

ZERO BALANCE FORM
(Please read instructions carefully before filling up the form)

ARN - 30156

Sub-Broker's Name & ARN No. / DIRECT

Collection Centre (for office use only)

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.
For Direct Application please write the word "DIRECT" in Distributor & Sub-Broker Box.

TRANSACTION CHARGES (Please tick any one of the below. Refer Instruction no.7)

I am a first time investor in Mutual Funds or I am an existing Investor in Mutual Funds

1. APPLICANT INFORMATION (Refer Instruction 1)

NAME OF FIRST / SOLE APPLICANT

Mr. Ms. M/s. [Grid for Name]

DATE OF BIRTH (DOB) [D][D][M][M][Y][Y][Y][Y] (Mandatory in case of minor)

NAME OF THE GUARDIAN (For minor applicant) / Name of the POA Holder / Name of the Contact Person (For Non Individual Applicant)

Mr. Ms. M/s. [Grid for Name]

Guardian named above is: Father Mother Court Appointed* [Designation of Contact Person]

For Investments "On behalf of Minor": (*Refer Instruction 1 for mandatory documents to be attached)

Proof of DOB & Relationship attached Birth Certificate School Certificate / Marksheet Passport Any other.....

NAME OF SECOND APPLICANT

Mr. Ms. [Grid for Name]

NAME OF THIRD APPLICANT

Mr. Ms. [Grid for Name]

2. FIRST/SOLE APPLICANT - MAILING ADDRESS & CONTACT DETAILS (Refer Instruction 2 & 8)

[Grid for Address]

City State Pin Code

STD Code Telephone Off. Resi. Mob.

E-Mail**

OVERSEAS ADDRESS (Mandatory for NRI / FII application)

[Grid for Address]

State Pin Code Country

3. PAN AND KYC COMPLIANCE STATUS DETAILS (MANDATORY) (Refer Instruction 3)

	PAN No.	KYC Compliance Status (Mandatory)
First / Sole Applicant	[Grid]	<input type="checkbox"/> KYC Acknowledgement Attached
Second Applicant	[Grid]	<input type="checkbox"/> KYC Acknowledgement Attached
Third Applicant	[Grid]	<input type="checkbox"/> KYC Acknowledgement Attached
Guardian / POA Holder	[Grid]	<input type="checkbox"/> KYC Acknowledgement Attached

4. STATUS (OF FIRST/SOLE APPLICANT) [PLEASE TICK (3)]

<input type="checkbox"/> Resident Individual	<input type="checkbox"/> NRI	<input type="checkbox"/> PIO	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust
<input type="checkbox"/> HUF	<input type="checkbox"/> AOP		<input type="checkbox"/> Company	<input type="checkbox"/> FIs
<input type="checkbox"/> On behalf of Minor	<input type="checkbox"/> BOI		<input type="checkbox"/> Body Corporate	
<input type="checkbox"/> Society / Club	<input type="checkbox"/> Others _____		(please specify)	

MODE OF HOLDING [PLEASE TICK (3)]

<input type="checkbox"/> Single
<input type="checkbox"/> Joint (Default)
<input type="checkbox"/> Anyone or Survivor

OCCUPATION (OF FIRST/SOLE APPLICANT) [PLEASE TICK (3)]

<input type="checkbox"/> Service	<input type="checkbox"/> Student	<input type="checkbox"/> Professional
<input type="checkbox"/> Housewife	<input type="checkbox"/> Business	<input type="checkbox"/> Retired
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Proprietorship	
<input type="checkbox"/> Others _____		(please specify)

5. GROSS ANNUAL INCOME (IN ₹) [PLEASE (3)]

First Applicant	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore (or)	<input type="checkbox"/> Net-worth (Mandatory for non-individuals) ₹ _____ as on [D][D][M][M][Y][Y][Y][Y] (Not older than one year)
Second Applicant	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore (or) Net-worth _____	
Third Applicant	<input type="checkbox"/> Below 1 Lac	<input type="checkbox"/> 1-5 Lacs	<input type="checkbox"/> 5-10 Lacs	<input type="checkbox"/> 10-25 Lacs	<input type="checkbox"/> > 25 Lacs - 1 Crore	<input type="checkbox"/> > 1 Crore (or) Net-worth _____	

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ACKNOWLEDGEMENT SLIP - Zero Balance Form

TAURUS ASSET MANAGEMENT COMPANY LIMITED
 Regd. Office: 305, Regent Chambers, 208, Jambhaji Bajaj Marg, Nariman Point, Mumbai - 400021
 Head Office: Ground Floor, AML Centre-1, 8 Mahal Industrial Estate, Mahakali Caves Road, Andheri(E), Mumbai-400 093
 Tollfree No. 1800 108 1111
 Email: customercare@taurusmutualfund.com • Website: www.taurusmutualfund.com

Received from Mr. / Ms. / M/s. [Signature Line]
 Date : [Date Line]

Collection Centre / AMC Stamp / Signature

6. DEMAT ACCOUNT DETAILS (Refer Instruction 4)

I would like units to be allotted in DEMAT mode as per the details below:

Beneficiary Owner Identification Number (BO ID)										Depository Participant (DP) Name									
DP ID No.					Client ID No.														

Enclosures: Any one of the following Client Master List (CML) Transaction cum Holding Statement Delivery Instruction Slip (DIS)

7. BANK ACCOUNT DETAILS (Please note that as per SEBI regulations, it is mandatory for investors to provide their bank account details) (Refer Instruction 5)

Name of the Bank

Branch Address

City Pin Code

Account No. Account Type Please tick (✓) Savings Current NRE NRO FCNR Others (please specify)

MICR Code This is a 9 digit number next to your cheque number. Please attach a blank extra cheque cancelled or a clear photocopy of a cheque

IFSC Code It is the responsibility of the investor to ensure the correctness of the IFSC code of the recipient /destination branch corresponding to the bank details mentioned in Section 9.

8. NOMINATION DETAILS (Refer Instruction 6)

I/We wish to nominate I/We DO NOT wish to nominate

	Nominee Name & Address	Guardian Name & Address (In case Nominee is Minor)	Nominee Relationship with 1st Holder	Allocation (Total = 100%)	Nominee / Guardian Signature
Nominee 1					
Nominee 2					
Nominee 3					

9. DOCUMENTS ENCLOSED (PLEASE 3)

- Memorandum & Articles of Association
- Resolution / Authorisation to invest
- Power of Attorney
- List of Authorised Signatories with Specimen Signature(s)
- Trust Deed
- PAN Copy
- Certificate of Incorporation
- Bye-Laws
- KYC acknowledgement
- LLP Agreement
- Partnership Deed
- SIP Enrolment Form (For Investment through PDC)
- SIP Enrolment Form (For Investment through ECS / Auto Debit)
- SWP/SIP/DSO Enrolment Form
- Third Party Payment Declaration Form
- Multiple Bank Account Registration Form

10. DECLARATION(S) & SIGNATURE(S) (Refer Instruction 9)

To,
The Trustee,
Taurus Mutual Fund

Having read and understood the contents of the Scheme Information Document (SID), Statement of Additional Information (SAI) & Key Information Memorandum (KIM) I/We hereby apply Zero Balance and agree to abide by the terms, conditions, rules and regulations governing the scheme. I/We hereby declare that the amount prepare to be invested in the scheme is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Prevention of Money Laundering Act, Prevention of Corruption Act and / or any other applicable laws enacted by the government of India from time to time. I/We have understood the details of the scheme & I/we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment.

Applicable for NRI's only - I/We confirm that I am/we are Non Residents of Indian Nationality/Origin and that I/we shall funds from abroad through approved banking channels or from funds in my/our Non-Resident External /Non-Resident Ordinary /FCNR account.

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.

I/We confirm that details provided by me/us are true and correct.

**I may voluntarily subscribe to the on-line access for transacting through the internet facility provided by Taurus Mutual Fund and confirm of having read, understood and agree to abide by the terms and conditions for availing of the internet facility more particularly mentioned on the website www.taurusmutualfund.com and hereby undertake to be bound by the same. I further undertake to discharge the obligations cast on me and shall not at any time deny or repudiate the on-line transactions effected by me and I shall be solely liable for all the costs and consequences thereof.

Please Sign here

First / Sole Applicant/ Guardian / POA Holder / Auth. Sign

Please Sign here

Second Applicant / Auth. Sign

Please Sign here

Third Applicant Sign

To contact us Dial - **1800 108 1111** (Toll Free) or
040 - 6722 5100 (Charges, as applicable)

To invest SMS **TRS** to **72000 22222**
To Start SIP SMS **TSIP** to **72000 22222**
To Transact Online SMS **Online** to **72000 22222**

