

# Deutsche Mutual Fund

## Transfer In-Transfer Out & Transfer Out-Transfer In Application Form

(Please fill in the Application Form in CAPITAL Letters)

(Please read the instructions before completing this Application Form)

Deutsche Asset Management  
A Member of Deutsche Bank Group



BROKERAGE INFORMATION	
Broker Name & ARN	Sub-Broker ARN
ARN-30156	

Application No.

Application Date & Time
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Upfront commission 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'S INFORMATION

If you have, at any time, invested in any Scheme of Deutsche Mutual Fund and wish to hold your present investment in the same Folio, please furnish your Folio Number, Scheme Name, PAN Details, Bank Account Details below and proceed to investment & Payment Details.

Folio No.  KYC  Yes  No

### NEW APPLICANT'S INFORMATION (Please fill in Block Letters)

Name of Sole / First Applicant (leave space between first / middle / last name)		Salutation <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof.	
* Date of Birth (First holder / Minor) D D / M M / Y Y Y Y	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	* Nationality <input type="checkbox"/> Indian <input type="checkbox"/> Others	Place of Birth
* Annual Income (Please ✓) <input type="checkbox"/> Rs. 0-5 lacs <input type="checkbox"/> Rs. 5-25 lacs <input type="checkbox"/> Rs. 25 lacs - 1 crore <input type="checkbox"/> Rs. 1-5 crore <input type="checkbox"/> Rs. 5 crore & above	Enclosed (Please ✓) <input type="checkbox"/> PAN Card copy <sup>ss</sup> <input type="checkbox"/> KYC Compliance proof	Source of Income	
Name of Guardian (in case of Minor)			
Contact Person (in case of Institutional Investors)			
PAN <sup>s</sup>	Enclosed (Please ✓) <input type="checkbox"/> PAN Card copy <sup>ss</sup> <input type="checkbox"/> KYC Compliance proof		
Name of Second Applicant			
PAN <sup>ss</sup>	Enclosed (Please ✓) <input type="checkbox"/> PAN Card copy <sup>ss</sup> <input type="checkbox"/> KYC Compliance proof		
Name of Third Applicant			
PAN <sup>ss</sup>	Enclosed (Please ✓) <input type="checkbox"/> PAN Card copy <sup>ss</sup> <input type="checkbox"/> KYC Compliance proof		
* Address of Sole / First Applicant (PO Box Address is not sufficient)			
<input type="text"/>			
City	Pin Code	State	
Office Tel.	Residence Tel.		
Fax	Mobile		
* Overseas Address (in case of NRIs / FIs applicants)		Address for Correspondence (Please ✓) <input type="checkbox"/> Indian (by Default) <input type="checkbox"/> Overseas	
<input type="text"/>			
* To receive Account Statement (on each Transaction) / Quarterly Newsletter and Annual Report by e-mail, please give your E-mail ID below. (Please use BLOCK Letters)			
E-mail <input type="text"/>			
Please leave the E-mail ID blank if you wish to receive hard copy communication			
* Mode of Holding (Please ✓) <input type="checkbox"/> Single <input type="checkbox"/> Joint <input type="checkbox"/> Anyone or Survivor	* Status (Please ✓) <input type="checkbox"/> Individual <input type="checkbox"/> HUF <input type="checkbox"/> Company <input type="checkbox"/> FIs <input type="checkbox"/> NRI <input type="checkbox"/> Trust		
* If NRI (Please ✓) <input type="checkbox"/> Repatriation basis <input type="checkbox"/> Non-repatriation basis	<input type="checkbox"/> Society <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietary <input type="checkbox"/> AOP <input type="checkbox"/> Insurance Company <input type="checkbox"/> Bank		
* If company is listed <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> BOI <input type="checkbox"/> On behalf of Minor <input type="checkbox"/> Others		
* Are you Politically Exposed Person?	* List of documents submitted (in case of company)	* Occupation (Please ✓) <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector/Government Service <input type="checkbox"/> Retired	
First Holder Second Holder Third Holder	<input type="checkbox"/> Memorandum of Association / Article of Association <input type="checkbox"/> Board Resolution	<input type="checkbox"/> Business <input type="checkbox"/> Professional <input type="checkbox"/> Housewife <input type="checkbox"/> Student <input type="checkbox"/> Agriculturist	
Y/N Y/N Y/N	<input type="checkbox"/> List of Authorised Signatory	<input type="checkbox"/> Current/Former Head of State <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Other	
* If occupation is business/profession, please mention precisely the nature of business/profession/industry			

### PoA HOLDER DETAILS (If the investment is being made by a Constituted Attorney please furnish Name and PAN of PoA holder)

Name	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Address	
<input type="text"/>	
City	Pin Code State
Office Tel.	Residence Tel.
Fax	Mobile
PAN <sup>s</sup>	Enclosed (Please ✓) <input type="checkbox"/> PAN Card copy <sup>ss</sup> <input type="checkbox"/> KYC Compliance proof

### BANK ACCOUNT DETAILS (Please note that as per SEBI Regulations it is mandatory for investors to provide their bank account details)

Account No.	Account Type <input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT <input type="checkbox"/> NRE <input type="checkbox"/> NRO
Bank Name	(Please ✓) <input type="checkbox"/> FCNR <input type="checkbox"/> Others
Bank City	Pin Code
Branch Address	
MICR Code	This is a 9 digit number next to your Cheque No. IFSC Code

<sup>s</sup> w.e.f 3 March, 2008, if the investment is Rs. 50,000 and above, all the applicants need to be KYC Compliant.

\* Mandatory fields

<sup>ss</sup> 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).

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### 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 - 400 001.	Application No.	ISC Stamp & Signature
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.		

**INVESTMENT & PAYMENT DETAILS**

Investment Amount (Rs.)  DD Charges if any (Rs.)  Net Amount (Rs.)

Mode of Payment  Cheque / Demand Draft / Fund Transfer Cheque / DD No.  Dated

*Strikeout whichever is not applicable.*

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.

Transfer In – Transfer Out (TITO)		Transfer Out – Transfer In (TOTI)	
Source Fund: DWS Ultra Short Term Fund, DWS Insta Cash Plus Fund and DWS Treasury Fund-Cash Plan Target Fund: DWS Investment Opportunity Fund and DWS Alpha Equity Fund		Source Fund: DWS Alpha Equity Fund and DWS Investment Opportunity Fund Target Fund: DWS Ultra Short Term Fund, DWS Insta Cash Plus Fund and DWS Treasury Fund-Cash Plan	
TITO Facility		TOTI Facility	
Source Fund: <input type="text"/>		Source Fund <input type="text"/>	
Plan <input type="text"/>		Plan <input type="text"/>	
Option (Please ✓): <input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Bonus		Option (Please ✓): <input type="checkbox"/> Growth <input type="checkbox"/> Dividend	
Dividend Mode (Please ✓): <input type="checkbox"/> Reinvestment <input type="checkbox"/> Payout		Dividend Mode (Please ✓): <input type="checkbox"/> Reinvestment <input type="checkbox"/> Payout	
Target Fund <input type="text"/>		Target Fund: <input type="text"/>	
Plan <input type="text"/>		Plan <input type="text"/>	
Option (Please ✓): <input type="checkbox"/> Growth <input type="checkbox"/> Dividend		Option (Please ✓): <input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Bonus	
Dividend Mode (Please ✓): <input type="checkbox"/> Reinvestment <input type="checkbox"/> Payout		Dividend Mode (Please ✓): <input type="checkbox"/> Reinvestment <input type="checkbox"/> Payout	
<input type="checkbox"/> 100% Shift	Transfer In - Entry into Target Fund Index Level <input type="text"/>	<input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25%	Transfer Out - NAV Profit Level <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% (for shift into Target Fund)
OR			
<input type="checkbox"/> 50% Shift	Index Level <input type="text"/>	<input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25%	Transfer In - NAV Stop Loss Level <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25% (for shift into Source Fund)
<input type="checkbox"/> Balance 50% Shift	Index Level <input type="text"/>	<input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> 25%	

**REDEMPTION / DIVIDEND PAYOUTS**

The below payout options are available to the investors for redemptions/dividends:- (if no Payout Option is selected then payout would be through default option)

Cheques/Demand drafts  Fund Transfer/Direct Credit  RTGS/NEFT

The Fund Transfer/Direct credit option is available only in cases wherein the investor has an account with either ICICI Bank Ltd./HDFC Bank Ltd./Axis Bank/Standard Chartered Bank/IDBI Bank/Deutsche Bank/ Citi Bank/HSBC Bank/IndusInd Bank/ABN AMRO Bank.

RTGS/NEFT will be extended from time to time subject to (i) availability of facility to bank/branch (ii) Participation of bank & branch in electronic transfer (iii) availability of complete details (NEFT/IFSC Code) in the investor application form. The minimum amount for payout through RTGS is Rs. 1,00,000/- (Rupees One Lac only). With regards to payout through NEFT no restriction of Amount is applicable.

I/We understand that the instruction to the bank for Direct Credit/RTGS/NEFT will be given by the Mutual Fund and such instruction will be adequate discharge of Mutual Fund towards redemption/dividend proceeds. In case of bank not crediting my/our bank account with/without assigning any reason thereof or if the transaction is delayed or not effected at all for reasons of incomplete or incorrect information. I/We would not hold Deutsche Mutual Fund responsible. I/We understand that in case account number furnished by me/us, if found incorrect, I/We would not hold Deutsche Mutual Fund responsible for the credit going to the wrong account. Further, the Mutual Fund reserves the right to issue a demand draft/payable at par to make good payment rejected through DC/RTGS/NEFT.

**NOMINATION – (Refer terms and conditions)**

I/We \_\_\_\_\_ and \_\_\_\_\_  
(Unitholder 1) (Unitholder 2)

\*do hereby nominate the person(s) more particularly described hereunder/and\* cancel the nomination made by me/us on the \_\_\_\_\_ day of \_\_\_\_\_ in respect of the Units under Folio No. \_\_\_\_\_  
(\*strikeout which is not applicable)

Name and Address of Nominee(s)	Date of Birth	Name and Address of Guardian (to be furnished in case the Nominee is a minor)	PAN No.	Proportion(%) by which the units will be shared by each Nominee (should aggregate to 100%)
Nominee 1				
Nominee 2				
Nominee 3				

**DECLARATIONS & SIGNATURE/S**

I/We have read and understood the contents of the Offer 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 from 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.

SIGNATURE/S

First/Sole Account Holder Second Account Holder Third Account Holder

Date

\*Applicable to NRI.

**LIST OF ATTACHMENTS (To be filled in by Applicant)**

Total number of attachments (Documents) alongwith the Application Form

**Deutsche Asset Management (India) Private Limited**

Ahmedabad: Tel: +91 (079) 65124445/26463005. Bangalore: Tel: +91 (080) 66935651/52/25590110. Chandigarh: Tel: +91 (0172) 4628570. Chennai: Tel: +91 (044) 66009516/9400. Cochin: Tel: +91 (0484) 2366686/698. Coimbatore: Tel: +91 (422) 4393270. Hyderabad: Tel: +91 (040) 64555700/27846970. Indore: Tel: +91 (0731) 6452033/34. Jaipur: Tel: +91 (141) 6505302/303. Kolkata: Tel: +91 (033) 65367818/ 65490465/464. Lucknow: Tel: +91 (522) 6569687/688. Mumbai: Tel: +91 (022) 66584350/4342/4305. New Delhi: Tel: +91 (011) 41522647/2646. Pune: Tel: +91 (020) 40068171. Vadodara: Tel: +91 (265) 3095446/6643918.