Principal Mutual Funds
Maker Bhavan - II, 1st Floor, 18, Sir Vithaldas Thackersey Marg,
New Marine Lines, Mumbai- 400 020.
Toll Free - 1800 22 5600 • Fax: 022-2204 4990.
Website: www.principalindia.com
E-mail: customer@principalindia.com

Application Form for Debt / Liquid Schemes

Application No.

Please read the instructions before filling the Application Form

DISTRIBUTOR INFORMATION & APPLICATION RECEIPT DATE

Broker Name & Code	Sub-Broker Code	I-Code	Registrar Serial No.	Bank Serial No.	Date & Time of Receipt
ARN- 0032					

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

1 EXISTING UNITHOLDERS DETAILS (Please note that the applicant details and mode of holding will be as per the existing Folio Number) [Refer Instruction No. B(1)]

Please fill your Folio No. and Name and then proceed to Section (6) **Common Account / Folio No.**

Name of Sole / First Unit Holder

2 NEW APPLICANT'S DETAILS (Please fill in BLOCK LETTERS with black/blue ink, use one box for one alphabet leaving one box blank between two words)

NAME OF FIRST / SOLE APPLICANT ☐ Mr. ☐ Ms

Date of Birth D D M M Y Y Y Y **PAN** Enclosed (please ✓) ☐ PAN^ ☐ KYC Acknowledgement Letter^

STATUS - ☐ Resident Individual ☐ NRI / PIO / FI ☐ Partnership Firm ☐ BOI ☐ Minor ☐ Bank / FI ☐ Society/Club ☐ Trust ☐ Company ☐ Others (Please specify)

NAME OF THE SECOND APPLICANT ☐ Mr. ☐ Ms

Date of Birth **PAN** Enclosed (please ✓) ☐ PAN^ ☐ KYC Acknowledgement Letter^

NAME OF THE THIRD APPLICANT ☐ Mr. ☐ Ms

Date of Birth D D M M Y Y Y Y **PAN** Enclosed (please ✓) ☐ PAN^ ☐ KYC Acknowledgement Letter^

Guardian Name ☐ Mr. ☐ Ms (Mandatory if any of the applicant is a Minor) / **Contact Person** (In case of non-individual Investors - PAN not required for contact person)

Date of Birth D D M M Y Y Y Y **PAN** Enclosed (please ✓) ☐ PAN^ ☐ KYC Acknowledgement Letter^

^ Refer Instruction No. D

ADDRESS OF FIRST / SOLE APPLICANT [P.O. Box Address is not sufficient]

City State Country Pin Code

OVERSEAS ADDRESS (in case the First Applicant is NRI/FII/PIO) [P.O. Box Address is not sufficient] {Refer Instruction No. B(6)}

City State Country Zip Code

CONTACT DETAILS OF FIRST / SOLE APPLICANT (Please ensure that you fill in the contact details for us to serve you better)

Phone O R Fax

Mobile ☐ I / We wish to receive updates via SMS on my mobile (Please ✓)

e-mail

I/We wish to receive the following documents via e-mail in lieu of physical document(s) [Please ✓] ☐ Account Statement ☐ Newsletter ☐ Annual Report ☐ All Statutory Returns / Information

IF APPLICANT IS A NON-RESIDENT

☐ NRI (Repatriable) ☐ FII (Repatriable) ☐ NRI Minor (Repatriable)
☐ PIO ☐ NRI (Non Repatriable) ☐ NRI Minor (Non Repatriable)

OCCUPATION OF 1ST APPLICANT / GUARDIAN (Please ✓)

☐ Business ☐ Service ☐ Profession ☐ Retired ☐ Agriculture
☐ House Wife ☐ Student ☐ Others (Please specify)

MODE OF HOLDING (Please ✓) ☐ Single ☐ Jointly ☐ Either / Anyone or Survivor **(Default Option : Jointly)**

3 PERSONAL IDENTIFICATION NUMBER (To serve you better)

Do you want a PIN assigned ? ☐ Yes ☐ No (In case you would want a PIN assigned; please submit a duly filled and signed PIN Form along with this Application. PIN form is part of the application form / available at request / can also be downloaded from our website.)

4 NOMINATION [Applicants can make multiple nomination (to the maximum of three) by filing nomination form available at our Investor Service Centres / www.principalindia.com]

I/We do hereby nominate the undermentioned Nominee to receive the Units allotted to my/our credit in my/our folio in the event of my/our death. I/We also understand that all payments and settlements made to such Nominee and Signature of the Nominee acknowledging receipt thereof, shall be valid discharge by the AMC/Mutual Fund/ Trustees.

NOMINEE'S NAME ☐ Mr. ☐ Ms

Date of Birth (in case of minor) D D M M Y Y Y Y

NAME OF PARENT / LEGAL GUARDIAN (in case of minor) ☐ Mr. ☐ Ms

ADDRESS OF NOMINEE / GUARDIAN

City Pin Code

Specimen Signature of Nominee / Guardian

... continued overleaf

ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)

ARN No:

Received from

Cheque / DD / RTGS / NEFT No. Dated: D D / M M / Y Y Y Y

Drawn on Bank & Branch

Scheme / Plan / Option / Sub-Option

Amount ₹

Please Note : All purchases are subject to realisation of payment instrument

Signature, Stamp & Date

5 BANK ACCOUNT DETAILS (Mandatory) [Refer Instruction No. C]

Bank Name (Do not abbreviate)

Account No. (Please provide the full account number) Branch / City

Branch Address Pin Code

Account Type (Please ✓) For Residents ☐ Savings ☐ Current For Non-Resident ☐ NRO ☐ NRE ☐ Repatriable ☐ Non-Repatriable ☐ Others

MICR Code* This is a 9 digit number next to your Cheque No.

Essential Enclosures : (For Direct Credit) ☐ Blank cancelled cheque ☐ Copy of cheque

Only for RTGS* IFSC* Code NEFT* Code

Direct Credit Facility is currently available with : BNP Paribas Bank, Citibank, Deutsche Bank, ICICI Bank, IDBI Bank, HDFC Bank, HSBC Bank, Kotak Mahindra Bank, Punjab National Bank, Standard Chartered Bank, Axis Bank, Indusind Bank and Development Credit Bank (only for dividend). For an update in this list please contact any of our ISC at the contact details provided overleaf.

• Please verify and ensure the accuracy of the bank details provided above as it shall appear in your account statement which shall be issued to you should your application be accepted. Principal Mutual Fund shall not be held responsible for delays or errors in processing your request if the information provided is incomplete or inaccurate. [* indicates - Mandatory]

6 DOCUMENTS ENCLOSED (Please ✓)

☐ MOA & AOA ☐ Trust Deed ☐ Bye-Laws ☐ Partnership Deed ☐ Resolution / Authorisation to invest ☐ List of Authorised Signatories with Specimen Signature(s) ☐ POA

7 PAYMENT DETAILS (Mandatory) [Refer Instruction No. C]

(i) Investment Amount (₹) (ii) DD Charges (₹) Net Amount (₹) (i)+(ii)

Mode of Payment (Please ✓) ☐ Cheque ☐ DD ☐ RTGS ☐ NEFT ☐ ECS ☐ Funds Transfer *Cheque / DD / RTGS / NEFT No.

Account Type (Please ✓) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ NRSR Dated D D M M Y Y Y Y

Payment from Bank A/c. No. Name of 1st A/c holder

Drawn on Bank Name of 2nd A/c holder

Branch & City Name of 3rd A/c holder

Details of the Payer (In case, the First Unitholder is not one of the Bank A/c. holder as mentioned above)

☐ Parent/Grand Parent/related person: Name

☐ Employer: Name

☐ Custodian: Name

Enclosed (please ✓)
☐ KYC Acknowledgement Letter
☐ Declaration of the Bank A/c.

Please enclose relevant documents as indicated below as per the Mode of Payment: • RTGS / NEFT / ECS / Bank Transfer - ☐ Instruction to the Bank from the Unitholder to Debit the Account. **• DD / Pay order / Banker's Cheque and the like -** ☐ Declaration / Acknowledgement from Bank ☐ Copy of Passbook / Bank Statement

* Please mention the Application No., PAN and Name of the First Unitholder on the reverse of the Payment Instrument. All Payment Instrument should be drawn in favour of **"Name of the Scheme A/c. First Investor Name" OR "Name of the Scheme A/c. Permanent Account Number" OR "Name of the Scheme A/c. Folio Number"** and should be crossed **"Account Payee Only"**.

8 INVESTMENT DETAILS (Please ✓ Choice of Scheme / Plan / Option) - Please ensure there is only one cheque/DD per application form

☐ Principal Income Fund - Long Term Plan
☐ Growth ☐ Dividend - ○ Payout ○ Reinvest ○ Sweep
Dividend Frequency - ☐ Quarterly ☐ Annual

☐ Principal Income Fund - Short Term Plan
☐ Growth ☐ Dividend - ○ Payout ○ Reinvest ○ Sweep
Dividend Frequency - ☐ Monthly

☐ Principal Ultra Short Term Fund
☐ Growth ☐ Dividend - ○ Payout ○ Reinvest ○ Sweep
Dividend Frequency - ☐ Monthly

☐ Principal Near-Term Fund - Conservative Plan
☐ Growth ☐ Dividend
Dividend Frequency / Facility - ☐ Daily ☐ Weekly - ○ Reinvest
☐ Monthly - ○ Payout ○ Reinvest ○ Sweep

☐ Principal Money Manager Fund
☐ Growth ☐ Dividend
Dividend Frequency / Facility - ☐ Daily ☐ Weekly - ○ Reinvest
☐ Monthly - ○ Payout ○ Reinvest ○ Sweep

☐ Principal Cash Management Fund
☐ Growth ☐ Dividend
Dividend Frequency / Facility - ☐ Daily ☐ Weekly - ○ Reinvest
☐ Monthly - ○ Payout ○ Reinvest ○ Sweep

☐ Principal Government Securities Fund
☐ Growth ☐ Dividend - ○ Payout ○ Reinvest ○ Sweep
Dividend Frequency - ☐ Quarterly ☐ Annual

☐ Principal Near-Term Fund - Moderate Plan
☐ Growth ☐ Dividend - ○ Payout ○ Reinvest ○ Sweep
Dividend Frequency - ☐ Monthly

☐ Principal Monthly Income Plan
○ MIP ○ MIP Plus - ☐ Growth - Accumulation ☐ Growth - AEP
☐ Dividend ○ Payout ○ Reinvest ○ Sweep
Dividend Frequency ☐ Monthly ☐ Quarterly

Sweep to Scheme

Plan Option

(In case of Sweep, please ensure to fulfill the minimum investment criteria in the new Scheme)

9 DECLARATION AND SIGNATURES

I/We have read and understood the contents of the Scheme Information Document/s to the Scheme(s) including the sections on "Prevention of Money Laundering and Know Your Customers". I / We hereby apply to the Trustees of the Principal Mutual Fund (the Mutual Fund) for units of the Scheme(s) as indicated above ["the Scheme"] and agree to abide by the terms and conditions, of the Scheme and such other scheme(s) of the Mutual Fund [Scheme(s)] into which my/our investment may be moved pursuant to any instruction received from me/us to sweep/switch the units as applicable to my / our investment including any further transaction under the Scheme(s). I / We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We further declare that the amount invested by me/us in the Scheme(s) is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, and regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time. I/We hereby confirm that I/We have read and understood the contents on "Third Party Payments" and confirm that the payment for this subscription application has been made from my/our Account or from such accounts as permitted by SEBI / AMFI and provided in the said section on Third Party Payments. Further, relevant declaration and documents as mandated herein have been provided for the mode of my payment.

I/We further confirm that I/we have the express authority from the relevant constitution to invest in the units of the Scheme and the Principal Pnb Asset Management Company Pvt. Ltd. [AMC], its Trustee and the Mutual Fund would not be responsible if the investment is ultra vires the relevant constitution.

I/We further confirm that the ARN holder (Broker/Sub-Broker) 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(s) has been recommended to me/us.

I / We authorize AMC to reject the application, reverse the units credited, restrain me/us from making any further investment in any of the Scheme/s of Principal Mutual Fund, recover / debit my/our folio(s) with the penal interest and take any appropriate action against me/us in case the cheque(s) / payment instrument is /are returned unpaid by my/our bank for any reason whatsoever.

I/We hereby further agree that AMC can directly credit all the dividend payouts and redemption amount to my / our bank account, where AMC has such arrangement with my / our Bank.

Applicable to NRIs only: I / We confirm that I am / we are Non- Residents of Indian Nationality / Origin and I / We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from funds in my/our Non-Residents External / Ordinary Account /FCNR Account.

SIGNATURES

Signature of **1st Applicant** / POA Holder / Guardian	APPLICANT SIGNATURE	POA HOLDER SIGNATURE
	POA Details - Name	
	PAN	
	Enclosed (please ✓) ☐ PAN ☐ KYC (Attach copy of PAN & KYC^)	
Signature of **2nd Applicant** / POA Holder / Guardian	APPLICANT SIGNATURE	POA HOLDER SIGNATURE
	POA Details - Name	
	PAN	
	Enclosed (please ✓) ☐ PAN ☐ KYC (Attach copy of PAN & KYC^)	
Signature of **3rd Applicant** / POA Holder / Guardian	APPLICANT SIGNATURE	POA HOLDER SIGNATURE
	POA Details - Name	
	PAN	
	Enclosed (please ✓) ☐ PAN ☐ KYC (Attach copy of PAN & KYC^)	

^ Refer Instruction No. D

Principal Mutual Fund
Exchange Plaza, 'B' Wing, 2nd Floor, NSE Building,
Bandra Kurla Complex, Bandra (E),
Mumbai - 400 051.
(Not an Official Point of Acceptance)

For investment related enquiries, Investor Grievance please contact:
Principal Mutual Fund
Maker Bhavan - II, 1st Floor, 18, Sir Vithaldas Thackersey Marg,
New Marine Lines, Mumbai- 400 020.
TOLL FREE: 1800 22 5600. Fax: 022-2204 4990.
Email : customer@principalindia.com Website : www.principalindia.com

CHECK LIST : Please ensure the following : • Application form is complete in all respects and signed by all Applicants • Bank Account details are filled • Copy of PAN card • Copy of Know Your Customer (KYC) Acknowledgement letter issued by CDSL Ventures Ltd / printout of KYC compliance status downloaded from CVL website, as applicable • Appropriate options are filled • All Payment Instrument should be made out in favour of the **"Name of the Scheme A/c. First Investor Name" OR "Name of the Scheme A/c. Permanent Account Number" OR "Name of the Scheme A/c. Folio Number"** and should be crossed **"Account Payee Only"** • If you are investing for the first time, please ensure that you fill in the contact details for us to serve you better.