

# Principal Pnb Asset Management Company Pvt. Ltd.

Regd. Off.: Exchange Plaza, 'B' Wing, Ground Floor, NSE Building, Bandra Kurla Complex, Bandra (East), Mumbai - 400 051.  
TOLL FREE: 1800 425 5600. Fax: (022) 6772 0512. Website: [www.principalindia.com](http://www.principalindia.com) E-mail: [customer@principalindia.com](mailto:customer@principalindia.com)



## DISTRIBUTOR EMPANELMENT FORM

### 1 KEY CONTACT DETAILS (Please fill in Block Letters)\*

Name (Mr/Ms M/s) \_\_\_\_\_  
 \*Address For Communication: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Pin \_\_\_\_\_  
 Tel. No. 1 \_\_\_\_\_ Tel. No. 2 \_\_\_\_\_  
 Mobile No: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

Status :  Individual  Sole Proprietorship  Partnership Firm  Public Ltd. Co.  Bank  
 Pvt. Ltd. Co.  Society/Trust  Others \_\_\_\_\_ Please Specify \_\_\_\_\_

Recent passport size Photograph (only for individuals)

[Cross Signature across the photo]

### 2 AMFI/NISM CERTIFICATION DETAILS (Please attach a copy of the AMFI/NISM Certificate & ARN Card)\*

Regn.No. | ARN- \_\_\_\_\_ Passed on \_\_\_\_\_ Valid Upto \_\_\_\_\_

### 3 KYD DETAILS

Date of KYD Letter [ d | d | m | m | y | y | y | y ] (Please attached copy of KYD Letter)

### 4 BANK ACCOUNT DETAILS FOR BROKERAGE / OTHER PAYMENTS\*

Bank Name \_\_\_\_\_ Branch \_\_\_\_\_  
 City \_\_\_\_\_ MICR Code \_\_\_\_\_  
 A/c. No. \_\_\_\_\_ NEFT/IFSC Code \_\_\_\_\_  
 A/c. Type:  Savings  Current  Direct Credit (DC by default with banks - listed overleaf and/or for whom NEFT/IFSC Code is provided)  
 Others  For Direct Credit Mandatory enclose (please ✓)  Bank Cancelled Cheque  Copy of Cheque

### 5 ADDITIONAL INFORMATION

<p><b>Individual</b></p> <p>PAN* _____</p> <p>Date of Birth _____</p> <p>Educational Qualification _____</p>	<p><b>Corporate</b></p> <p>PAN* _____</p> <p>Date of Incorporation [ d   d   m   m   y   y   y   y ] _____</p> <p>Authorised Person _____</p> <p>Designation _____</p>
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### 6 BUSINESS DETAILS (Change in Authorised Person shall be communicated to Principal Mutual Fund)

<p>No. of Investors _____</p> <p>Experience in Selling : (Please <input checked="" type="checkbox"/>)</p> <p><input type="checkbox"/> Insurance: ₹ _____ <input type="checkbox"/> Fixed Deposits: ₹ _____</p> <p><input type="checkbox"/> Bonds: ₹ _____ <input type="checkbox"/> IPOs: ₹ _____</p> <p><input type="checkbox"/> Others: ₹ _____</p>	<p><b>Funds Mobilised In MF</b></p> <p>Cumulative to Date (₹) _____</p> <p>Last one year (₹) _____</p> <p>Breakup of amount procured: Equity(%) _____ Debt(%) _____</p> <p>Expected Business in Current FY for Principal MF (₹): _____</p>
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### 7 INFRASTRUCTURE DETAILS

Operating from Office:  Yes  No

Office Area (sq. ft.) \_\_\_\_\_ No. of Branches \_\_\_\_\_ No. of Employees \_\_\_\_\_ No. of Sub Brokers \_\_\_\_\_

Association as a Sub-Broker / Franchisee for Mutual Funds:  Yes  No If Yes, with \_\_\_\_\_

### 8 ANY AWARDS / ACHIEVEMENTS

\_\_\_\_\_  
 \_\_\_\_\_

### 9 INFORMATION UPDATES

NAV Updates:  SMS  Email Market Updates:  SMS Online Brokerage Update & Feeds:   
 Dividend Updates:  SMS  Email NFO Info:  SMS  Email

### 10 DECLARATION

I/We hereby declare that the information furnished herein is complete and correct in all respects. I/We undertake to abide by (a) such guidelines, code of conduct and other circulars etc. issued by SEBI and/or AMFI that may be applicable to me/us, and (b) the terms and conditions stated overleaf as amended from time to time. I/We further confirm that I/We (including our directors/employees/officers/partners) am/are not an employee of Principal Pnb Asset Management Company Pvt. Ltd. [AMC] nor a relative of any Director/Employee of the AMC/Sponsor or any of its associates [hereinafter referred as Related Person], apart from the ones mentioned below:

Name & Address of the Related Person _____	Nature of relationship with the Employee/Director _____
Date : [ d   d   m   m   y   y   y   y ] _____	Authorised Signatory _____
Place: _____	(Rubber Stamp in case of Non-individuals)

All fields marked with \* are mandatory

### FOR OFFICE USE ONLY

Recommended by Relationship Manager / Agent: \_\_\_\_\_ AMC Branch: \_\_\_\_\_

Classification (any one)  National  PSU Bank  Regional  Private Bank  IFA

Brokerage Category (any one for each Asset Classification)

Equity	_____
Debt	_____
Liquid	_____

Date : [ d | d | m | m | y | y | y | y ] \_\_\_\_\_

Approved by: \_\_\_\_\_ (Relationship Manager)

Approved by: \_\_\_\_\_ (Regional / Zonal Manager)

## 11 REFERRAL (Any distributor you would recommend)

ARN No.  Broker Name   
 ARN No.  Broker Name

## 12 NOMINATION DETAILS FOR BROKERAGE / COMMISSION (Inc 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 Name   
 Date of Birth  Relationship:   
 (If Minor):  
 Guardian's Name   
 (Inc case of Minor):  
 \*Address of  
 Nominee/Guardian   
 City  State  Pin   
 Specimen Signature of  
 Nominee/Guardian  Signature of the  
 Distributor

## TERMS AND CONDITIONS

- The statements made by the distributor in the Distributor Empanelment Form and the declaration made therein shall be the basis of the contract.
- The distributor shall carry out such directions and instructions as may from time to time, be issued by Principal Pnb Asset Management Company Private Limited (AMC) in this regard and the same shall form an integral part of the terms & conditions.
- The distributor and / or its employees who are involved in distribution of Mutual Fund products must have cleared the applicable AMFI / NISM Certification and a Copy of ARN (AMFI Registration Number) letter/card must be submitted by the distributor to AMC, for its records and verification.
- The Distributor undertakes to abide by the SEBI Circular No. CIR/IMD/DF/21/2012 dated September 13, 2012, AMFI best practice guidelines circular No. 31/2012-13, AMFI circular 35P/MEM-COR/14/12-13 dated October 30, 2012 and all other relevant circulars/amendments thereof w.r.t. Implementation of Employee Unique Identification Number (EUIN).
- The distributor is not authorised to issue any receipt for cheques and demand drafts received alongwith the application forms on behalf of the AMC. The distributor shall at no point of time receive cash on behalf of the AMC.
- The distributor is eligible for brokerage on the amounts mobilized by him at the rate(s) prescribed by AMC. The rate(s) are subject to revision, from time to time, at the discretion of the AMC and the distributor shall be bound by such changes. The brokerage payable, shall be net of statutory levies / taxes / duties / cesses, if any.
- The distributor declares and covenants with the AMC to defend, indemnify and hold the AMC and its affiliates, promoters, successors in interest and permitted assigns harmless from and against all claims, damages or assertions of liability of any kind or nature resulting from:
  - any breach or non-compliance, by the distributor of terms, covenants and conditions or other provisions hereof, and/or provisions contained in the Scheme Information Document (SID) & Statement of Additional Information (SAI) or any actions or omissions thereunder
  - any failure on the part of the distributor to comply with any applicable legislation, statutes, ordinances, regulations, administrative rulings or requirements of law;
  - the misfeasance, malfeasance or fraudulent acts of the representatives of the distributors; and
  - any and all actions, suits, proceedings, assessments, settlement, arbitration judgments, cost and expenses, including attorneys' fees, resulting from any of the matters set forth above.
- The Distributor shall do all such acts, deeds and things as may be necessary to conduct due diligence on the customer profile and report any suspicious profile to the AMC.
- The appointment of the distributor shall be liable to be terminated by the AMC forthwith:
  - If the Distributor is found to be a minor or adjudicated as an insolvent or found to be of unsound mind by a court of competent jurisdiction;
  - If in course of any judicial proceeding it is found that he/she has knowingly participated in or connived at any fraud, dishonesty or misrepresentation against the AMC or any Unit holder of Principal Mutual Fund (Mutual Fund)
  - If the AMC is satisfied that any statement made in the Distributor Registration Form was false or misleading or calculated to mislead;
  - If the Distributor acts in any other manner prejudicial to the interest of the AMC / Mutual Fund; and
  - If the Distributor does not comply with all applicable legislation, statutes, ordinances, regulations, administrative rulings or requirements of law.
- Either party shall have the right to terminate this arrangement by serving upon the other a 10 days prior written notice.
- The distributor shall not have any claim against the AMC/Mutual Fund for any loss incurred by the Distributor as not anticipated and arising out of any revision in the rate(s) of commission for business canvassed.
- The distributor must read and understand the SID & SAI of the respective scheme(s) carefully and explain the risks, investment objectives and the special features of the schemes to the investors. The distributor must not make any representation concerning Units or the Mutual Fund except those contained in the SID of the respective scheme(s), the Key Information Memorandum containing Application Forms and printed information issued by the AMC as information supplemental to such documents.
- Distributor shall not in any way indulge in any activity which tantamounts to rebating of commission to investors or induces them to invest in units of Principal Mutual Fund (Mutual Fund) by assuring rebating, gifts or pass back of commission.
- The distributor shall comply with the provisions of the Securities and Exchange Board of India (Mutual Funds) Regulations, 1996 and guidelines issued by SEBI/AMFI from time to time pertaining to mutual funds with specific focus on regulations/guidelines on advertisements / sales literature and code of conduct for distributors and shall adhere to it at all times.
- In case of application by non-individuals, a certified true copy of the relevant resolution or authority to make the application as the case may be, along with a certified true copy of the Memorandum and Articles of Association / Bye-laws / Partnership Deed, certified true copy of the latest Audited Annual Accounts and Certificate of Registration should be submitted.
- The distributor shall use only such SID, Key Information Memorandum containing Application Forms and advertising material provided by AMC and the distributor shall not design its own advertisement of the scheme(s) of Mutual Fund unless it has obtained prior approval in writing from the AMC. The Distributor shall neither use nor display the name, logo or mark of the AMC (or any logo or make similar thereto) in any manner whatsoever except as agreed by the AMC in writing
- The distributor arrangement shall stand automatically terminated without any notice from the AMC / Mutual Fund upon disqualification or withdrawal of Regulatory or Government Approval to act in the capacity contemplated herein. Upon any termination for any reason whatsoever, the distributor shall forthwith return all documents, papers and material, payment instructions, etc. pertaining to AMC / Mutual Fund and / or belonging to AMC / Mutual Fund to the AMC.
- Neither Party shall (except in exercise of or in the course of its duties hereunder or where required to comply with legal obligations or executive, judicial, quasi-judicial or regulatory or statutory requirements) disclose to any third party any information relating to the Business or to the affairs of any other Party unless authorised in writing by such other Party, as the case may be, and shall use all reasonable endeavours to prevent any such prohibited disclosures as aforesaid whether by any of its officers, employees or agents or by anyone else. However this shall not preclude either party from disclosure in accordance with law to any court, tribunal, government, statutory authorities or to Regulatory Authorities, provided that the Party disclosing the details shall first inform the other Party at the earliest opportunity of the intended disclosure unless so prohibited by law.
- Appointment as the distributor is subject to written confirmation by AMC.
- In respect of all disputes arising under this empanelment, the same is subject to arbitration at Mumbai and the courts in Mumbai alone shall have jurisdiction over such arbitration proceedings.

Direct Credit facility is available with the below given banks:

Sr. No.	Bank Name	Distributor Bank A/c. No. Req. Digits	Sr. No.	Bank Name	Distributor Bank A/c. No. Req. Digits
1	CITI BANK	10 Digits	8	INDUSIND BANK	13 Digits
2	ICICI BANK LTD	12 Digits	9	HSBC BANK	12 Digits
3	IDBI BANK LTD	13 or 14 or 15 or 16 Digits	10	KOTAK MAHINDRA BANK	14 Digits
4	STANDARD CHARTERED BANK	11 Digits	11	BNP PARIBAS	11 Digits
5	HDFC BANK LTD	14 Digits	12	DEUTSCHE BANK	10 Digits
6	PUNJAB NATIONAL BANK	16 Digits	13	DEVELOPMENT CREDIT BANK	14 Digits
7	AXIS BANK LTD	15 Digits			

## Checklist

For IFAs		For Corporates		For Partnership Firms	
<b>Please Check if the following documents are enclosed</b>					
<input type="checkbox"/>	Copy of the AMFI / NISM Certificate	<input type="checkbox"/>	Copy of the AMFI / NISM Certificate	<input type="checkbox"/>	Copy of the AMFI / NISM Certificate
<input type="checkbox"/>	Copy of the AMFI Letter & ARN Card	<input type="checkbox"/>	Copy of the AMFI Letter & ARN Card	<input type="checkbox"/>	Copy of the AMFI Letter & ARN Card
<input type="checkbox"/>	Copy of EUIN Card	<input type="checkbox"/>	Copy of EUIN Card	<input type="checkbox"/>	Copy of EUIN Card
		<input type="checkbox"/>	MOA	<input type="checkbox"/>	Partnership Deed & Resolution
		<input type="checkbox"/>	Authorised Signatory List	<input type="checkbox"/>	Authorised Signatory List
		<input type="checkbox"/>	Board Resolution		
<b>Please Check if the following mandatory details are filled</b>					
<input type="checkbox"/>	Complete Address	<input type="checkbox"/>	Complete Address	<input type="checkbox"/>	Complete Address
<input type="checkbox"/>	Contact Number	<input type="checkbox"/>	Contact Number	<input type="checkbox"/>	Contact Number
<input type="checkbox"/>	AMFI Registration Number (ARN)	<input type="checkbox"/>	AMFI Registration Number (ARN)	<input type="checkbox"/>	AMFI Registration Number (ARN)
<input type="checkbox"/>	Bank Account Details	<input type="checkbox"/>	Bank Account Details	<input type="checkbox"/>	Bank Account Details
<input type="checkbox"/>	EUIN Card	<input type="checkbox"/>	EUIN Card	<input type="checkbox"/>	EUIN Card

Note: Please contact your nearest AMC Office for empanelment documentation checklist for entities other than referred above.