

APPLICATION FORM HDFC CHILDREN'S GIFT FUND

Application No.

CG

www.hdfcfund.com

Application No. CG

Received from Mr/Ms/M/s _

Open-ended Balanced Scheme

The Application Form should be KEY PARTNER / AGENT		IN BLOCK LETTERS only.				EOD OFFICE HEF ONLY /TIME CTARE
(Investors applying under	Direct Plan must men			-		FOR OFFICE USE ONLY (TIME STAM
ARN	ARN Name	Sub Agent's ARN/ Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Uniq Identification Number		
AR ARN 6574				EUIN E0199	76	
EUIN Declaration (only whe	re EUIN box is left blank) (Refer Instruction 1)				Sign Here
I/We hereby confirm that th	e EUIN box has been into	entionally left blank by m	e/us as this transaction is	executed without any	interaction	First/ Sole Applicant (Donor)
or advice by the employee/	relationship manager/sa	ales person of the above	distributor/sub broker or	notwithstanding the a	advice of in-	They cole Applicant (Bollot)
appropriateness, if any, pro	vided by the employee/ı	relationship manager/sal	es person of the distribut	or/sub broker.		Sign Here
						Second Applicant (Donor)
TRANSACTION CHARGES	FOR APPLICATIONS TI	HROUGH DISTRIBUTOR	S ONLY (Refer Instruct	ion 2 and please tick	(√) any on	e)
In case the purchase / subsc	rintion amount is Rs. 1	0.000 or more and your	Distributor has onted to	receive Transaction (same are deductible as applicable from t
purchase/ subscription amou Upfront commission shall be rendered by the ARN Holder.					stors' assessr	ment of various factors including the servi
1. EXISTING BENEFIC	IARY CHILD INFO	RMATION (refer In	struction 3)			
FOLIO No.			Mention an existing foli	o, if any, with HDFC	Children's Gi	ft Fund)
2a. DONOR (APPLICA	NT) INFORMATIC	N (refer Instruction	on 3 & 4) 🔲 Third P	arty Payment Dec	laration F	orm Attached (Mandatory) [Please (
Name of First/Sole Applica						
Nationality		PAI	N*/PEKRN*			KYC* (Mandatory) Proof Attach
Mobile		e-mail				[Please (/)]
Address of First/Sole Appl	cant					
						PIN
Resident Individual Company BOI 3b. Occupation: Business Retir 3c. Gross Annual Inc Net-worth (Mandate 3d. Politically Exposee (Also applicable for auth 3e. Non-Individual Inc providing any of the 4. ADDITIONAL DONO Mr. / Ms. Nationality	NRI-Repatriation HUF Body Service Privat ed Agricultur ome (Rs.) Be ory for Non-Individual d Person (PEP) State orised signatories/ Privestors involved mentioned service R (SECOND APPLICATION APPLIC	n NRI-Non Repat Corporate Socie e Sector Public re Proprietors elow 1 Lac 1 - als) Rs. tus omoters/ Karta/ Trust ices Mone ANT) PAI e Sector Public re Proprietors	riation PIO O ety / Club LLP Sector Govern hip Others 5 Lacs 5 - 10 L OR ee/ Whole time Director gn Exchange / Money C ey Lending / Pawning Resident Individual N*/PEKRN* Sector Govern hip Others 5 - 10 Lacs 10 - 25	Foreign Nat Sole Proprietors nment Service acs	onal Resident Control R	pecify) >25 Lacs - 1 Crore
5 POWER OF ATTORN	EY (PoA) HOLDER I	DETAILS				
Mr. / Ms./ M/s.			OVC+ (Manufacture) Follows	N		
PAN*/PEKRN* Please attach proof. Re	fer instruction No. 1		(YC* (Mandatory) [Please (√ No. 17 for KYC	JJ Proof Attached		
6a. BENEFICIARY CH						
Name of the Beneficiary Ch (Not exceeding 18 years of ag						
(Not exceeding 18 years of ago Nationality	e)		Date of Birth@ (Mandator	w D D M N	/ Y Y	Y Proof attached [Please (🗸)]
PAN/PEKRN (If available)				e Beneficiary Child		
						PIN
ACVNOWIED CEMENT SLIP /To b	a filled in hu the Investor [Far any guaries places contac	t ann maanat Immatan Camilaa	Ct C C C C	untaman Camilaa	Number 180030106767/ 1800 419 7676 (Toll Fre

HDFC MUTUAL FUND

for Gifting of Units along with Cheque/Demand Draft/ Payment Instrument as detailed overleaf

Date:

an application

ISC Stamp & Signature

I DIAMO OF THE BAYONT / LOCAL Mr	/ Ms.		r Instruction 5	1 1 1 1 1		_
guardian of Beneficiary Child			. 10 1:	(100) 0 1 4 5	I FATCA / F . T . I	
Status: Individual		Please attach Ultimate Benefic nformation Form] (Refer Instru			m and FATCA/ Foreign Tax Lav	vs
Tel. : STD Code	1 1 1	ountry Code		Office		
Residence			eA.	lerts Mobile No.		
PAN*/PEKRN*		KYC* (Mandatory) [Please (/)] P	roof Attached			
eDocs E-mail^						
I/ We would like to register website:www.hdfcfund.com	for my/our HDFCMF (Email id mandator	Personal Identification Numbery).	r (HPIN) to trar	sact online as per the t	erms & conditions displayed on	
^ On providing email-id investors s	hall receive scheme w	ise annual report or an abridged su	mmary thereof	account statements / stat	utory and other documents by emai	il.
Relationship with Minor@ [Please (√)] Father Moth	er Court appointed Legal Guardian	Proc	f of relationship with min	or@ Please (✓) Attached	
Date of Birth of the parent / legal guardian of the Unit holder (Mandatory)	M M Y	Signature of the Guardian of the U	Jnit holder			
* Please attach proof. Refer ins		PAN/PEKRN and No. 17 for KY or Public Sector	C @ Mar Government S	ndatory ervice Student	Professional House	wife
☐ Business ☐ Retired	Agriculture	Proprietorship Othe	ers	(please sp	ecify)	
Gross Annual Income (Rs.)		1 - 5 Lacs 🗌 5 - 10 Lacs 🔲 1	0 - 25 Lacs 🗌		>1 Crore OR Net worth Rs	
Politically Exposed Person ((Also applicable for authorised)		ers/ Karta/ Trustee/ Whole time [Directors)	I am PEP I am I	Related to PEP Not Applicab	ole
` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		nild) (Mandatory) [Please (🗸)]		Occupation (of the B	Beneficiary Child) [Please (/)]]
Single	ident 🗌 NRI/PIO/C	OCI Others	(please specify)	☐ Student ☐ C	Others (please spe	ecify)
7. ALTERNATE CHILD INFO	RMATION (refer I	nstruction 6)				
Name of the Alternate Child Ma (Not exceeding 18 years of age)	st. / Miss.					
Nationality			Da	te of D D M N	Y Y Y Please (✓) □Proof Atta	ached@
Name of the Parent / Legal Mr. /	Ms.					
guardian of Alternate Child@ Relationship with Alternate Child@	[Please (✓)] ☐ Father ☐	☐ Mother ☐ Court appointed Legal Gu	ıardian	Proof of relationship	nttached@ Please (🗸) 🗌 — @ Mano	datory
Address of the Alternate Child						
					PIN	İ
Status (of the A	lternate Child) [Ma	andatory (Please ✓)]	0	ccupation (of the Alterr	ate Child) [Mandatory (Please 🗸	/)]
☐ Resident ☐ NR	I/PIO/OCI Oth	ers (pleas	se specify)	☐ Student ☐ Othe	ers (please spe	ecify)
8. FATCA INFORMATION/ FOR	REIGN TAX LAWS (Self Certification) (Refer instru	uction 5b)			
The below information is re	equired for Benef	iciary Child and Guardian				
Is the Country of Birth / Citi	izenshin / Nation:	alita / Tara Daniala mara atlana				
Beneficiary Child Yes			han India? Legal Guard	ian 🗌 Yes	□No	
If Yes, please provide the fo	□ No Illowing informat	Parent/	Legal Guard	_		
If Yes, please provide the fo	□ No Illowing informat	Parent/ ion [mandatory]	Legal Guard	ated Tax Reference N		
If Yes, please provide the fo Please indicate all countries	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes at	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes at	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes at	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes at	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes a	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes a	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes a	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2 Tax Payer Ref. ID No. 2	□ No Illowing informat	Parent/ ion [mandatory] resident for tax purposes a	Legal Guard	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2 Tax Payer Ref. ID No. 2 Country of Tax Residency 3 Tax Payer Ref. ID No. 3	No Illowing informat in which you are	Parent/ ion [mandatory] resident for tax purposes al Beneficiary Child	Instruction 7A)	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2 Tax Payer Ref. ID No. 2 Country of Tax Residency 3 Tax Payer Ref. ID No. 3	No Illowing informat in which you are	Parent/ ion [mandatory] resident for tax purposes at Beneficiary Child R (BENEFICIARY CHILD) (Referunt is different from the bank acco	Instruction 7A) unt mentioned u	ated Tax Reference N	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2 Tax Payer Ref. ID No. 2 Country of Tax Residency 3 Tax Payer Ref. ID No. 3 9. BANK ACCOUNT DETAIL (Mandatory to attach proof, as Account No. Branch	No Illowing informat in which you are S OF UNIT HOLDE the pay-out bank according to the pay-out	Parent/ ion [mandatory] resident for tax purposes at Beneficiary Child R (BENEFICIARY CHILD) (Referunt is different from the bank acco	Instruction 7A) unt mentioned unk	nder Section 11.)	lumbers below.	
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2 Tax Payer Ref. ID No. 2 Country of Tax Residency 3 Tax Payer Ref. ID No. 3 9. BANK ACCOUNT DETAIL (Mandatory to attach proof, as Account No.	S OF UNIT HOLDE the pay-out bank acco	Parent/ ion [mandatory] resident for tax purposes at Beneficiary Child R (BENEFICIARY CHILD) (Referunt is different from the bank acco	Instruction 7A) unt mentioned until mentioned un	nder Section 11.)	lumbers below.	f. If you nk)
If Yes, please provide the for Please indicate all countries Category Place/ City of Birth Country of Birth Country of Tax Residency 1 Tax Payer Ref. ID No. 1 Country of Tax Residency 2 Tax Payer Ref. ID No. 2 Country of Tax Residency 3 Tax Payer Ref. ID No. 3 9. BANK ACCOUNT DETAILS (Mandatory to attach proof, as Account No. Branch Account Type [Please ✓] □ Savings□ Common Savings□	S OF UNIT HOLDE the pay-out bank acco	Parent/ ion [mandatory] resident for tax purposes at Beneficiary Child R (BENEFICIARY CHILD) (Referent is different from the bank acco Name of the Ba Bank City FCNR Others (please)	Instruction 7A) unt mentioned unk e specify) IFSCCc e number) *** (M do no	nder Section 11.)	lumbers below. I/ Legal Guardian I Character code appearing on your cheque leaf	i. If you

10. MODE OF PA	YMENT OF REDEI	MPTION / DIVIDEND P	ROCEEDS [P	lease (√)] (Refer	Instruction 1	12)			
Unitholders will receive r	edemption/ dividend proce	eds directly into their bank account seeds (if any) by way of a cheque	t (as furnished in Se	ection 9) via Direct credit/	NEFT/ECS facility	-	into child's bank account		
		structions 8 & 9) (The na eque / Demand Draft/Pa			or) must be pre	printed on the ch	eque.) (Please write Application		
Plan (Please ✓) ☐ Investment Plan (Equity Oriented) ☐ Savings Plan (Debt Oriented) ☐ Units subject to Lock- in Period [Please ✓] ☐ Yes ☐ No									
		ould be drawn favouring " ssed "A/c Payee only" (Inve					"HDFC Children's Gift Fund-(Plan e Plan name.)		
Cheque/ DD/ Payment Instrument/ UTR No.	Cheque/ DD/ Payment Instrument/ UTR Date	Amount of Cheque / DD / Payment Instrument / RTGS/ NEFT in figures (Rs.)	DD Charges, if any	Net Cheque/ DD Amount	Drawn on	Bank / Branch	Pay-In Bank Account No. (For Cheque Only)		
12. DECLARATION	ONS & SIGNATUR	E(S) (Refer Instruction 14)						
I/We am/are not pro compliance with ap (1) I/We have rea	hibited from accessi plicable Indian and fo d, understood and h	ng capital markets under oreign laws. I/We hereby c	any order/ruling confirm and dec vith the terms	clare as under:- and conditions of t	, ,	Ü	e confirm that my application is in d apply for allotment of Units of		
(2) I/We am/are el the Constitution	igible to invest in fa	avour of the minor unith	older as per th invested in HD	e scheme related d DFC Children's Gift I	und is through	n legitimate source	d to make this investment as per sonly and is not for the purpose India.		
required by th writing about	ie HDFC Asset Mana any change in the in	agement Company Limit formation furnished fro	ed (AMC)/ Fun m time to time	d and undertake t	o inform the A	AMC / Fund/Registr	Iditional information as may be ars and Transfer Agent (RTA) in		
(4) That in the even therefrom.	ent, the above info	rmation and/or any part	of it is/are for	und to be false/unt	rue/misleading	g, I/We will be liab	le for the consequences arising		
may be provid SEBI registere	ed by me/us to the I d intermediaries fo	Mutual Fund, its Sponsor	/s, Trustees, As nission, any In	set Management (dian or foreign sta	Company, its er atutory, regula	nployees, agents a atory, judicial, qua	uding the changes/updates that nd third party service providers, si- judicial authorities/agencies		
(6) I/We will inder transactions.	nnify the Fund, AMO	C, Trustee, RTA and other	intermediarie	s in case of any disp	ute regarding	the eligibility, valid	lity and authorization of my/our		
him/them for t	he different compe	ting Schemes of various N	∕lutual Funds f	rom amongst whic	h the Scheme is	s being recommend	or any other mode), payable to ded to me/us. DR ANY INDICATIVE YIELD BY		
THE FUND/AN	AC/ITS DISTRIBUTO	R FOR THIS INVESTMEN		NONICATED ANT	INDICATIVE	OKII OLIO AND/ C	SKART INDICATIVE TIELD DI		
I/We will redeem m	ny/our entire investn	sident in India only: nent/s before I/We chang account of change in resi			I/We shall be fo	ully liable for all co	nsequences (including taxation)		
Applicable to NR									
		essing capital markets ucable Indian and foreign		er/ruling/judgmen	t etc., of any i	regulation, includi	ing SEBI. I/We confirm that my		
Please (✓) Yes	☐ No	If Yes, (✓) Repatriatio	n basis 🔲 No	n-repatriation basis		Dat	e: D D M M Y Y Y		
(Please write Appli	SIGN HERE ()	No. on the reverse							
of the Cheque	Demand Draft/ Paym	ent Instrument.)		Donor		Δ	Additional Donor		
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Third Party Payment Declaration Form



Declaration Form No.

Third Party Payment Declaration Form should be completed in **English** and in **BLOCK LETTERS** only. (Please read the Third Party Payment Rules and Instructions carefully before completing this Form)

	Dat	to of Roce	int								olio No									Brane	h Trai	ne No	,			
	Date of Receipt						Folio No.							Branch Trans. No.												
THE PLAN	INVENT	OD INE	D144	TION	(D - f - 11 - 1	4 41	N- 0	`																		
BENEFICIAL				ATION	(Keter II	ISTRUCTIO	on No. 2)					ı					1 1								
Folio No. (For existing investor) IAME OF FIRST/SOLE APPLICANT (BENEFICIAL INVESTOR)						Applic					Applica	ation No.														
	M/s.		(2																							
HIRD PART	Y INFOI	RMATIO	N (Re	efer Ins	truction N	lo. 3)				'		'													-	
NAME OF THIS	RD PART	Y (PERS	ON MA	AKING 1	THE PAYI	VIENT)										_	_									
Mr. Ms.	M/s.																									
Nationality									P/	AN#										KY	;** [Please Manda	e tick atory	(\checkmark)] for an	Atta y amo	
#Mandatory f	for any a	mount. P	lease	attach	PAN Pro	of. Refe	r instruc	tion Ne	0. 6.	** Re	fer inst	ruction N	lo. 8.								•				•	,
NAME OF CON	ITACT PI	ERSON &	DESI	GNATIO)N	(in ca	se of no	n-Indivi	idual T	hird P	arty)															
Mr. Ms.																										
Designation																						\perp				
MAILING ADD	RESS (P.	O. Box A	dress	s may n	not be suf	fficient)																				
																						_	+			+
CITY									STAT	Έ										PIN	CODE	T	$\overline{}$			Ť
ONTACT DET	AILS						STD (Code																		
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Status of the Beneficial Ir	е	וווע ו אווו	I WIII	11 1112		Vinor	LOTON	(ITGIGI	ilistru	LIUII	10. 3)	Įi io	ise lien	FII		cable						E	mploy	yee(s)		
Relationship					arand Pai	Parent Custodian - SEBI Registration																				
Third Party				Legal G ach pro	Guardian oof of		Related Person (Please specify ionship)										_	_								
Investor			onship nitted@		t already		Registration \					n Valid Till DDDMMMYYYYY														
				-,		Rs. 5	0,000/-	per trar	nsactio	-,																
@ Not Applicable for investment in HDFC										Fund	I/We r	declare th	at the	gavme	nt is m	nade o	n			/We r	leclare	that t	the no	avment	is ma	ade
Declaration by I/We declare that the payment made on beha consideration of natural love and affection or									. 10 111		behalf	of FII/ (Client a	nd the	source	made on rce of this behalf of employee(s) und to us by FII/Client.					under	Syste	ema			
	by	considera	0								payill	UII 15 IIU	iii iuiiu	o hina	นธน เป	uo D)	111/0	iiGIIL.		subsc	ription	throu	b. D.	wroll D	oduotic	ons.
Third Party	by						43															,	ign Pa	ıyıuıı	euucii	
Third Party	by Y PAYM	IENT DE	TAILS	-	er Instruc	ction No	. 4)					, N.										, 11100	ign Pa	ıyıuıı	euucu	
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Third Party HIRD PART' Mode of Pa	by Y PAYM	IENT DE	TAILS	-	er Instruc	ction No). 4)	In ca then	se the	acco	ount nu the ba	mber a nk pass	book	/ state	nolde	r nam t of b	ie of t ank a	he thi	ird pa	arty i	s not	pre-p	orinte	dont	he ch	equ th:
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4. DECLARATIONS & SIGNATURE/S (Refer Instruction 5)

THIRD PARTY DECLARATION

I/We hereby confirm and declare as under:-

I/We have read and understood the Third Party Payment rules, as given below and agree to comply and be bound by the same.

The information provided is true and correct and HDFC Mutual Fund ('Fund')/the HDFC Asset Management Company Limited ('AMC') is entitled to verify the same directly or indirectly. I/We agree to furnish such further information as Fund/AMC may require from me/us. I/We agree that if any of the declarations furnished by me/us are found to be incorrect or incomplete, the Fund/AMC shall have the absolute discretion to reject / not process the Application Form received from the Beneficial Investor(s) and refund the subscription monies accordingly.

I/We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India. I/We shall be solely liable/responsible for any claim, loss and/ or damage of whatsoever nature that the Fund/ AMC may suffer as a result of accepting the aforesaid payment from me/us towards processing the transaction in favour of the Beneficial Investor(s) as detailed in the Application Form.

Applicable to NRIs/ PIO/OCIs only:

I/We am/are not prohibited from accessing capital markets under any order/ruling/judgment etc. of any regulation, including SEBI. I/We confirm that my application is in compliance with applicable Indian and foreign laws.

compliance with applicable Indian and foreign laws. Please (✓) ☐ Yes ☐ No

If yes, (\checkmark) Repatriation basis

Non-repatriation basis

DD MM YYYY



BENEFICIAL INVESTOR(S) DECLARATION

 $I/We\ hereby\ confirm\ that\ the\ information\ provided\ herein\ by\ the\ Third\ Party\ is\ true\ and\ correct.$

Applicable to Guardian receiving funds on behalf of Minor only:

I/We confirm that I/We are the guardian of the Minor registered in folio and have no objection to the funds received towards Subscription of Units in this Scheme(s) on behalf of the minor.





THIRD PARTY PAYMENT RULES

- In order to enhance compliance with Know your Customer (KYC) norms under the Prevention of Money Laundering Act, 2002 (PMLA) and to mitigate the risks associated with acceptance of third party payments, Association of Mutual Funds of India (AMFI) issued best practice guidelines on "risk mitigation process against third party instruments and other payment modes for mutual fund subscriptions". AMFI has issued the said best practice guidelines requiring mutual funds/asset management companies to ensure that Third-Party payments are not used for mutual fund subscriptions
- 2a. The following words and expressions shall have the meaning specified herein:
 - (a) "Beneficial Investor" is the first named applicant/investor in whose name the application for subscription of Units is applied for with the Mutual Fund.
 - (b) "Third Party" means any person making payment towards subscription of Units in the name of the Beneficial Investor.
 - (c) "Third Party payment" is referred to as a payment made through instruments issued from a bank account other than that of the first named applicant/ investor mentioned in the application form.

Illustrations

<u>Illustration 1:</u> An Application submitted in joint names of A, B & C alongwith cheque issued from a bank account in names of B, C & Y. This will be considered as Third Party payment.

<u>Illustration 2:</u> An Application submitted in joint names of A, B & C alongwith cheque issued from a bank account in names of C, A & B. This will not be considered as Third Party payment.

2b. The Fund / AMC will not accept subscriptions with Third Party payments except in the following exceptional cases, which is subject to submission of requisite documentation/ declarations:

- (i) Payment by Parents/Grand-Parents/Related Persons* on behalf of a minor in consideration of natural love and affection or as gift for a value not exceeding Rs. 50,000/- for each regular Purchase or per SIP installment. However, this restriction of Rs. 50,000/- will not be applicable for payment made by a Guardian whose name is registered in the records of Mutual Fund in that folio (i.e. father, mother or court appointed Legal Guardian).
 - (This limit of Rs. 50,000 shall not be applicable for investments in HDFC Children's Gift Fund. However, the Donors will have to comply with all the requirements specified in 2c below)
- (ii) Payment by Employer on behalf of employee under Systematic Investment Plans or as lump sum/one-time subscription, through Payroll deductions.
- (iii) Custodian on behalf of an FII or a Client.
- * 'Related Person' means any person investing on behalf of a minor in consideration of natural love and affection or as a gift.
- 2c. Applications submitted through the above mentioned 'exceptional cases' are required to comply with the following, without which applications for subscriptions for units will be rejected / not processed / refunded.
 - Mandatory KYC for all investors (guardian in case of minor) and the person making the payment i.e. third party.
 - (ii) Submission of a complete and valid 'Third Party Payment Declaration Form' from the investors (guardian in case of minor) and the person making the payment i.e. third party.
- 2d. Investor(s) are requested to note that any application for subscription of Units of the Scheme(s) of HDFC Mutual Fund accompanied with Third Party payment other than the above mentioned exceptional cases as described in Rule (2b) above is liable for rejection without any recourse to Third Party or the applicant investor(s).

The above mentioned Third Party Payment Rules are subject to change from time to time. Please contact any of the Investor Service Centres of HDFC AMC or visit our website www.hdfcfund.com for any further information or updates on the same.



UNDERTAKING BY PARENT / LEGAL GUARDIAN OF MINOR INVESTOR

(To be submitted alongwith the Application Form)

To be filled in BLOCK LETTERS (Please strike off section(s) that is/are not applicable)

HDFC Mutual Fund / HDFC Asset Management Company Limited

	(Name of parent/legal guardian/Donor),
is the father/mother/legal guardian/donor, holding PAN	(Guardian's/Donor's PAN), of the minor investor
Master/Miss_	(Name of minor investor)
and has applied for subscription of the units of	(mention scheme name)
on behalf of the minor investor vide Application form bearing No.	·
l,	(Name of parent/legal guardian)
am aware that the bank account details of the minor investor have not been provided	d in the above cited application form since the same are not currently available. In the
interim, my bank account details are provided in the bank account (payout) details sec	tion of the application form and documentary proof validating the same is enclosed with
the application.	
I am further aware that the bank account details of the minor investor/unit holder are	required for the purpose ofreceiving redemption proceeds/dividend payouts and in its
absence the payment of redemption/dividend proceeds will be made in the name of the	eminor Unitholder but with my bank account details as provided in the Application Form.
In connection with the above application for investment, I hereby agree, confirm and ur	ndertake:
and an arrangement of the control of	
i) To open a bank account in the name of Master/Miss	(Name of minor investor) and
	be required at the earliest to HDFC Mutual Fund ('the Fund')/ HDFC Asset Management
Company Limited ('AMC') to receive redemption/dividend proceeds into the bank	account held on behalf of the minor Unit holder;
ii) Neither the Fund, AMC nor any person connected with it will be liable and/or re	esponsible for any liability that may arise to the minor Unit holder on account of any
rejection/non-acceptance/delay in realization of such redemption proceeds/	
,	
Name & Address of the Parent / Legal Guardian	Signature of the Parent / Legal Guardian
Date: D D M M Y Y Y Y	
Place:	