| BUY RIGHT SIT TIGHT Aadhaar linking form for Non- Individual   |                                     |   |  |  |  |
|--|-------------------------------------|---|--|--|--|
|  |                                     |   |  |  |  |
| Name (   | of the                              |   | <del>                                     </del> | +++++                                  | +++++                                    |
|  | Folio Records)                      |   |  |  |  |
| PAN of the Non-Individual  |                                     |   |  |  |  |
| Tax Status: HUF Company Body Corporate Partnership Firm LLP Trust  |                                     |   |  |  |  |
| We, the authorised signatories have consented for in accordance with Aadhaar Act, 2016 and regulations made thereunder, for (i)  |                                     |   |  |  |  |
| collecting, storing and usage (ii) validating/authenticating and (ii) updating their Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made thereunder) and PMLA. Consent is also provided by them for sharing/disclosing of their Aadhaar number(s) |                                     |   |  |  |  |
| including demographic information with all SEBI registered Mutual Funds/AMCs and their Registrar and Transfer Agent (RTA) for the  |                                     |   |  |  |  |
| purpose of updating the same in the corresponding non-individuals folios.  |                                     |   |  |  |  |
| Details of Aadhaar & PAN of our Authorized Signatories: (Kindly use another form in case of > 10 signatories)  |                                     |   |  |  |  |
| S. No.   | Name of the<br>Authorized Signatory | Date of Birth<br>(as per Aadhaar<br>Card) | PAN of the Authorized Signatory                  | Aadhaar of the<br>Authorized Signatory | Signature of the<br>Authorized Signatory |
| 1.   |                                     |   |  |  |  |
| 2.   |                                     |   |  |  |  |
| 3.   |                                     |   |  |  |  |
| 4.   |                                     |   |  |  |  |
| 5.   |                                     |   |  |  |  |
| 6.   |                                     |   |  |  |  |
| 7.   |                                     |   |  |  |  |
| 8.   |                                     |   |  |  |  |
| 9.   |                                     |   |  |  |  |
| 10.  |                                     |   |  |  |  |
| Certificate from Company Secretary/any other competent authority of the Organisation   |                                     |   |  |  |  |
| I,, Company Secretary/ Competent Authority to issue this certification on behalf of the organisation hereby confirm the correctness of the above information. The above specified list of  |                                     |   |  |  |  |
| personnel covers all authorised signatories on behalf of our organisation. We will let you know the changes/modifications from time to   |                                     |   |  |  |  |
| time, if any, through appropriate means to KARVY/Motilal Oswal Asset Management Limited and other Participating MF/ other RTAs.  |                                     |   |  |  |  |
| Place  |                                     |   |  |  |  |
|  |                                     |   |  |  |  |
|  |                                     |   |  |  |  |
| Company Secretary / Authorized Signatory (ies)  Company Seal   |                                     |   |  |  |  |
|  |                                     |   |  |  |  |