

Application No. _____

To,
Motilal Oswal Mutual Fund
 10th Floor, Motilal Oswal Tower, Rahimtullah Sayani Road,
 Opp. Parel ST Depot, Prabhadevi, Mumbai - 400025.

Folio No

Investment was made in the above folio, when I, was a minor and the same was represented by

As I have completed age of 18 years as on

I request you to remove the Guardian's name and transfer all units, in my name. Also, update the following details in your records for the above referred folio

INVESTOR PARTICULARS

PAN* Email Id
 Mobile No. Tax Status
 Tel. Res Tel. Office

BANK PARTICULARS

Bank Name* Branch
 A/c Type - A/c No* Bank City
 MICR Code (9 Digit) IFSC Code (11 Digit) *mandatory

Nomination Particulars

- I wish to nominate (fill nomination particulars on the reverse of this form)
 I do not wish to nominate. Signature _____

Signature of First Holder (Major)

Guardian's Attestation

Bank Attestation

Name

Registered Guardian's Name

OR
 Branch Seal with attester's name,
 designation and employee number

Documents attached:

- KYC Confirmation Letter / KYC acknowledgement copy additionally with PAN Card copy.
- [Mandatory]. Age Proof – Birth Certificate / PAN Card Copy / Driving Licence

Attach Any one of following:

- Cancelled Cheque with Name & Account number printed on it.
- Original Bank statement / Copy of the Bank Statement showing A/c holder Name and A/c No. duly attested by the relevant Bank Manager.
- Copy of Pass book showing A/c holder Name and A/c. No. duly attested by the relevant Bank Manager.

Please note:

(You may produce the originals of the documents mentioned above, along with the photocopies, at the counter, we shall verify them and return the originals to you or photocopies can be submitted attested by the Bank Manager, (name, designation, employee code, and seal should be affixed, clearly on the copy).

ACKNOWLEDGEMENT



We acknowledge the receipt of the request for change of status from minor to major from Mr. / Ms. / M/s.

in Folio No. with Motilal Oswal Mutual Fund
 (subject to scrutiny and verifications)

Date of receipt at KARVY

Stamp & Signature

Particulars	Nomination Details																										
	Nominee 1	Nominee 2	Nominee 3																								
Name and address of the nominee	_____ _____ _____	_____ _____ _____	_____ _____ _____																								
Relationship with investor																											
Date of birth (mandatory in case of minor)#	<table border="1"> <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>	D	D	M	M	Y	Y	Y	Y	<table border="1"> <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>	D	D	M	M	Y	Y	Y	Y	<table border="1"> <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>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y																				
D	D	M	M	Y	Y	Y	Y																				
D	D	M	M	Y	Y	Y	Y																				
Name and address of the Guardian (in case the nominee is minor)#	_____ _____ _____	_____ _____ _____	_____ _____ _____																								
Specimen Signature of Nominee/ Guardian (optional)																											
Percentage of Allocation/ Share																											

As the nominee is a minor as on date, I/we appoint the person named above as the guardian to receive the units on behalf of the nominee, in the event of my/ our death during the minority of the nominee.

Unit holder can nominate (in the manner prescribed under the SEBI Regulations), maximum upto 3 person(s) in whom the Units held by him/her shall vest in the event of his/her death. It shall be mandatory to indicate clearly the percentage of allocation / share in favour of each of the nominees against their name and such allocation / share should be in whole numbers without any decimals making a total of 100 percent. In the event of the Unitholders not indicating the percentage of allocation / share for each of the nominees, the AMC's, by invoking default option shall settle the claim equally amongst all the nominees.

I/ We understand that all payments and settlements made to Nominee(s) and Signature(s) acknowledging receipt there of shall be valid discharge of duty and responsibility by Motilal Oswal AMC/ Trustees/ Mutual Fund.

First / Sole Applicant Signature

For Financial Transactions
Toll free 1800-200-6626
Available between 9.00 am to
6.00 pm on business days only.

For Non Financial Queries/Requests
Toll free 1800-200-6626
Available between 9.00 am to
6.00 pm on business days only.

Please note our investor
service email id
mfservice@motilaloswal.com

www.motilaloswalmf.com