## Aditya Birla Sun Life Mutual Fund



Date: D D M M Y Y Y Y																				
Investor Details																				
Name of First applicant																				
Folio No. / PAN no.																				

## **DECLARATION FROM NRI/PIO INVESTORS**

- I / We hereby confirm that Aditya Birla Sun Life AMC Limited ("ABSLAMC") / Aditya Birla Sun Life Mutual Fund ("ABSLMF") has not communicated in any manner for soliciting its schemes / products in my jurisdiction and I/We have based on my / our own discretion applied / invested in the schemes of ABSLMF.
- I/We are aware that ABSLAMC / ABSLMF have neither filed any of its constitution / scheme related documents nor registered its Units in any jurisdiction / region except India as stated in the Statement of Additional Information.
- I/We confirm that my/our application is in compliance with applicable Indian and foreign laws and I am / we are not prohibited from accessing capital markets under any order/ruling/judgment etc. of any jurisdiction / regulation.
- I/We understand and acknowledge that ABSLAMC reserves the right to accept or reject any transactions and redeem any investments, at their sole discretion and as they may deem fit without assigning any reason thereto.
- I/We hereby authorize ABSLAMC/ABSLMF, its employees, its agents, its Registrar to disclose, share, remit in any form/manner/mode
  information with respect to investments made by me/us and/or any part of it including the changes/updates that may be provided by
  me/us to its agents, third party service providers, SEBI registered intermediaries for the purposes of any Indian or foreign statutory,
  regulatory, judicial, quasi-judicial authorities/agencies requirements without any intimation/advice to me/us.
- I/ We hereby agree to provide any additional information / documentation to ABSLAMC, its agents, employees, it's Registrar etc. that may be required in connection with the investments made by me/us.
- I/We shall indemnify ABSLAMC/ABSLMF/Aditya Birla Sun Life Trustee Private Ltd and its Sponsor/Group/ Associates, its Officers/Directors/Employees in respect of any loss, cost, charge, expenses and such other claims which may be incurred in respect of any false, misleading, inaccurate and incomplete information in connection with my/our investments in the Scheme(s).

First / Sole Applicant / Guardian Authorised Signatory

Contact Us: 1800-270-7000

