



MUTUAL FUNDS

DISTRIBUTOR EMPANELMENT FORM

Form No. _____

1. CONTACT DETAILS*

Distributor Name																															
Contact Person	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> M/s.	F	I	R	S	T	N	S	M	E	M	I	D	D	L	E	N	A	M	E											
	L	A	S	T	N	A	M	E																							
Contact Address (for all communication, brokerage, structure, intimation & cheques)																															
City																															
Pin											Email																				
Telephone No.	STD Code						Office						(Res.)																		
(Mobile)						(Fax)						Channel	<input type="checkbox"/>	Bank	<input type="checkbox"/>	ND	<input type="checkbox"/>	IFA	<input type="checkbox"/>												
Status	<input type="checkbox"/> Individual	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Public Ltd.Co.	<input type="checkbox"/> Bank	<input type="checkbox"/> Pvt.Ltd.Co.	<input type="checkbox"/> Society/Trust	<input type="checkbox"/> Others _____																							

Photo
required
only for
individual
distributors

2. AMFI REGISTRATION DETAILS*

AMFI Registration No.	A	R	N	-						ARN Issue Date	D	D	M	M	Y	Y	ARN Valid upto	D	D	M	M	Y	Y
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3. BANK DETAILS*

Bank Name																																										
Bank Branch																					A/c No.																					
Bank Address																																										
																									City						Pin											
A/c Type	<input type="checkbox"/> Savings	<input type="checkbox"/> Current	MICR No.						(This is 9 digit no.next to cheque no on your cheque leaf)																																	
IFSC											Mode of Brokerage Payment	<input type="checkbox"/> Electronic Mode	<input type="checkbox"/> Cheque																													

Please enclose a copy of a cancelled cheque of the above bank account.

PAN No.											GST No.										
Aadhaar Card No.																					

4. HELP US KNOW YOU BETTER

Individual: Date of Birth	D	D	M	M	Y	Y	Y	Y	Anniversary	D	D	M	M	Y	Y	Y	Y	No. of children			Ages										
Corporate: Date of Incorporation	D	D	M	M	Y	Y	Y	Y																							
Authorised Person																Designation															

5. AWARDS & ACHIEVEMENTS

Special achievements / awards in last three years _____

6. INFORMATION UPDATES VIA (Please tick) SMS Email

7. Nomination Details for Brokerage / Commission* (In case of Individual Agents Only)

I, hereby nominate the person named below to receive the amounts of brokerage to my credit in the event of my death.

Nominee's Name																															
Date of Birth (If Minor)	D	D	M	M	Y	Y	Y	Y	Relationship																						
Guardian's Name (In case of Minor)																															
Address of Nominee/Guardian																															
City																					State						Pin				
Specimen Signature of Nominee/Guardian																Signature of the Distributor															

8. DECLARATION*

I/We undertake that the information provided is correct and true to my/our knowledge. I/We have read and understood the below Terms & Conditions of my/our appointment. My/our application for empanelment may accordingly be considered. My/our appointment shall be subject to any guidelines, notifications, regulations etc. that may be framed or issued by-

- (a) AMFI, SEBI or any other applicable regulatory authority/body;
- (b) Aditya Birla Sun Life Mutual Fund (ABSLMF) or by Aditya Birla Sun Life AMC Limited (formerly known as Birla Sun Life Asset Management Company Limited) or by Aditya Birla Sun Life Trustee Private Limited (Formerly know as Birla Sun Life Trustee Company Private Limited)
- (c) I/We hereby declare that none of the employees of the AMC, Mutual Fund, Sponsor, Associate is related to me/us as on this date of empanelment. Further, in case there is any change in aforesaid declaration, the same shall be intimated to the AMC on immediate basis.

Date	D	D	M	M	Y	Y	Y	Y	Place											Signature										
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Branch Details Of Aditya Birla Sun life AMC LTD

State																														
City																														
Branch Name																														
Branch Address																														

FOR OFFICE USE

Signature																Date of Receipt of Application	D	D	M	M	Y	Y
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Where did you hear about this page? _____

For Registrar's Use Only

Master Updation by Signature																Date of Receipt of Application	D	D	M	M	Y	Y	
																	Date of Updation	D	D	M	M	Y	Y

Checklist

Please check if the following documents are enclosed																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th style="text-align: center;">For IFAS</th></tr> <tr><td><input type="checkbox"/> Copy of the AMFI Certificate</td></tr> <tr><td><input type="checkbox"/> Copy of the AMFI Letter & ARN card</td></tr> <tr><td><input type="checkbox"/> Cancelled Cheque</td></tr> <tr><td><input type="checkbox"/> KYD Copy</td></tr> </table>	For IFAS	<input type="checkbox"/> Copy of the AMFI Certificate	<input type="checkbox"/> Copy of the AMFI Letter & ARN card	<input type="checkbox"/> Cancelled Cheque	<input type="checkbox"/> KYD Copy	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th style="text-align: center;">For Corporates</th></tr> <tr><td><input type="checkbox"/> Copy of the AMFI Certificate</td></tr> <tr><td><input type="checkbox"/> Copy of the AMFI Letter & ARN Card</td></tr> <tr><td><input type="checkbox"/> MOA / AOA</td></tr> <tr><td><input type="checkbox"/> Authorised Signatory List</td></tr> <tr><td><input type="checkbox"/> Board Resolution</td></tr> </table>	For Corporates	<input type="checkbox"/> Copy of the AMFI Certificate	<input type="checkbox"/> Copy of the AMFI Letter & ARN Card	<input type="checkbox"/> MOA / AOA	<input type="checkbox"/> Authorised Signatory List	<input type="checkbox"/> Board Resolution	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th style="text-align: center;">For Partnership Firms</th></tr> <tr><td><input type="checkbox"/> Copy of the AMFI Certificate</td></tr> <tr><td><input type="checkbox"/> Copy of the AMFI Letter & ARN Card</td></tr> <tr><td><input type="checkbox"/> Partnership Deed & Resolution</td></tr> <tr><td><input type="checkbox"/> Authorised Signatory List</td></tr> </table>	For Partnership Firms	<input type="checkbox"/> Copy of the AMFI Certificate	<input type="checkbox"/> Copy of the AMFI Letter & ARN Card	<input type="checkbox"/> Partnership Deed & Resolution	<input type="checkbox"/> Authorised Signatory List
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Fields marked with * are mandatory.
 ** Compulsory for IFAs belonging to Tier I and Tier II cities.
 *** Compulsory for Tier I and Tier II.

We would be happy to know...

1. How long have you been associated with Financial Service sector? _____(Years)
2. What financial products / services do you offer? Please tick ()
 Insurance Post Office RBI Bonds Fixed Deposits
 Primary Market (IPO) Secondary Market (Share Broking)
 PMS (Specify name)_____ Real Estate(Specify name)_____ Others_____
3. What would be your Total Asset Under Advice in the products mentioned above
(Mutual Funds_____) Other (Specify)_____
4. No of Offices_____ No of Employees_____
5. Are you also doing business in capacity of a Sub Broker to any entity?
 No If Yes, Please provide the Name_____
6. Do you have any of your family members also having a separate ARN
 No If Yes, Please provide the Name_____
7. Which are the Top 5 AMCs that you have business association with

8. Any Social Networking site that you actively use _____
9. Any other Financial Services related loyalty club that you are a member of? Please mention name & anything regarding the club that has been a real value add for you

10. Would you like to be mentored by any existing partner of ABSLAMC for business?
 Yes No
11. We would be glad to get any referral from you for empanelment with us.
ARN_____ Contact No._____ Email_____

Terms & Condition

- a) The Distributor will put his best efforts in promoting the Funds products on consistent basis and shall at all times promote the Funds products in the with the objectives set out in the respective offer documents.
- b) The Distributor shall not make any statement or act in a manner which shall create any expectation from the fund which is not stated in the offer documents.
- c) A Distributor is not authorised to receive cash from any investor of Aditya Birla Sun Life Mutual Fund. All applications along with cheque/ draft and other transaction documents of the investors shall be lodged with the branch office of the Fund or other authorised centers. A distributor is not authorised to issue any receipt or make any commitments for and on behalf of Aditya Birla Sun Life Mutual Fund.
- d) The Distributor shall protect and keep harmless and indemnify Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life AMC Limited investment manager of Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life Trustee Private Limited, Against and in respect of any loss, claim, cost, charge, expenses whatsoever which Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life AMC limited on behalf of Aditya Birla Sun Life Mutual Fund/ Aditya Birla Sun Life trustee Private Limited., may have to incur as a result of the distributor not conforming to the instruction contained herein or which may be issue to him/her from to time.
- e) The Distributor shall be eligible to receive commission on amounts mobilised by him/her under each scheme and undertake not to rebate commission back to investors or attract investors through temptation of rebates/gifts, pass back commission, etc. The amount of commission and/or incentive may vary from time to time and from scheme to scheme. (Net of Statutory levies, if any)
- f) The Distributor will not hold responsible Aditya Birla Sun Life Mutual Fund, for any loss incurred by him/her as not anticipated and arising out of any revision in the rate of commission or change of terms and conditions of distribution. Aditya Birla Sun Life Mutual Fund will not be responsible for any misplaced brokerage cheques or other related matter.
- g) The performance of the Distributors will be closely monitored and these not meeting the performance criteria may be terminated at sole discretion of Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life AMC Limited on behalf of Aditya Birla Sun Life Trustee Private Limited. Which will be final an binding on the distributors appointment is reviewed after 1yr. of appointment as per guidelines set by Aditya Birla Sun Life Mutual Fund. Aditya Birla Sun Life Mutual Fund shall have the right to terminate the empanelment of a Distributor at any without assigning any reason thereof. A Distributor may also terminate this arrangement at any time after informing Aditya Birla Sun Life Mutual Fund through a letter.
- h) The Distributor confirms having read the code of conduct or Mutual Fund Intermediaries prescribed by AMFI and undertakes to follow the code of conduct strictly. The distributor agrees to NOMINATE as per guidelines issued by AMFI and shall abide by the same. In the even of non-availability of NOMINATION, Aditya Birla Sun Life Mutual Fund shall disburse the unclaimed amount obtaining necessary documents and verifications on best effect basis.
- i) The Distributor confirms that he has cleared the AMFI test for distributors and holds a valid certificate of passing, in case of non-individual distributors. the distributor confirms that all the employees of the distributor who are engaged in sales, distribution and advice regarding investment in mutual fund products have already passed AMFI certification test before canvassing business.
- j) The Distributor wants that he will canvass business for Aditya Birla Sun Life Mutual Fund in accordance with AMFI guidelines and norms for intermediaries (AGNI) and any rules and regulation that may be framed or amended by AMFI form time to time.
- k) The Distributor shall not issue any advertising or promotional material of Aditya Birla Sun Life Mutual fund/Aditya Sun Life AMC Limited on behalf of Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life Trustee Private Limited, schemes without obtaining prior approval in writing from Aditya Birla Sun Life Mutual Fund. In particular, the Distributor shall not communicate to the investors of ABSLMF or the public at large, any information whether by way of advertisement or sales literature, other than that provided to the Distributors by Aditya Birla Sun Life Mutual Fund. the Distributor shall refrain from assuring any returns under any of the schemes of the mutual fund which do not offer assured returns, and also ensure that whenever performance figures and related information are given, risk factors are clearly and completely stated.
- l) Disputes arising out of this arrangement will be subject to the jurisdiction of the courts Mumbai city only.
- m) Distributor can commence business after receipt of confirmation letter from Aditya Birla Sun Life Mutual Fund. Any change in contact person/address will be intimated to the Relationship Manger on the distributors letterhead by the 15th of previous month.
- n) The Distributor has to submit a SELF DECLARATION as per the format provided by AMFI from time-to-time, by 31st Marche every year, Any non-compliance of such circular will attract suspensions of payment of Brokerage by Aditya Birla Sun Life Mutual Fund.
- o) Distributor agrees to sign such other documents, deeds and writings as may be required by Aditya Birla Sun Life Mutual Fund.
- p) The Distributor undertakes, represents and warrants that it has obtained the necessary consents , approvals and licences under the applicable law to which it is subject, and to deliver all necessary constitutional documents to Aditya Birla Sun Life Mutual Fund. which enables it and/or permits the carrying on of the activity of distribution of mutual fund units in terms of the covenants herein.
- q) The distributor acknowledges and accepts that it shall not hold Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life AMC Limited on behalf of Aditya Birla Sun Life Mutual Fund/Aditya Birla Sun Life Trustee Private Limited, responsible and /or lible in the event that the applicant is not sufficiently authorised to apply on behalf of the distributor, to the satisfaction of Aditya Birla Sun Life Mutual Fund.