



Application Form for Lumpsum / SIP / Folio Creation

Please read instructions before filling the Form

Application No :

Key Partner / Agent Information

Distributor / Broker ARN ARN -	Sub-Broker ARN Code ARN -	Internal Sub-Broker/Employee Code	Employee Unique Identification No. (EUIIN) <small>(Of Individual ARN holder or Of employee / Relationship Manager / Sales Person of the Distributor)</small>	Registered Investment Advisor Code
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I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker. (Refer Instruction no.1(vii)).

Sign Here Sole/First Applicant/Guardian	Sign Here Second Applicant	Sign Here Third Applicant
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Upfront commission, if any, shall be paid directly by the investor to the AMFI registered distributors based on the investors' assessment of various factors, including the service rendered by the distributor.

Existing Unitholder : Pl. fill in Folio Number below and then proceed to section 2.

Folio Number

Transaction Charges

 (Please tick any one of the below. For details refer KIM)

I am a first time investor in Mutual Funds / I am an existing investor in Mutual Funds (Default)

- Country of Birth / Citizenship / Nationality or Tax Residency, other than India, for any applicant? (✓): Yes / No (Mandatory to ✓). **If yes, please fill FATCA / CRS declaration.**
- NRI investors should mandatorily fill** separate FATCA / CRS declarations.
- Non Individual investors should mandatorily fill** separate FATCA / CRS & UBO declarations.

Name of Sole / First Unitholder

New Unitholder

1. Applicant's Details	Name (as per PAN)	PAN/KRN & KIN (Mandatory)	Date of Birth
First/Sole	Mr. / Ms. / M/s. City of Birth Country of Birth	PAN/KRN (10 Digit No.) KIN (14 Digit No.)	DDMMYYYY Enclosed (please ✓) <input type="checkbox"/> KYC Proof
Second	No joint holder where minor is first holder City of Birth Country of Birth	PAN/KRN (10 Digit No.) KIN (14 Digit No.)	DDMMYYYY Enclosed (please ✓) <input type="checkbox"/> KYC Proof
Third	No joint holder where minor is first holder City of Birth Country of Birth	PAN/KRN (10 Digit No.) KIN (14 Digit No.)	DDMMYYYY Enclosed (please ✓) <input type="checkbox"/> KYC Proof
Guardian/ Contact Person	(if Sole / First applicant is a Minor) Contact Person (in case of Non-individual Investors only) Relation <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Court appointed Guardian	PAN/KRN (10 Digit No.) KIN (14 Digit No.)	DDMMYYYY Enclosed (please ✓) <input type="checkbox"/> KYC Proof
POA Holder	(if the investment is being made by a Constituted Attorney, please furnish the details of POA Holder)	PAN/KRN (10 Digit No.) KIN (14 Digit No.)	DDMMYYYY

Mailing Address: (Address should be as per CKYC records, refer Instruction no. 13(ii))

City PIN
State
Tel. No. (Residence) Tel. No. (Office)
Mobile
E-mail

Overseas Address: (Mandatory in case of NRI / FII / FPI applicant)

City State/Province
Country PIN
Status (✓) Individual Minor Minor-NRI Repatriable Minor-NRI Non-Repatriable
 HUF NRI Repatriable NRI Non-Repatriable Partnership
 LLP Listed Co. Unlisted Co. Body Corporate
 Society/Club Trust FII FPI
 AOP Co. U/S 25/8 of Companies Act Others _____

Mode of Holding (Only for non-demat mode) (✓) Single Joint Anyone or Survivor (Default)

In case of Non-Profit Entity (please ✓)

2. KYC Details Mandatory (✓)

Gross Annual Income	First/Sole	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> 1-5 Lacs (Default) <input type="checkbox"/> 25 Lacs - 1 Crore	<input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> > 1 Crore	Net-worth	<input type="text"/> in `	as on	DDMMYYYY	(Not older than 1 year) (Mandatory for Non-individuals)
	Second	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> 1-5 Lacs (Default) <input type="checkbox"/> 25 Lacs - 1 Crore	<input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> > 1 Crore	Net-worth	<input type="text"/> in `	as on	DDMMYYYY	(Not older than 1 year)
	Third	<input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> 1-5 Lacs (Default) <input type="checkbox"/> 25 Lacs - 1 Crore	<input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> > 1 Crore	Net-worth	<input type="text"/> in `	as on	DDMMYYYY	(Not older than 1 year)
Occupation Details	First/Sole	<input type="checkbox"/> Private Service <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector / Govt. Service <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist	<input type="checkbox"/> Housewife <input type="checkbox"/> Others _____ (Please specify)			
	Second	<input type="checkbox"/> Private Service <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector / Govt. Service <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist	<input type="checkbox"/> Housewife <input type="checkbox"/> Others _____ (Please specify)			
	Third	<input type="checkbox"/> Private Service <input type="checkbox"/> Retired	<input type="checkbox"/> Public Sector / Govt. Service <input type="checkbox"/> Student	<input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist	<input type="checkbox"/> Housewife <input type="checkbox"/> Others _____ (Please specify)			
Others (For individuals)	First/Sole	<input type="checkbox"/> Politically Exposed Person	<input type="checkbox"/> Related to Politically Exposed Person	<input type="checkbox"/> Not Applicable					
	Second	<input type="checkbox"/> Politically Exposed Person	<input type="checkbox"/> Related to Politically Exposed Person	<input type="checkbox"/> Not Applicable					
	Third	<input type="checkbox"/> Politically Exposed Person	<input type="checkbox"/> Related to Politically Exposed Person	<input type="checkbox"/> Not Applicable					

Others (For Non-individuals) Is the entity involved in any of the following services

(i) Foreign Exchange/Money Changer Services Yes No (ii) Gaming/Gambling/Lottery/Casino Services/Betting Syndicates Yes No (iii) Money Lending/Pawning Yes No

PAN/KRN (Refer Instruction no. 3), Date of birth is mandatory in case of Minor, additionally refer Instruction no. 2, KYC & Networth (Refer Instruction no. 13),

KIN: KYC Identification Number from Central KYC Registry

Acknowledgement Slip (To be filled by the Applicant)

Application No :

Received from Date

Towards Subscription under below Schemes

Invesco India	Scheme Name
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Amount (Rs.) Cheque/DD No.

Signature, Stamp & Date

3. Investment Details (Cheque / DD should be drawn in favour of the Scheme. Investors applying under direct plan must mention "Direct" in the box provided below.)

Invesco India Scheme Name	Plan	Option
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Payment Details (For Cash, refer instruction no. 7)

Investment Amt. (Rs.)	DD Charges (Rs.)	Net Amt. (Rs.)	Cheque/DD No./UMRN
Net of DD Charges			
Bank Name		A/c. No.	
Mode of Payment <input checked="" type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/> Funds Transfer <input type="checkbox"/> Cash <input type="checkbox"/> NACH		Account Type <input checked="" type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others	
Applicable in case of Third Party Payment: Payment on behalf of <input checked="" type="checkbox"/> Minor <input type="checkbox"/> Client <input type="checkbox"/> Employee <input type="checkbox"/> Distributor (Refer instruction no. 6).		PAN/KRN	
Name of the person making payment		Enclosed <input checked="" type="checkbox"/> KYC Proof	

4. For SIP / Micro SIP for Post Dated Cheques

<input type="checkbox"/> SIP <input type="checkbox"/> Micro SIP	Refer instruction no. 6
SIP through Post Dated Cheques (Use CTS (Cheque Truncation System) Cheques only)	
Period From <input style="width:100px;" type="text" value="MM YYYY"/> To <input style="width:100px;" type="text" value="MM YYYY"/>	Applicable in case of Third Party Payment: <input type="checkbox"/> Minor <input type="checkbox"/> Client <input type="checkbox"/> Employee <input type="checkbox"/> Distributor
Cheque Nos. From <input style="width:100px;" type="text"/> To <input style="width:100px;" type="text"/>	Payment on behalf of <input checked="" type="checkbox"/>
Drawn on Bank <input style="width:100px;" type="text"/>	Name of the person making payment <input style="width:100px;" type="text"/>
Frequency <input checked="" type="checkbox"/> Monthly (Default) or <input type="checkbox"/> Quarterly	Enclosed <input checked="" type="checkbox"/> KYC Proof PAN / KRN <input style="width:100px;" type="text"/>
SIP Date <input checked="" type="checkbox"/> 3 rd <input type="checkbox"/> 10 th <input type="checkbox"/> 15 th (Default) <input type="checkbox"/> 20 th <input type="checkbox"/> 25 th Or	Branch <input style="width:100px;" type="text"/>
Mention Date of your choice <input style="width:100px;" type="text"/>	

5. Demat Account Details

DP ID # <input style="width:100px;" type="text"/>	Beneficiary Account No. <input style="width:100px;" type="text"/>	DP Name <input style="width:100px;" type="text"/>
(# Not applicable in case of CDSL).		Optional, Refer instruction no. 11 <input checked="" type="checkbox"/> NSDL <input type="checkbox"/> CDSL
The details of the Bank Account linked with the Demat A/c as mentioned below should be provided under section 5.		

6. Bank Account Details (Mandatory As Per SEBI Guidelines)

Bank A/c. No. <input style="width:100px;" type="text"/>	A/c. Type <input checked="" type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR <input type="checkbox"/> SNRR <input type="checkbox"/> Others _____
Bank Name <input style="width:100px;" type="text"/>	Branch <input style="width:100px;" type="text"/>
City <input style="width:100px;" type="text"/>	Address <input style="width:100px;" type="text"/>
MICR Code <input style="width:100px;" type="text"/> (9 digit No. next to your Cheque No.)	NEFT/RTGS/IFSC Code <input style="width:100px;" type="text"/> PIN <input style="width:100px;" type="text"/>
(11 digit character code appearing on cheque leaf)	

Please provide a cancelled cheque leaf of the same bank account as mentioned above. We will credit the redemption/dividend proceeds directly into investors' account through electronic means if the details provided by the investors are sufficient for the same. Mentioning your IFSC will help us transfer the amount to your bank account faster. To receive cheque payout, If you have provided multiple bank registration form . Unit holders who have opted to hold Units in dematerialised form must provide Bank Account details linked with the Demat account, as mentioned under section 4. In case of discrepancy, bank details as per depository records will be final.

7. Nomination Details (Mandatory for investors who opt to hold units in non-demat form.)

	Name	Date of Birth (for minor)	% Share	Relationship	Nominee PAN
Nominee 1	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text" value="DD MM YYYY"/>	<input style="width:50px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>
Nominee 2	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text" value="DD MM YYYY"/>	<input style="width:50px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>
Nominee 3	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text" value="DD MM YYYY"/>	<input style="width:50px;" type="text"/>	<input style="width:100px;" type="text"/>	<input style="width:100px;" type="text"/>
Name of Guardian (if Nominee is Minor)		Guardian's Relation (with the minor)		PAN of Guardian	
<input style="width:100px;" type="text"/>		<input style="width:100px;" type="text"/>		<input style="width:100px;" type="text"/>	
Address <input style="width:100px;" type="text"/>					

I do not intend to nominate the box, in case you do not wish to nominate

8. Declaration & Signature(s)

<p>The Trustees, Invesco Mutual Fund Having read and understood the contents of the Statement of Additional Information / Scheme Information Document(s) of the scheme, I/ We hereby apply to the Trustees of Invesco Mutual Fund for units of the Scheme / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I/ We have understood the details of the Scheme and I/ We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We do not have any existing Micro Investments which together with the current Micro Investment application will result in aggregate investments exceeding Rs. 50,000/- in a year (applicable to Micro Investment investors only). The Distributor has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us. I/ We hereby authorise Invesco Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my / our bank(s) / Invesco Mutual Fund's Bank(s) and / or Distributor / Broker/ Investment Advisor and to verify my/ our bank details provided by me / us. I / We hereby declare that the particulars given above are correct. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold Invesco Asset Management (India) Pvt. Ltd. (Investment Manager to Invesco Mutual Fund), their appointed service providers</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If NRI <input checked="" type="checkbox"/> Repatriation basis <input type="checkbox"/> Non-Repatriation basis</p> <p>Date <input style="width:100px;" type="text" value="DD MM YYYY"/> Place <input style="width:100px;" type="text"/></p>	<p>or representatives responsible. I / We will also inform Invesco Asset Management (India) Pvt. Ltd., about any changes in my/ our bank account. I / We hereby declare that the amount being invested by me / us in the Scheme of Invesco Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.</p> <p>I / We confirm that I / We are not United States person(s) under the laws of United States or residents(s) of Canada as defined under the applicable laws of Canada. Applicable to KRN holders : I, the first / sole holder hereby declare that I do not hold a Permanent Account Number and hold only a single 'PAN exempt KRN' issued by KRA and that my existing investment in schemes of Invesco Mutual Fund together with current application will not result in aggregate investments exceeding Rs. 50,000/- in a rolling 12 months period or in a financial year i.e. April to March. Applicable to NRIs only : I / We confirm that I am / we are Non-Residents of Indian Nationality /Origin and that the funds are remitted from abroad through approved banking channels or from my /our NRE / NRO / FCNR/ SNRR Account. I / We confirm that the details provided by me / us are true and correct.</p>
<p>Sole / First Applicant / Guardian / POA <input style="width:100px;" type="text"/></p> <p>Second Applicant / POA <input style="width:100px;" type="text"/></p> <p>Third Applicant / POA <input style="width:100px;" type="text"/></p>	<p></p> <p></p> <p></p>

GET IN TOUCH

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 T +91 22 67310000 F +91 22 23019422

call : 1800-209-0007 > sms 'Invest' to 56677 > Invest Online www.invescomutualfund.com

Systematic Investment Plan (SIP) Registration cum mandate form for NACH/Direct Debit/ECS

New Investors are requested to fill-in the scheme application form also

Key Partner / Agent Information

Distributor / Broker ARN ARN -	Sub-Broker ARN Code ARN -	Internal Sub-Broker/Employee Code	Employee Unique Identification No. (EUIIN) <small>(Of individual ARN holder or Of employee / Relationship Manager / Sales Person of the Distributor)</small>	Registered Investment Advisor Code
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For details on transaction charges payable to distributors, please refer to KIM.

I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

Sign Here Sole/First Applicant/Guardian	Sign Here Second Applicant	Sign Here Third Applicant
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Upfront commission, if any, shall be paid directly by the investor to the AMFI registered distributors based on the investors' assessment of various factors, including the service rendered by the distributor.

New SIP Micro SIP

1. Investment and SIP Details

(Investors applying under the direct plan must mention "Direct" against Scheme name.)

First / Sole Investor
Name

Application No. (New Investor) Folio No.(Existing Unitholder)

PAN / KRN Enclosed KYC Proof

Existing UMRN SIP Reference No.

Scheme Scheme Name Plan Option Dividend Frequency

Each SIP Amount (Rs.)

SIP Date 3rd 10th 15th 20th 25th or Frequency Monthly (Default) Quarterly (Jan, April, July, Oct)

SIP Period Start From End On Till Further Notice

SIP Top-Up (Optional)
Top-up Amount Rs. Top Start Month
Frequency Half Yearly Yearly (Default) Top Cap Month - Year

2. Demat Account Details (Optional)

Please NSDL CDSL

DP ID # Beneficiary Account No. DP Name

(Applicable only to existing investors for fresh SIP enrolment.)

3. First SIP Transaction

Cheque No. Cheque Date Amount (Rs.)

Bank Bank A/c. No.

4. Particulars of Bank Account (For Direct Debit/ECS)

Bank Name Bank Account Number

Name as per Bank record Maximum Amount

9 Digit MICR Code (Please enter the 9 digit number that appears next to the cheque number). In case of At Par accounts, kindly provide the correct MICR number of the bank branch.

Declaration : I/We have read and understood the contents of the Scheme Information Document(s) and Statement of Additional Information and the terms & conditions of SIP enrolment through Direct Debit/ECS/NACH and agree to abide by the same. I/We hereby apply to the Trustee of Invesco Mutual Fund for enrolment under the SIP of the following Scheme(s)/ Plan(s) / Option(s) and agree to abide by the terms and conditions of the same. I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above through participation in Direct Debit/ECS/NACH. I/We authorise the bank to honour the instructions as mentioned in the application form. I/We also hereby authorise bank to debit charges towards verification of this mandate, if any. I/We agree that Invesco Asset Management (India)/Mutual Fund (including its affiliates), and any of its officers directors, personnel and employees, shall not be held responsible for any delay/wrong debits on the part of the bank for executing the direct debit instructions of additional sum on a specified date from my account. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold the user institution responsible. I/We undertake to keep sufficient funds in the funding account on the date of execution of standing instruction. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. The ARN holder has disclosed to me/us all the commissions(in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

<input checked="" type="checkbox"/> First Account Holder Signature (As in Bank Records)	<input checked="" type="checkbox"/> Second Account Holder Signature (As in Bank Records)	<input checked="" type="checkbox"/> Third Account Holder Signature (As in Bank Records)
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UMRN Date

Sponsor Bank Code

(Please) I/We hereby authorize SB CA CC SB-NRE SB-NRO Others _____

Bank Account Number

with Bank IFSC Or MICR

an amount of Rupees In Words ₹ In Figures

Frequency : Monthly Quarterly Half Yearly Yearly As & when presented Debit Type : Fixed Amount Maximum Amount

Folio No. Phone

PAN E-mail

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the banks.

PERIOD	From <input type="text" value="DD MM YYYY"/>	<input checked="" type="checkbox"/> Signature of Primary Bank Account Holder	<input checked="" type="checkbox"/> Signature of Bank Account Holder	<input checked="" type="checkbox"/> Signature of Bank Account Holder
	To <input type="text" value="DD MM YYYY"/>	1 Name as in bank records	2 Name as in bank records	3 Name as in bank records
	Or <input type="checkbox"/> Until Cancelled			

This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorised to cancel / amend this mandate by appropriately communicating the cancellation/amendment request to the user entity/Corporate or the bank where I have authorised debit.

Terms & Conditions for SIP through Direct Debit/ECS/NACH and SIP Top-up

Features of SIP:

Frequency	Monthly/Quarterly (Jan, April, July, October)
SIP dates offered	3rd or 10th or 15th or 20th or 25th of the month / quarter or any date of your choice.
Default Frequency/Date	<ul style="list-style-type: none"> Frequency: Monthly Date: 15th of the month If end date is not specified, the fund will continue SIP till it receives termination notice from the investor or all the post dated cheques are utilized. (See Note 10 below)
Minimum amount per installment	<p>Invesco India Tax Plan¹ (¹An equity linked savings scheme with a lock in period of 3 years. Units cannot be assigned/transferred/pledged/redeemed/switched-out until the completion of 3 years from the date of allotment.) Rs. 500/- per month and in multiples of Rs.500/- thereafter for monthly and quarterly frequency</p> <p>Invesco India Dynamic Equity Fund, Invesco India Mid Cap Fund, Invesco India Contra Fund, Invesco India Growth Fund, Invesco India Arbitrage Fund, Invesco India Banking Fund, Invesco India Business Leaders Fund, Invesco India PSU Equity Fund, Invesco India Infrastructure Fund, Invesco India Mid N Small Cap Fund, Invesco India Pan European Equity Fund and Invesco India Global Equity Income Fund, Invesco India Monthly Income Plan (MIP) Plus and Invesco India Gold Fund.</p> <ul style="list-style-type: none"> Rs. 500/- per month and in multiples of Re. 1/- thereafter for monthly frequency. Rs. 1,500/- per quarter and in multiples of Re. 1/- thereafter for quarterly frequency. <p>Invesco India Ultra Short Term Fund, Invesco India Short Term Fund, Invesco India Credit Opportunities Fund, Invesco India Medium Term Bond Fund, Invesco India Active Income Fund, Invesco India Bank Debt Fund, Invesco India Gilt Fund - Long Duration Plan and Invesco India Corporate Bond Opportunities Fund.</p> <ul style="list-style-type: none"> Rs. 1,000/- per month and in multiples of Re. 1/- thereafter for monthly frequency. Rs. 2,000/- per quarter and in multiples of Re. 1/- thereafter for quarterly frequency.
Minimum number of installments	<ul style="list-style-type: none"> 12: Where each SIP installment is Rs.500/- or more per month but less than Rs.1,000/- per month 4: for quarterly frequency (including first installment) 6: Where each SIP installment is Rs.1,000/- or more per month
Installments	All installments should be of same amount. No upper limit for single cheque or aggregate. The first cheque and subsequent cheques should not fall in the same month/quarter. First cheque should be of current date (no post-dated cheque will be accepted). In case of SIP through post-dated cheques, all post-dated cheques should be of same date and same amount.
Load Structure	For load structure details, please refer to KIM. Load Structure prevailing at the time of submission of SIP application form (whether for fresh enrollment or extension) will be applicable for all the SIP installments specified in such application.

- New Investors should mandatorily give a cheque for the first transaction.
- First SIP Cheque should be dated current day. All subsequent Installments through Direct Debit/ECS/NACH to be either 3rd or 10th or 15th or 20th or 25th of the month or any date of your choice.
- Please draw cheque in the name of the Scheme or its abbreviation and cross "A/c Payee" e.g. "Invesco India Dynamic Equity Fund" or "IIDEF". Also write SIP enrollment Form no. or folio number on the reverse of cheque accompanying SIP enrollment form.
- In case SIP date specified is a non-business day or falls during a book closure period, the transaction will be effected on the next business day.
- The first installment will be processed at Applicable NAV based on time stamping. In case of SIP for an amount of Rs. 2 lakh and above, the Applicable NAV of the Scheme will be based on funds available for utilizations, as stated in KIMs/SIDs. The second installment will be processed latest for the available SIP date (currently 3rd, 10th, 15th, 20th or 25th of each month/ quarter or any date of your choice) indicated by the investor, but only after the expiry of 30 (thirty) Calendar Days from the date of first installment for Direct Debit/ECS and after 21 days for NACH.
- Unit holder has a right to discontinue the SIP facility at any time by sending written request to any Official Points of Acceptance, at least 10 Business Days prior to the next SIP Debit quoting their SIP reference number. On receipt of such request, the SIP enrollment will be terminated. Incomplete applications will be rejected.
- In case any cheque submitted by the investor for SIP installment or any payment instruction for SIP installment is dishonored by the Bankers for the reason of account of investor is closed, the AMC would discontinue the SIP immediately and reserves the right to redeem the outstanding units if total investment is below Rs. 5,000/- the AMC reserves the right to discontinue the SIP enrolment in case cheque/ payment instruction submitted by Unit holder is not honored by Banker on 2 (two) consecutive occasions for either insufficiency of funds or as a result of a stop payment instruction issued by the Unit holder and reserves the right to redeem the outstanding units if total investment is below Rs. 5,000/-.
- The facility will be automatically terminated upon receipt of intimation of death of the Unit holder.
- SIP in a folio of minor will be registered only upto the date of minor attaining majority though the instruction may be for the period beyond that date.
- Existing investor opting for demat facility should fill in the common application form also.
- The investors can also subscribe Units through SIP in Demat (electronic) mode for the Scheme. However the Units will be allotted based on applicable NAV of the Scheme and will be credited to investor's Demat (Beneficiary) Account on weekly basis on realization of funds, e.g. Units will be credited to investor's Demat (Beneficiary) account every Monday (or next business day, if Monday is a non-business day) for realization status received in last week from Monday to Friday.
- Investors will not hold Invesco Mutual Fund / Invesco Asset Management (India) Private Limited, it's Registrar and other service providers responsible, if the transaction is delayed or not affected or the investor's bank account is debited in advance or after the specific SIP date.
- New investors who wish to enroll for SIP through Direct Debit/ECS/NACH should fill the SIP Application Form and the Registration cum Mandate Form for Direct Debit/ECS/NACH.
- Existing investors can avail SIP facility by submitting only SIP Registration cum mandate form for Direct Debit/ECS/NACH.
- The first cheque should be drawn on the same bank account which is to be registered for Debit. Alternatively, the cheque may be drawn on any bank, but provide a photocopy of the cheque of the bank / branch for which Debit is registered.
- Invesco Mutual Fund / Invesco Asset Management (India) Private Limited, it's Registrar and other service providers shall not be responsible and liable for any damages/compensation for any loss, damage etc., incurred by the investor. The investor assumes the entire risk of using this facility and takes full responsibility.
- ECS facility is offered only to the investors having bank accounts in select cities where ECS is available. For select cities please visit website www.rbi.org.in. The cities in the list may be modified/updated/changed/removed at any time in future entirely at the discretion of Invesco Mutual Fund / Invesco Asset Management (India) Private Limited, without assigning any reason or prior notice. If any city is removed, SIP instructions of investors for such cities via ECS route will be discontinued without prior notice.
- Investor should agree to abide by the terms and conditions of ECS facility of RBI.
- Investor can choose to change their bank account in ECS by giving 30 calendar days written notice to any of our Investor Service Centers quoting their SIP reference number. Incomplete applications will be rejected.

Terms & Conditions - NACH / Direct Debit

- NACH debit facility is offered at various banks. For a detailed list of banks please refer the website www.npci.org.in
- This facility is offered only to the investors having bank accounts with above mentioned Banks. Above list is subject to modification/updates at any time in future at the sole discretion of Invesco Asset Management (India) Private Limited, without assigning any reason or prior notice. If any bank is removed, SIP instructions of investors for such banks via NACH will be discontinued without any prior notice.
- By signing the NACH mandate form the investor agrees to abide by the terms and conditions of NACH facility through NPCI (www.npci.org.in).
- The Registration cum Mandate Form for NACH should be submitted at least 21 Calendar days prior to next SIP cycle date through NACH.
- Unique Mandate Registration Number (UMRN) is auto generated by NPCI during the mandate creation for the first time. Investors, who do not have the UMRN, please leave it blank. UMRN would be linked to the folio and maximum length is 20 characters comprising of Alpha Numeric Character allotted by NPCI.
- Investors who already have UMRN registered under the folio can fill up the SIP Registration cum Mandate Form for NACH and should be submitted at least 10 Calendar days before the date of the first debit through NACH.
- Please provide the cancelled cheque leaf of the Bank A/c no. for which NACH facility is registered.

- Investors need to mandatorily fill the SIP Registration Cum Mandate form for NACH for any amendment and cancellation quoting their UMRN by giving 21 calendar days prior notice to any of the investor service centre.
- Investor can choose to discontinue the SIP facility under folio without cancelling the UMRN by giving 10 Business days prior notice to any of the Investor Service Centre.
- IFSC/MICR of customer bank. (maximum length-11 Alpha Numeric Characters)
- Amount payable for service or maximum amount per transaction that can be processed in words.
- In case of existing investor, if application is received without existing UMRN then the last UMRN registered in the folio would be considered.
- Maximum amount is the uppermost limit per transaction set by the investor for his registered bank account to be debited.

Terms & Conditions - Direct Debit

Direct Debit: The Direct Debit Facility is available only with the banks with which The AMC or its service provider has tie up for Direct Debit as mentioned below:

List of banks/branches for SIP Direct Debit Facility²

Banks	Branches
Axis Bank, IDBI Bank, Kotak Mahindra Bank, IndusInd Bank, Bank of India, Punjab National Bank, Allahabad Bank, Federal Bank, United Bank of India, ICICI Bank, Bank of Baroda, Union Bank of India, State Bank of India, UCO Bank, State Bank of Patiala, Citi Bank, Corporation Bank, South India Bank	All Branches

²Please contact Invesco Mutual Fund Investor Service Center for updated list of banks/ branches eligible for Direct Debit Facility.

- You can choose to change your bank account by giving 30 calendar days written notice to any of our Investor Service Centers.
- You can choose to discontinue this facility by giving 10 business days written notice to any of our Investor Service Centers.

Terms & Conditions - SIP Top-up Facility

'Top-Up' facility will enable investors to increase the amount of SIP installments at pre-defined frequency by a fixed amount during the tenure of SIP.

The features, terms and conditions for availing the 'Top-Up' facility shall be as follows:

- Top-Up facility offers frequency at half yearly and yearly intervals. In case the Top-Up frequency is not specified, it will be considered as yearly frequency.
- Minimum Top-Up amount would be Rs.100/- and in multiples of Re. 1/-thereafter for all the schemes of the Fund that offer SIP facility except Invesco India Tax Plan wherein minimum Top-Up amount would be Rs. 500/- and in multiples of Rs. 500 thereafter.
- In case the investor does not specify Top-Up amount, Rs. 100/- will be considered as the Top-Up amount (in case of Invesco India Tax Plan, Rs. 500/-will be considered as Top-Up amount) and the request will be processed accordingly.
- Top-Up facility would be available to all new SIP enrolments. Existing investors who have enrolled for SIP with maximum amount for debit are also eligible to avail Top-Up facility and will be required to submit 'SIP cum Registration Mandate' at least 20 calendar days prior to the Top-Up start month. In case SIP installment after Top-Up exceeds maximum amount for debit, then the request for Top-Up will be processed upto the maximum amount for debit. Further, if the investor revises the maximum amount for debit, then such increase in amount will be effective from the next Top-Up cycle. However, maximum amount registered for debit mandate cannot be reduced.
- Existing investors registered for SIP through Direct Debit facility and intending to avail Top-Up facility will be required to cancel the existing SIP and enroll a fresh SIP with Top-Up details.
- It would be mandatory for investor to mention in 'SIP cum Registration Mandate' the period (month - year) upto which he wishes to avail Top-Up facility.

An Illustration : The Top-Up facility will work as follows:

Details of SIP registered	Top-up facility
<ul style="list-style-type: none"> Fixed SIP Installment amount: Rs. 5,000/- SIP Period: 01-April-2016 till 31-March-2019 (3 years) SIP date: 1st of every month (36 installments) 	<p>By providing/choosing the following additional details, an investor can avail Top-up facility.</p> <p>Example:</p> <ul style="list-style-type: none"> Top-Up Amount: Rs. 1,000/- Top-Up Frequency: Every 6 months

SIP Installments shall be as follows:

Installment No(s).	SIP Installment (in Rs.) (A)	Top-Up amount (in Rs.) (B)	Monthly SIP Installment amount after Top-up (in Rs.) (A+B)
1 to 6	5,000	N.A.	5,000
7 to 12	5,000	1,000	6,000
13 to 18	6,000	1,000	7,000
19 to 24	7,000	1,000	8,000
25 to 30	8,000	1,000	9,000
31 to 36	9,000	1,000	10,000



FATCA & CRS Annexure - Individual Accounts

(Including Sole Proprietor)

(Please consult your professional tax advisor for further guidance on your tax residency, if required) (Refer instructions)

FATCA & CRS Information (Self Certification)

Name

Gender Male Female PAN Occupation Type Service Business Others

Father's Name

Address of tax residence would be taken as available in KRA database. In case of any change, please approach KRA & notify the changes

Type of address given at KRA Residential Business Registered Office

Documents required, if PAN not provided Passport Election ID Card Govt. ID Card Driving License UIDAI Card NREGA Job Card Others

Date of Birth City of Birth

Country of Birth Nationality

Are you a tax resident of any country other than India? Yes No

If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.

Country of Tax Residency ¹	Tax Identification Number ¹	Identification Type (TIN or Others, please specify)

¹ To also include USA, where the individual is a citizen / green card holder of The USA
² In case Tax Identification Number is not available, kindly provide its functional equivalent ³

Certification

I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read alongwith the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform Invesco Asset Management (India) Private Limited/Invesco Mutual Fund/ Trustees for any modification to this information promptly.

Authorised Signatory

Date

Place

FATCA & CRS Terms & Conditions

Details under FATCA& CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income- tax Rules, 1962, which require Indian financial institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit holders. In relevant cases, information will have to be reported to tax authorities/ appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days. Please note that you may receive more than one request for information if you have multiple relationships with Invesco Asset Management (India) or our group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.