

Application No.

BROKER INFORMATION	
BROKER NAME & ARN	SUB-BROKER ARN
ARN - 30156	

Application Date & Time

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investors' assessment of various factors including the service rendered by the distributor.

1. TRANSACTION CHARGES (Please refer instructions and tick any one)
Applicable for transactions routed through a distributor who has 'opted in' for transaction charges.
 I am a First Time Investor in Mutual Fund Industry. (Rs 150 will be deducted.)
 I am an Existing Investor in Mutual Fund Industry. (Rs 100 will be deducted.)

2. EXISTING FOLIO NUMBER Existing Investors - Please fill in Sections 1, 14, 15, 16 and 19 only **KYC **** Yes No.

3. UNIT HOLDER INFORMATION

Name of the First Applicant / Corporate Investor **Date of Birth*** **Age (No. of years)**

Mr/ Ms/ M/s/ Dr/ Minor
 PAN (mandatory)^{§§} Enclosed (Please ✓) PAN Proof^{§§} KYC Letter** Nationality Indian Other _____ (Refer instruction related to PAN & KYC)
Annual Income* (Please ✓) Rs. 0 - 5 lacs Rs. 5 - 25 lacs Rs. 25 lacs - 1 crore Rs. 1 - 5 crore Rs. 5 crore & above **Source of Income :** _____

Name of the Second Applicant
 Mr/ Ms/ M/s/ Dr
 PAN (mandatory)^{§§} Enclosed (Please ✓) PAN Proof^{§§} KYC Letter** (Refer instruction related to PAN & KYC)

Name of the Third Applicant
 Mr/ Ms/ M/s/ Dr
 PAN (mandatory)^{§§} Enclosed (Please ✓) PAN Proof^{§§} KYC Letter** (Refer instruction related to PAN & KYC)

Name of the Guardian (in case of a minor)/Name of the Power of Attorney Holder.
 Mr/ Ms/ M/s/ Dr
 PAN (mandatory)^{§§} Enclosed (Please ✓) PAN Proof^{§§} KYC Letter** (Refer instruction related to PAN & KYC)

4. STATUS OF FIRST APPLICANT* Resident Individual Bank HUF Proprietor Minor Society FII Partnership Firm
 NRI PIO Trust Company Other _____

5. MODE OF OPERATION* Single Joint Anyone or Survivor **6. If NRI* (Please ✓)** Repatriation basis Non-repatriation basis

7. If COMPANY IS LISTED* Yes No **8. ARE YOU POLITICALLY EXPOSED PERSON?*** First Holder Yes No Second Holder Yes No Third Holder Yes No

9. LIST OF DOCUMENTS SUBMITTED* (in case of company) Memorandum of Association / Article of Association Board Resolution List of Authorised Signatory

10. OCCUPATION (Please ✓) Private Sector Service Public Sector / Government Service Retired Business Professional Housewife Student Agriculturist
 Current / Former Head of State Forex Dealer Other _____

11. CONTACT DETAILS - FIRST APPLICANT/ GUARDIAN/ CORPORATE*

Contact Person (In case of Non Individual Investor)

Address
 City State Pincode
 Landline No. Email

12. OVERSEAS ADDRESS* (Mandatory in case of NRIs/ FIIs) (PO Box address is not sufficient. Investors residing overseas & with PO Box address must provide their Indian address)

Address
 City State Pincode
 Mobile Landline No. Email

13. CONTACT & ADDRESS OF POWER OF ATTORNEY HOLDER (PO Box address is not sufficient)

Address
 City State Pincode
 Mobile Landline No. Email

14. IN CASE THE INVESTOR IS NOT AN INDIVIDUAL (like Corporate, Partnerships, HUF etc) please provide details of Directors/Partners*
 Ultimate Beneficial Owner (UBO) is a natural person, who ultimately owns or controls (directly or indirectly) 25% or more of your entity. If you have any UBOs, please provide the details below. If there is no UBO, write Not Applicable.

List of UBOs				Directors/Partners/Trustees/Karta of HUF			
Name	Date of Birth	PAN No.	Nationality	Name	Date of Birth	PAN No.	Nationality

If the above space is insufficient, please provide the information by way of an annexure, duly attested.
 *w.e.f. 01 January, 2011, KYC shall be mandatory for all investors irrespective of the amount of investments in Mutual Fund. *** MANDATORY FIELDS**
 **Please note that w.e.f. 01 January, 2008, copy of PAN Card is Mandatory for all investors (including Joint Holders, Guardian in case of Minor and NRIs). ... continued overleaf

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor)

Deutsche Mutual Fund: Registered Office: 2nd Floor, 222, Kodak House, Dr. D. N. Road, Fort, Mumbai-400001. **Application No.** _____

Received from Mr./Ms./M/s. _____
 an application for Purchase of Units of Scheme _____ Plan _____

Option _____ alongwith Cheque / Demand Draft No. _____ Dated _____
 Amount (Rs.) _____ Drawn on _____ Date _____

Please Note: All Purchases are subject to realisation of Cheques / Demand Drafts.

ISC Stamp & Signature

15. **MODE OF CORRESPONDENCE** (Where the investor has provided his e-mail id, the AMC shall send all communication to the investor via e-mail. Investors who wish to receive hard copy communication are requested to leave the e-mail id blank)

I / We wish to receive all communication through physical mode in lieu of email.

16. **BANK ACCOUNT DETAILS OF FIRST / SOLE APPLICANT** (Refer "Bank Details" under Instructions. Please enclose a copy of a cancelled cheque)

Name of Bank _____ Branch _____
 City _____ State _____ Account No. _____
 Account Type Current Savings NRO NRE FCNR Others _____
 MICR code* _____ IFSC code** _____

*Mandatory for dividend payout via ECS (The 9 digit code appears on your cheque next to the cheque number) **Mandatory for credit via RTGS/ NEFT (11 digit code also found on your cheque leaf.)

17. **INVESTMENT DETAILS**

Scheme Name _____
 Plan (Please ✓) Regular Plan Wealth Plan** Institutional Plan Super Institutional Plan Auto Sweep Plan* Premium Plus Plan*** Option (Please ✓) Growth Dividend Bonus
 Dividend Frequency (Please ✓) Daily Weekly Fortnightly Monthly Quarterly Annual Dividend Mode (Please ✓) Reinvestment Payout
 * Wealth Plan is available only for DWS Alpha Equity Fund and DWS Investment Opportunity Fund. ***Premium Plus Plan is available only for DWS Short Maturity Fund In case of valid application received without indicating any choice of Options/Dividend Mode, it will be considered as Growth Option/Reinvestment by default, for all Scheme(s)/Plan(s).

18. **PAYMENT OPTIONS**

Investment Amount (Rs.) _____ DD Charges if any (Rs.) _____
 Net Amount (Rs.) _____ Mode of Payment _____ Cheque / Demand Draft / Fund Transfer _____ Strikeout whichever is not applicable.
 Cheque / DD No. _____ Dated _____ Account No. _____
 Drawn on Bank _____ Branch _____
 City _____ Account Type (Please ✓) Savings Current NRE NRO FCNR Others _____

Separate Cheque / DD / Fund Transfer instruction required for investment in each Scheme / Plan. Cheque / DD to be drawn in favour of the Scheme applied for.

19. **AUTO SWEEP FACILITY ENROLLMENT**

Auto Sweep from (Please ✓) DWS Premier Bond Fund DWS Ultra Short Term Fund
 Auto Sweep into (Please ✓) DWS Alpha Equity Fund DWS Investment Opportunity Fund SIP/Auto Sweep Dates (Please ✓) 7th 15th 21st 28th
 Auto Sweep Installments (Please ✓) 4 6 10 Option (Please ✓) Growth Dividend Bonus Dividend Mode (Please ✓) Reinvestment Payout

* Auto Sweep Facility available only for DWS Premier Bond Fund Fund and DWS Ultra Short Term Fund into DWS Equity Funds.

20. **DEMAT ACCOUNT DETAILS OF FIRST / JOINT APPLICANT(S) (REQUIRED)**

NSDL OR CDSL
 Depository Participant (DP) ID _____ Depository Participant (DP) ID _____
 Beneficiary & Beneficiary Account Number _____
 Account Number _____
 (If the name of the applicant in this application is not identical with the Beneficiary Account details with the above mentioned DP, the application will be treated as incomplete and is liable to be rejected.)

21. **NOMINATION DETAILS**

I / We do hereby _____ nominate the under mentioned person to receive the units to my / our credit in this folio no. in the event of my / our death. I / We also understand that all payments and settlements made to such Nominee, and signature of the Nominee acknowledgment receipt thereof shall be a valid discharge by the AMC / Mutual Fund / Trustee.
 Nominee's Name _____
 Relationship _____
 Address _____
 In case Nominee is a Minor
 Name of Guardian _____
 Address of Guardian _____
 Date of Birth _____ Signature of Guardian _____
 In case of more than one nominee, kindly submit multiple nomination (maximum 3 nominees) forms. Extra nomination forms can be obtained from the nearest ISC or Registrar or from the AMC website.

22. **DECLARATION AND SIGNATURES**

I/We have read and understood the contents of the Scheme Information Document(s) of the respective Scheme(s) of Deutsche Mutual Fund. I/We hereby apply to the Trustees of Deutsche Mutual Fund for allotment of Units of the Scheme(s) of Deutsche Mutual Fund, as indicated above and agree to abide by the term, conditions, rules and regulations of the relevant Scheme(s). I/We have understood the details of the Scheme(s) and I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. *I/We confirm that I am/We are non Resident of Indian Nationality/Origin and I/We hereby confirm that the funds of subscription have been remitted form abroad through normal banking channels or from funds in my/our NRE/NRO/FCNR Account. I/We hereby declare that the details provided by me/us are true and correct, the amount being invested has been derived from legitimate sources and is not held or designed for the purpose of contravening any statute, notification, legislation, directions or otherwise and I/We am/are duly authorised to sign this Application Form. I/We confirm that in the event I/We have mentioned "Not Applicable" / left the space blank against PAN in this Application Form, I am/we are not required to obtain a PAN under the provisions of the Income Tax Act, 1961. In the event "Know Your Customer" process is not completed by me/us to the satisfaction of the fund, I/We authorise the Fund to redeem the funds invested in the scheme, in favour of the applicant at the applicable NAV on the date of such redemption and undertaking such other action with such funds that may be required by law.

The ARN holder 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.

Date: _____
 _____ First / Sole Applicant / Guardian
 _____ Second Applicant
 _____ Third Applicant
 _____ Power of Attorney Holder

CHECKLIST Documents as listed below are to be submitted along with the Application Form (as applicable to your specific case)

Document submitted. Kindly (✓)	Sr No	Documents	Individuals	Companies	Trusts	Societies	Partnership Firms	FIs	NRIs	Investments through POA
	1	Resolution / Authorisation to invest		✓	✓	✓	✓	✓		✓
	2	List of Authorised Signatories with Specimen Signature(s)		✓	✓	✓	✓	✓		✓
	3	Memorandum & Articles of Association		✓						
	4	Trust Deed			✓					
	5	Bye-Laws				✓				
	6	Partnership Deed					✓			
	7	Notarised Power of Attorney								✓
	8	Account Debit Certificate in case payment is made by DD from NRE / FCNR A/c where applicable						✓	✓	
	9	PAN Proof (not required for existing investors)	✓	✓	✓	✓	✓	✓	✓	✓
	10	KYC acknowledgment letter (required if not already submitted)	✓	✓	✓	✓	✓	✓	✓	✓
	11	Copy of cancelled cheque	✓	✓	✓	✓	✓	✓	✓	✓

All documents in 1 to 6 above should be originals or true copies certified by the Director / Trustee / Company Secretary / Authorised Signatory / Notary Public / Partner as applicable. Originals will be handed over after verification.

In compliance with SEBI circular no. Cir/ IMD/ DF/13/ 2011 dated August 22, 2011, and amendments if any, the AMC may deduct Transaction Charge for subscriptions made through distributors of mutual funds. Such Transaction Charge collected by the AMC will be paid to the distributor/ARN Holder (who have 'Opted in' to receive the transaction charges) through whom the investment has been made. However, no Transaction Charges will be imposed for investments made directly with the Fund. Transaction Charge shall be subject to the following as well as amendments that may be made from time to time: i) For existing mutual fund investors, an amount of Rs. 100/- per subscription of Rs. 10,000/- and above. ii) For a new investor investing for the first time in mutual funds, an amount of Rs. 150/- per subscription of Rs. 10,000/- and above. iii) There shall be no Transaction Charge on subscription below Rs. 10,000/- iv) There shall be no Transaction Charge on transactions other than purchases/ subscriptions relating to new inflows. v) Such amount shall be deducted by the AMC from the subscription amount and paid to the distributor; and the balance amount shall be invested under the Scheme and units allotted accordingly. vi) The Statement of Account sent to the Unit holder shall state gross subscription less transaction charge and also show the number of units allotted against the net investment.