALIFIERT PEPLICANT NAME  **PIEST***  **MIDDLE**  **BIDDLE**  **INDLE**  **INDLE*	RANSACTION CHAR	GES FOR API	PLICANTS THROU	GH DISTRII	BUTORS ONLY [Refer In	nstruction 4 ]					
The details in our records under the folio number mentioned alongside will apply or this application.  APPLICANT(S) DETAILS (In case of Minor, there shall be no joint holders)  DLE/FIRST APPLICANT NAME  PISST  MIDDLE  NEW NO.  MIDLE  NEW NO.  MIDLE  NEW NO.  MIDLE  NEW NO.  MIDLE  NEW NO.  MIDL	he purchase/ subscri	ption amoun	nt and payable to	the Distribu	utor. Units will be issue	ed against the balance amount in	nvested. Upfront o	commission shall b	e paid directly by th		
DEFIRST APPLICANT NAME    PIEST   MIDDLE   LST   NXC.	EXISTING UNIT HO	OLDER INFO	RMATION (If you	have existi	ing folio, please fill in so	The details in our records un		ber mentioned alc	ngside will apply		
DOB IS MANUAL DESCRIPTION DOB IS MANUAL PRINCE IN MIDDLE LAST KYC:  THIRD APPLICANT'S NAME  FIRST MIDDLE LAST KYC:  THIRD APPLICANT PAY:  AME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON – DESIGNATION (in case of non-individual Investors)  SECONDAPICANT MINOR MINOR PRESSE(*) Father Mother Court Appointed Legal Guardian  TAX STATUS Please lisk (*)  Resident Individual   Fils   NRI - NRO   HUF   Oub / Society   PRO   Body Corporate   Minor   Government Body  Trust   NRI - NRE   Bank & FI   Sole Proprietor   Partnership Firm   QFI   Others    SECONDAPPLICANT   Private Sector   Public Sector   Government Service   Business   Professional   Appriculturis   Retired   Housewif    FOREX Dealer   Others    Student   Student   Student    Forex Dealer   Others    Student   Forex Dealer   Others    Student   Forex	. APPLICANT(S) DE	<b>TAILS</b> (In ca	se of Minor, there	shall be no	joint holders)						
RECOND APPLICANT'S NAME	OLE/FIRST APPLICA	ANT NAME						LAST	кус:		
HIRD APPLICANT'S NAME    SEOND APPLICANT P.N.:   SEOND APPLICANT P.N.:   THIRD APPLICANT P.N.:		YYY	Y DOB is mand	atory in case		of attached. Please (√)					
SECOND APPLICANT PAN:   SECOND APPLICANT   Selevel to Second Panel Pa	ECOND APPLICANT	'S NAME			FIRST	MIDDLE		LAST	кус:		
AME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON - DESIGNATION (in case of non-individual Investors)    RYC	HIRD APPLICANT'S	NAME			FIRST	MIDDLE		LAST	KYC:		
RYAN	RST APPLICANT PAN :			SECON	D APPLICANT PAN : 🔲 🗆		THIRD APPLICANT PA	N:			
HIRD APPLICANT Below 1 Lac 1-5 Lacs 10-25 Lacs > 25 Lacs - 1 Crore > 1 Crore OR Net Worth    For Non-Individuals   For Non-Individual Investors (Companies, Trust, Partnership etc.)	Trust NI  KYC DETAILS (Mai CCUPATION Please tic IRST APPLICANT CCOND APPLICANT HIRD APPLICANT ROSS ANNUAL INCO	ndatory)  ck ( )  Private S  Student  Private S  Student  Private S  Student  Private S  Below 1  Net worth (	Sector Se	Public Sector Dealer Dealer Dealer Sector Dealer De	Proprietor	ent Service Business Prent Service Business Prent Service Business Prent Service Business Prent Service Servic	ofessional Agr ofessional Agr ofessional Agr (plea	riculturist Retises specify) riculturist Retises specify) riculturist Retises specify) riculturist Retises specify)	red Housewife red Housewife red Housewife red Housewife		
For Non-Individual Investors (Companies, Trust, Partnership etc.)   I am Politically Exposed Person   Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a   Yes   Is the company: [If No, please attach mandatory UBO Declaration)											
Is the company a Listed Company or Subsidiary of Listed Company or Controlled by a Listed Company: (If No, please attach mandatory UBO Declaration)  Not Applicable   Foreign Exchange / Money Charger Services   Yes   Gaming / Gambling / Lottery / Casino Services   Yes   Money Lending / Pawning   Money Charger Services   Money Lending / Pawning / Pawn		□ below 1									
MAILING ADDRESS OF FIRST / SOLE APPLICANT (Mandatory) (Refer Instruction 11)  INDICATOR OF THE INVESTOR STATE	☐ I am Politically Exposed Person☐ I am Related to Politically Exposed☐ Not Applicable			Is the company a Listed Company or Subsidiary of Listed Company or Listed Company:(If No, please attach mandatory UBO Declaration) Foreign Exchange / Money Charger Services Gaming / Gambling / Lottery / Casino Services				a	☐ Yes ☐ No		
ACKNOWLEDGEMENT SLIP  APP. No    Country   ACKNOWLEDGEMENT SLIP   APP. No    Country   ACKNOWLEDGEMENT SLIP	. MODE OF HOLDING	Please tick (	✓) □ Joint	S	ingle	one or Survivor (Default option i	s anyone or survivor)				
Comparison of the investor o	MAILING ADDRESS	OF FIRST /	SOLE APPLICAN	Γ (Mandato	ory) (Refer Instructio	n 11)					
eived an application for purchase of unite of LIC Nomura MF  m Mr/Mrs/M/s.  (Scheme Name with option)  (Name of the investor)  que/Draft No./Payment Instrument No.  Date  Bank  For   Date  Date	andmark		City	Sta	ite	Pincode	Country				
(Scheme Name with option)  m Mr/Mrs/M/s	LIC NOMUR	(TO BE I	FILLED IN BY THE IN	VESTOR)	ACKNOWLE	EDGEMENT SLIP	APP. No				
n Mr/Mrs/M/salongwith  (Name of the investor)  que/Draft No./Payment Instrument No	ceived an application for	purchase of un	ite of LIC Nomura MI					Time Stamp No.			
k Charges (in cases of Draft) of ₹	eque/Draft No./Payment			(Na	me of the investor) teBank		alo	ngwith			
ise Note : All purchases are subject to realisation of Cheque / Demand Draft / Payment Instrument.						Date		_			

	T DETAILS OF SOLI	E/FIRST APPI	LICANT (Mobile	No or Email Id.	. Refer Instru	ction No. 11)		T			
^E mail id (Please Specify) Mobile No Mobile No											
	Resi) STD Code	shall receive s	Off	STD Code	ahridged su	mmary thereof	/ acco	ount statements / sta	tutory and other	documents by em	nail
	S ADDRESS (Overse			<u> </u>			<u> </u>		itatory and outer	accuments by em	
Landmark	Landmark City State Pincode Country										
9. DEMAT ACCOUNT DETAILS* - (Optional - refer instruction 14)											
DD NAME			N	SDL					CDSL		
DP NAME DP ID											
Beneficiary A											
	to hold units in demat form s							5		. 1	
	LOUNT DETAILS OF	THE FIRST AP	PLICANT (refer i	nstruction 8) As			andato	ory for investors to pr	ovide their bank a	iccount details	
Account No.					Nar	ne of the Bank					
Type of A/c	SB Current	NRE N	NRO FCNR	Others	Pls specify	Branch			Bank City		
Refer Instruction 8.3 (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank) In case if the bank details provided by you is different from the payment bank account please enclosed a canceled cheque.											
11. INVESTMENT DETAILS [Please tick ( /)] (Refer Instruction No. 2, 3 & 10) (If this section is left blank, only folio will be created)											
			each investment, d				1	appropriate scheme na	me as well as the Pl	an/Option/SubOpt	ion.
	Cheque / DD Favour Name (refer Instruc		Plan/Option	Amount Invested (Rs.	^DD Charges	Net Amount P (Rs.)	١ -	Cheque/DD No./ UTR No. (in case of NEFT/RTGS)	Bank and Brand	ch and Account Nun	nber
Account Type (Please tick ( $\checkmark$ )) SB Current NRE NRO FCNR Others (Ps Specify) *All purchases are subject to realization of funds ^Refer to Instruction No. 10									pecify)		
12. NOMINA	ATION DETAILS (M	andatory) (R	efer Instruction	No. 16)							
☐ I/We wis	h to nominate	] I/We DO NO	T wish to nomin	ate and sign he	ere			1st	Applicant Signati	ıre (Mandatory)	
	Nominee Nan	ne and Addres	S	(	Guardian Nai	ne (in case of M	(linor	Allocation %	Nominee/ Guar	dian Signature	
Nominee 1											
Nominee 2											
Nominee 3											
DECLARATIO	ON & SIGNATURE/S							Total = 100%			
a.) Having read & understood the contents of the Scheme Information Document of the Scheme & reinvestment scheme, I/ We hereby apply for units of the scheme & agree to abide by the terms, conditions, rules & regulations governing the scheme. I/ We hereby declare that the amount invested in the scheme is through legitimate sources only & does not involve & is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Govt. of India from time to time. I/ We have understood the details of the scheme & I/ We have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I/ We confirm that the funds invested in the Scheme, legally belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the AMC, I/ We hereby authorise the AMC, to redeem the funds invested in the Scheme, in favour of the applicant at the applicable NAV prevailing on the date of such redemption & undertaking such other action with such funds that may be required by the Law. b.) For NRIs: I/ We confirm that I am / we are Non Residents of Indian Nationality / Origin & that I/ we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary. I/ We confirm that details provided by me / us are true & correct. c) 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. d.) I/We have read & understood the SEBI Circular no. MRD/DoP/Cir- 05/2007 dt. April 27, 2007 & SEBI Circular No. 35/MEM-COR/18/07-08 dt. June 26, 2007 regarding mandatory requirement of PAN. I/We confirm that I/ we are holding valid PAN card /										in the tions, laws ed by in the funds with I/ we f trail being 0. 35/ed for	
SIGN HERE				SIGN HERE				SIGN HERE			
First Applicant/ Guardian					Second Applicant				Third Applicant		
Date :		Place :		_							
			For any quer	ies please con	tact our nea	rest Investor S	Servic	e Centre or			
	Call Tr. 11	Froe Nover-L	n 1000 250 505	0			Email	l : service@licnomu	ıramf,com		
Call Toll Free Number 1800-258-5678											
				Website	: www.licno	muramf.com		7			