

COMMON APPLICATION FORM

(To be Used / Distributed along with Scheme Information Document)

Investors must read the Key Information Memorandum, Instructions and Product Labeling before completing this Form.

Please read the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required.



PGIM
India Mutual Fund

Application No. _____

Pursuant to SEBI Circular No. SEBI/HO/IMD/IMD-II DOF3/P/CIR/2021/573 dated June 07, 2021 on Potential Risk Class (PRC) Matrix for debt schemes based on Interest Rate Risk and Credit Risk, PGIM India Asset Management Private Limited has positioned its debt schemes in terms of PRC matrix consisting of parameters based on maximum interest rate risk (measured by Macaulay Duration of the scheme) and maximum credit risk (measured by Credit Risk Value of the scheme). Accordingly, the debt schemes of PGIM India Mutual Fund are positioned in PRC matrix as follows:

Potential Risk Class			
Credit Risk →	Relatively Low (Class A)	Moderate (Class B)	Relatively High (Class C)
Interest Rate Risk ↓			
Relatively Low (Class I)	A-I • PGIM India Overnight Fund	B-I • PGIM India Liquid Fund • PGIM India Ultra Short Duration Fund • PGIM India Money Market Fund (No. of Segregated Portfolio)*	C-I NIL
Moderate (Class II)	A-II NIL	B-II NIL	C-II NIL
Relatively High (Class III)	A-III • PGIM India Gilt Fund • PGIM India Dynamic Bond Fund • PGIM India CRISIL IBX Gilt Index - Apr 2028 Fund	B-III • PGIM India Corporate Bond Fund	C-III NIL

Sr. No.	Name of the Scheme	Type of the Scheme
1	PGIM India Overnight Fund	An open ended debt scheme investing in overnight securities. A relatively low interest rate risk and relatively low credit risk scheme.
2	PGIM India Liquid Fund	An open ended liquid scheme. A relatively low interest rate risk and moderate credit risk scheme.
3	PGIM India Ultra Short Duration Fund	An open ended ultra-short term debt scheme investing in instruments such that the Macaulay duration of the portfolio is between 3 months to 6 months. A relatively low interest rate risk and moderate credit risk scheme.
4	PGIM India Money Market Fund (No. of Segregated Portfolio 1)*	An open ended debt scheme investing in money market instruments. A relatively low interest rate risk and moderate credit risk scheme.
5	PGIM India Dynamic Bond Fund	An open ended dynamic debt scheme investing across duration. A relatively high interest rate risk and relatively low credit risk scheme.
6	PGIM India Corporate Bond Fund	An open ended debt scheme predominantly investing in AA+ and above rated corporate bonds. A relatively high interest rate risk and moderate credit risk scheme.
7	PGIM India Gilt Fund	An open ended debt scheme investing in government securities across maturities. A relatively high interest rate risk and relatively low credit risk scheme.
8	PGIM India CRISIL IBX Gilt Index - Apr 2028 Fund	An open-ended Target Maturity Index Fund investing in constituents of the CRISIL-IBX Gilt Index - April 2028. A relatively high interest rate risk and relatively low credit risk

* The scheme has 1 segregated portfolio which was created under PGIM India Credit Risk Fund. Main portfolio of PGIM India Credit Risk Fund was merged with PGIM India Low Duration Fund w.e.f. January 22, 2022 which was further merged with PGIM India Money Market Fund w.e.f. September 30, 2023.)

CAF_V1.5 September 2026



ACKNOWLEDGMENT SLIP (To be filled in by the investor)

Application No. _____

Name _____ PAN _____

An Application for scheme **PGIM INDIA**

Along with Cheque / DD No. / UTR No. _____ Dated _____

Drawn on (Bank) _____ Amount ₹ _____

Signature, Stamp & Date

COMMON APPLICATION FORM

(To be Used / Distributed along with Scheme Information Document)

Investors must read the Key Information Memorandum, Instructions and Product Labeling before completing this Form.

Please read the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required.



PGIM
India Mutual Fund

1. DISTRIBUTOR INFORMATION					
ARN code	RIA code	ARN / RIA Name	Sub broker ARN code	Sub broker code **	EUIN*
ARN - 361161	RIA -		ARN -		E689889
*Employee Unique Identification Number **As allotted by ARN holder. 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. Declaration for "execution-only" transaction (only where EUIN box is left blank). I/We hereby confirm that the EUIN 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. By mentioning RIA code, I/We authorize you to share my/our transactions data feed/portfolio holdings/ NAV details under Direct Plan of scheme(s) managed by you with the Investment Adviser.					
Signature of 1st Applicant / Guardian		Signature of 2nd Applicant		Signature of 3rd Applicant	

2. EXISTING FOLIO NUMBER		GO GREEN INITIATIVE
Folio No.	The details in our records under the folio number mentioned alongside will apply for this application.	

3. MODE OF HOLDING (Please ✓)
☐ Single OR ☐ Anyone or Survivor OR ☐ Joint (Default option)

4. DEMAT ACCOUNT DETAILS		Kindly fill the below details for allotment of units in demat mode
National Securities Depository Limited		Central Depository Services (India) Limited
Depository Participant Name		Depository Participant Name
DP ID	IN	Beneficiary A/c No.
	Beneficiary A/c No.	

5. SOLE / FIRST APPLICANT'S DETAILS		# Mandatory
☐ Mr ☐ Ms ☐ Mrs ☐ M/S (Please ✓)		
Name #	Gender (Please ✓) ☐ Male ☐ Female	
(Name as per PAN / ITD Records)		
Date of Birth/Incorporation #	Proof of DOB of Minor enclosed (Please ✓) ☐ Passport ☐ Birth Certificate ☐ Other please specify	
Father's name		
Mother's name		
PAN #	NOTE- PAN copy mandatory CKYC / KIN	
Legal Entity Identification	*Applicable for Non-Individuals only	
Guardian Name (in case of Minor) / POA (Contact Person For Non Individuals / POA Holder Name) (Name as per PAN)		Refer instruction no. 5
Father's name		
Mother's name		
PAN #	NOTE- PAN copy mandatory DOB #	CKYC / KIN
☐ Natural Guardian ☐ Legal Guardian\$		\$ Enclose supporting documents
Mailing Address (as per KYC records)		
	City	
Pincode	State	Country
I/ We confirm, below contact details are of - (Please select (✓) any)		
Mobile	Email	
Mobile No. provided pertains to: (Please ✓)	Email ID provided pertains to: (Please ✓)	
☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings	☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings	
☐ Dependent Parents ☐ Guardian ☐ PMS ☐ Custodian ☐ POA	☐ Dependent Parents ☐ Guardian ☐ PMS ☐ Custodian ☐ POA	
Overseas Address (Mandatory in case of NRI/ FII applicant, in addition to mailing address)		
	City	
Pincode	State	Country

ADDITIONAL KYC DETAILS	
Tax Status: (Please ✓)	
☐ Resident Individual ☐ NRI-Repatriation ☐ NRI-Non Repatriation ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ Minor through guardian ☐ Company	
☐ Fils ☐ PIO ☐ Body Corporate ☐ Society/Club ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Financial Institution ☐ NBFC ☐ Others please specify	



www.pgimindia.com/mutual-funds



care@pgimindia.co.in



Investor Helpline: 1800 209 7446

(Mon - Fri) from 9.30 AM to 6.30 PM.

Non-Profit Organization (NPO):

We are falling under "Non-Profit Organization" [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013) ☐ Yes ☐ No

If yes, please quote Registration No. of Darpan portal of Niti Aayog ☐ Enclosed relevant documentary proof evidencing the above definition.

If not, please register immediately and confirm with the above information. Failure to get above confirmation or registration with the portal as mandated, wherever applicable will force MF / AMC to register your entity name in the above portal and may report to the relevant authorities as applicable. We am/are aware that we may be liable for it for any fines or consequences as required under the respective statutory requirements and authorize you to deduct such fines/charges under intimation to me/us or collect such fines/charges in any other manner as might be applicable.

Occupation:

☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired
☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others please specify

Gross Annual Income:

☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore

OR Net worth (Mandatory for Non-Individuals) ₹ as on (Not older than 1 year)

For Individuals [Please ✓]: ☐ I am Politically Exposed Person (PEP)^ ☐ I am Related to Politically Exposed Person (RPEP) ☐ Not applicable

For Non-Individuals [Please ✓] (Please attach mandatory Ultimate Beneficial Ownership (UBO) declaration form

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

^ PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

FATCA DETAILS

FATCA Declaration No. Are you a Tax Resident of any Country other than India? ☐ Yes ☐ No

FATCA & CRS Details: For Individuals (Mandatory). Non Individual - investors should mandatory fill separate FATCA/CRS Detail Form

The below information is required for all applicant(s)/ guardian. Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? ☐ Yes ☐ No

If Yes, please provide the following information [mandatory].

* Please indicate all countries in which you are a resident for tax purpose, associated Taxpayer Identification Number and Identification type. TIN or If TIN is not applicable, provide a copy of the country's equivalent ID or number

Country of tax resident	1.	2.	3.
Tax Payer Ref ID No.	1.	2.	3.
Identification Type	1.	2.	3.

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. In case Tax Identification Number is not available, kindly provide its functional equivalent.

Country of Birth: City of Birth: Country of Nationality:

If TIN is not available, Please ✓ the reason A, B or C : Reason ☐ A ☐ B ☐ C ^ Refer Instructions page no. 8 (FATCA & CRS Instructions)

SECOND APPLICANT'S DETAILS

☐ Mr ☐ Ms ☐ Mrs (Please ✓)

Name # Gender (Please ✓) ☐ Male ☐ Female

(Name as per PAN / ITD Records)

Father's name

Mother's name

PAN # NOTE- PAN copy mandatory DOB # CKYC / KIN

I/ We confirm, below contact details are of - (Please select (✓) any)

Mobile

Mobile No. provided pertains to: (Please ✓)

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings
☐ Dependent Parents ☐ Guardian ☐ PMS ☐ Custodian ☐ POA

Email

Email ID provided pertains to: (Please ✓)

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings
☐ Dependent Parents ☐ Guardian ☐ PMS ☐ Custodian ☐ POA

ADDITIONAL KYC DETAILS

Tax Status: (Please ✓)

☐ Resident Individual ☐ NRI-Repatriation ☐ NRI-Non Repatriation ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ Minor through guardian ☐ Company
☐ Fils ☐ PIO ☐ Body Corporate ☐ Society/Club ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Financial Institution ☐ NBFC ☐ Others please specify

Occupation:

☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired
☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others please specify

Gross Annual Income:

☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore

OR Net worth (Mandatory for Non-Individuals) ₹ as on (Not older than 1 year)

For Individuals [Please ✓]: ☐ I am Politically Exposed Person (PEP)^ ☐ I am Related to Politically Exposed Person (RPEP) ☐ Not applicable

^ PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

FATCA DETAILS

FATCA Declaration No. Are you a Tax Resident of any Country other than India? ☐ Yes ☐ No

FATCA & CRS Details: For Individuals (Mandatory). Non Individual - investors should mandatory fill separate FATCA/CRS Detail Form

The below information is required for all applicant(s)/ guardian. Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? ☐ Yes ☐ No

If Yes, please provide the following information [mandatory].

* Please indicate all countries in which you are a resident for tax purpose, associated Taxpayer Identification Number and Identification type. TIN or If TIN is not applicable, provide a copy of the country's equivalent ID or number

Country of tax resident	1.	2.	3.
Tax Payer Ref ID No.	1.	2.	3.
Identification Type	1.	2.	3.

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. In case Tax Identification Number is not available, kindly provide its functional equivalent.

Country of Birth: City of Birth: Country of Nationality:

If TIN is not available, Please ✓ the reason A, B or C : Reason ☐ A ☐ B ☐ C ^ Refer Instructions page no. 8 (FATCA & CRS Instructions)

THIRD APPLICANT'S DETAILS

☐ Mr ☐ Ms ☐ Mrs **Name #** _____
(Please ✓) (Name as per PAN/ITD Records)

Father's name _____

Mother's name _____

PAN # _____ DOB # _____ CKYC / KIN _____ Gender (Please ✓) ☐ Male ☐ Female

NOTE- PAN copy mandatory

I/ We confirm, below contact details are of - (Please select (✓) any)

Mobile _____ **Email** _____

Mobile No. provided pertains to: (Please ✓)

☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings

☐ Dependent Parents ☐ Guardian ☐ PMS ☐ Custodian ☐ POA ☐ Dependent Parents ☐ Guardian ☐ PMS ☐ Custodian ☐ POA

ADDITIONAL KYC DETAILS

Tax Status: (Please ✓)

☐ Resident Individual ☐ NRI-Repatriation ☐ NRI-Non Repatriation ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ Minor through guardian ☐ Company

☐ Fils ☐ PIO ☐ Body Corporate ☐ Society/Club ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Financial Institution ☐ NBFC ☐ Others _____ please specify

Occupation:

☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired

☐ Housewife ☐ Student ☐ Forex Dealer ☐ Others _____ please specify

Gross Annual Income:

☐ Below 1 Lac ☐ 1-5 Lacs ☐ 5-10 Lacs ☐ 10-25 Lacs ☐ >25 Lacs-1 crore ☐ >1 crore

OR Net worth (Mandatory for Non-Individuals) ₹ _____ as on DD/MM/YYYY (Not older than 1 year)

For Individuals [Please ✓]: ☐ I am Politically Exposed Person (PEP)^ ☐ I am Related to Politically Exposed Person (RPEP) ☐ Not applicable

^ PEP are defined as individuals who are or have been entrusted with prominent public functions in a foreign country, e.g., Heads of States or of Governments, senior politicians, senior Government/judicial/ military officers, senior executives of state owned corporations, important political party officials, etc.

FATCA DETAILS

FATCA Declaration No. _____ Are you a Tax Resident of any Country other than India? ☐ Yes ☐ No

FATCA & CRS Details: For Individuals (Mandatory). Non Individual - investors should mandatory fill separate FATCA/CRS Detail Form

The below information is required for all applicant(s)/ guardian. Is the applicant(s)/ guardian's Country of Birth / Citizenship / Nationality / Tax Residency other than India? ☐ Yes ☐ No

If Yes, please provide the following information [mandatory].

* Please indicate all countries in which you are a resident for tax purpose, associated Taxpayer Identification Number and Identification type. TIN or If TIN is not applicable, provide a copy of the country's equivalent ID or number

Country of tax resident	1.	2.	3.
Tax Payer Ref ID No.	1.	2.	3.
Identification Type	1.	2.	3.

In case Country of Tax Residence is only India then details of Country of Birth & Nationality need not be provided. In case Tax Identification Number is not available, kindly provide its functional equivalent.

Country of Birth: _____ City of Birth: _____ Country of Nationality: _____

If TIN is not available, Please ✓ the reason A, B or C: Reason ☐ A ☐ B ☐ C ^ Refer Instructions page no. 8 (FATCA & CRS Instructions)

6. BANK ACCOUNT DETAILS FOR PAYOUT (Mandatory to attach proof, incase the payout Bank account is different from the source Bank account.)

Bank Name _____ Branch _____

Bank A/c No. _____ Account Type (Please ✓) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ Others _____ (please specify)

Bank Address _____ City _____

Pincode _____ State _____ Country _____

IFSC (11 digits)* _____ MICR (9 digits) _____ * This is an 11 Digit Number, kindly obtain it from your cheque copy or Bank Branch.

7. INVESTMENT DETAILS (Allow maximum 3 schemes in one application)

Mode of Investment ☐ Lumpsum ☐ Lumpsum with SIP ☐ Standalone SIP ☐ SIP (First installment through cheque) ☐ Micro Investment

In case of single scheme the cheque should be drawn in favor of scheme name and for multiple schemes, cheque should be drawn in favor of "PGIM India Mutual Fund - Common Collection A/c"

Scheme / Plan	Growth	IDCW^	Payout	IDCW Reinvestment	Amount
PGIM INDIA ☐ Regular ☐ Direct	☐	☐	☐	☐	₹ _____
PGIM INDIA ☐ Regular ☐ Direct	☐	☐	☐	☐	₹ _____
PGIM INDIA ☐ Regular ☐ Direct	☐	☐	☐	☐	₹ _____
IDCW** Frequency\$ _____					TOTAL+ ₹ _____

(For Plans & Sub-options please see key scheme features). Note: * If Multiple option is opted then the investment amount should match with the total amount. ^IDCW option is not available for FOF Schemes.

\$Please refer to SID / addendum thereof for schemes available for IDCW Frequency

8. SIP INVESTMENT DETAILS

Refer Instruction no. 7

I/We Would like to invest to meet My/Our financial goals - ☐ Child's Education ☐ Child's Marriage ☐ Wealth Creation ☐ Retirement Planning ☐ Dream Home ☐ Dream Vacation

Scheme / Plan	Growth	IDCW^	Payout	IDCW Reinvestment	Amount
PGIM INDIA ☐ Regular ☐ Direct	☐	☐	☐	☐	₹ _____
PGIM INDIA ☐ Regular ☐ Direct	☐	☐	☐	☐	₹ _____
PGIM INDIA ☐ Regular ☐ Direct	☐	☐	☐	☐	₹ _____
					TOTAL SIP AMOUNT+ ₹ _____

Note: * If Multiple option is opted then the investment amount should match with the total amount.

SIP Frequency (Please ✓ any one) ☐ Monthly ☐ Quarterly SIP Date: DD/MM/YYYY (Any date of the month & quarter) No. of Instalment _____

Start Date: MM/YYYY End Date: MM/YYYY Maximum duration of 40 years. Note: *Existing Mandate should be valid for the enrolled period.

☐ OTM Debit Mandate is already registered in the folio. Please fill, Unique Mandate (UMRN)* _____

☐ SIP THROUGH AUTO DEBIT (OTM) (Please also fill and attach the SIP OTM Form available on page no. 5)

☐ SIP THROUGH POST-DATED CHEQUE Second & subsequent Instalment cheque Details Cheque Nos. _____ From To _____

If Start Date is not mentioned, next applicable SIP cycle date would be applied for processing. Cheque Dates: DD/MM/YYYY From To: DD/MM/YYYY

☐ Auto Renewal for SIP Registration (accessible only with new SIP) Start Date: DD/MM/YYYY End Date: DD/MM/YYYY

9. PAYMENT DETAILS

Payment Type (Please ☒ Third Party Payment (Please attach 'Third Party Payment Declaration Form') (Please refer instruction 7)

Investment Amount A DD Charges (if applicable) B Total Amount A+B

Mode of Payment ☐ Cheque ☐ Demand Draft ☐ Electronic Fund Transfer ☐ Existing OTM

Cheque/DD Number Date DD MM YY YY YY YY Drawn on Bank / Branch

UMRN No. (If existing OTM) UTR dated DD MM YY YY YY YY

10. SIP TOP-UP

☐ SIP Top Up (Optional) - Available only for investments effected through OTM.

Top Up Amount ₹ Top Up Frequency ☒ ☐ Half Yearly * ☐ Yearly

☐ Top Up to continue till # DD/MM/YYYY maximum duration of 40 years (Please ☒ any 1) OR ☐ Top Up to continue till SIP amount reaches ₹

^ SIP Top Up will cease once the mentioned amount is reached. # It is the date from which SIP Top Up amount will cease * Default option if not selected.

11. NOMINATION DETAILS * Mandatory (If you wish to appoint multiple nominees, please use the multiple nomination form available or visit our website to update nomination.)

Nominee Name*

Address

Date of Birth* (mandatory in case the nominee is a minor) DD MM YY YY YY YY Relationship with applicant* Nominee (%)

Name of Guardian (in case the nominee is a minor)

Mobile Number Email ID

Identification number ☐ PAN ☐ Aadhar (last 4 digits) ☐ Driving License ☐ Passport (must be provided for NRIs) ID Number

I / We want the details of my / our nominee to be printed in the statement of holding, provided to me/ us by the AMC as follows:

☐ Name of nominee(s) ☐ Nomination: Yes / No (If no option is selected, the account statement will by default display the Nomination status as 'Nomination: Yes / No' without revealing Nominee name(s))

☐ I hereby confirm that I do not wish to appoint any nominee(s) to my demat account/mutual fund folio at this point of time.

I understand that – (i) the nomination helps to quickly identify the person for transfer of securities and helps in faster and smoother transmission of my securities to my legal heir(s) after my demise.

(ii) in the absence of a nomination, my legal heir(s) may require the submission of certain additional legal or court-issued documents which may delay the process of transmission of securities to my legal heir(s).

(iii) if no claim is made on the account / folio for a prolonged period after my demise, the holdings may be treated as unclaimed assets and they may be transferred to Investor Education and protection Fund Authority (IEPF) in accordance with the applicable regulatory framework.

☐ I confirm that I have understood the above implications and that my decision to opt out of nomination is voluntary.

12. DECLARATION AND SIGNATURES

I/We hereby confirm and declare as under:- I/We have read and understood the contents of the Statement of Additional Information of PGIM India Mutual Fund and the Scheme Information Document(s)/Key Information memorandum of the respective Scheme(s) and Addenda thereto, issued from time to time and the Instructions. I/We, hereby apply to the Trustee of PGIM India Mutual Fund for allotment of units of the respective Scheme(s) of PGIM India Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I/We declare that I am/We are authorised to make this investment and the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. 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(s) is/are being recommended to me/us. I/We declare that the information given in this application form is correct, complete and truly stated. In the event of my/our not fulfilling the KYC process to the satisfaction of the AMC/PGIM India Mutual Fund, I/We hereby authorise the AMC/PGIM India Mutual Fund to redeem the units against the funds invested by me/us at the applicable NAV as on the date of such redemption. I/We agree that PGIM India Mutual Fund can debit from my Folio Transaction Charges as applicable. I/We agree to notify PGIM India Asset Management Private Limited immediately in the event the information in the self-certification changes. **For investors investing in Direct Plan:** I/We hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product/scheme/plan. **Applicable to Micro Investors:** I/We hereby declare that I/We do not have any existing Micro investments which together with the current application will result in aggregate investments exceeding Rs. 50,000 in a year. **Applicable to NRIs:** I/We confirm that I am/We are Non-Resident(s) of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account(s). **FATCA and CRS Declaration:** I/We hereby acknowledge and confirm that the information provided in this form is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We shall be liable for it. I/We also undertake to keep you informed in writing about any changes/modification to the above information in future and also undertake to provide any other additional information as may be required at your end. I/We hereby authorise you to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to such information as and when provided by me/us to Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees ('the Authorised Parties') or any Indian or foreign governmental or statutory or judicial authorities/agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax /revenue authorities and other investigation agencies without any obligation of advising me/us of the same.

SIGNATURE(S)

1 st Applicant / Guardian / POA Signature	2 nd Applicant / POA Signature	3 rd Applicant / POA Signature	Date DD MM YY YY YY YY Place
--	---	---	---



PGIM
India Mutual Fund

ONE TIME MANDATE FORM FOR NACH / ECS / AUTO DEBIT / LUMP SUM / SIP

(*Mandatory field)

UMRN OFFICE USE ONLY Date* DD MM YY YY YY YY

Utility Code CITI00002000000037 ☒ Create ☐ Modify ☐ Cancel

Sponsor Bank Code CITI000PIGW I/We hereby authorize **PGIM India Mutual Fund**

To debit (tick ☒) SB / CA / CC / SB-NRE / SB-NRO / Other Bank a/c number*

With Bank IFSC / MICR*

an amount of Rupees* ₹

Debit Type* ☒ Fixed Amount ☒ Maximum Amount

Frequency* ☒ Daily ☒ Weekly ☒ Bi-Monthly ☒ Monthly
☒ Quarterly ☒ Half-Yearly ☒ Annually ☒ As and when presented

Reference - 1 Reference - 2

1. 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 bank. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity / Corporate to debit my account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the user entity / corporate or the bank where I have authorized the debit. 4. I/we understand and accept in case transaction initiated against this mandate (within period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law action may be taken against me/us under applicable law (including Negotiable Instruments Act).

Maximum period of validity of this mandate is 40 years only.

PERIOD*
From DD MM YY YY YY YY To DD MM YY YY YY YY
1. Signature of Primary Bank Account Holder 2. Signature of Account Holder 3. Signature of Account Holder
1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

SIP TRANSACTION FORM (SINGLE / MULTIPLE SIP OPTION)

Please read the instructions before filling up the Application Form. Tick (✓) whichever is applicable, strike out whichever is not required.



PGIM
India Mutual Fund

1. DISTRIBUTOR INFORMATION					
ARN code	RIA code	ARN / RIA Name	Sub broker ARN code	Sub broker code	EUIN*
ARN - 361161	RIA -		ARN -		E689889
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. Declaration for "execution-only" transaction (only where EUIN box is left blank). I/We hereby confirm that the EUIN 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. By mentioning RIA code, I/We authorize you to share my/our transactions data feed/portfolio holdings/ NAV details under Direct Plan of scheme(s) managed by you with the Investment Adviser.					
2. UNIT HOLDER DETAILS (Mandatory) (# Mandatory field)					
Name of Unitholder: # (Name as per PAN / ITD Records) First Name Middle Name Last Name DOB #					
Father's name: Mother's name:					
Folio No. PAN# Note: * Please mention Guardian PAN if the 1st holder is below 18 years of age. PAN copy mandatory.					
3. SIP DETAILS - New SIP Registration Investment Details: ☐ Monthly ☐ Quarterly (* Mandatory field)					
I/We Would like to invest to meet My/Our financial goals - ☐ Child's Education ☐ Child's Marriage ☐ Wealth Creation ☐ Retirement Planning ☐ Dream Home ☐ Dream Vacation					
In case of multiple schemes, cheque should be drawn in favour of "PGIM India Mutual Fund - Common Collection A/c"					
Scheme / Plan	Growth	IDCW ¹ Payout	IDCW Reinvestment	Amount	SIP Date DD (Any date of the month & quarter)
PGIM INDIA	☐	☐	☐	₹ Minimum Rs. 1000.	SIP Period From DD/MM/YYYY To* DD/MM/YYYY Maximum duration of 40 years
PGIM INDIA	☐	☐	☐	₹ Minimum Rs. 1000.	
PGIM INDIA	☐	☐	☐	₹ Minimum Rs. 1000.	
TOTAL ²				₹	
Initial Investment Details Amt. (₹) Cheque No. Dated: Drawn on:					
Note: ¹ IDCW option not available for FOF schemes. ² If Multiple SIP option is opted then the investment amount should match with the total SIP amount. ³ For New SIP registration if you are using the existing OTM mandate please provide the details in the space provided below.					
☐ Auto Renewal for SIP Registration (accessible only with new SIP) ☐ SIP renewal ☐ Change in OTM (For SIP registered earlier - OTM to be filled in mandatorily)					
PGIM INDIA Scheme Plan Option Amount ₹					
Frequency: ☐ Monthly ☐ Quarterly SIP Date DD SIP Period: From DD/MM/YYYY To DD/MM/YYYY Maximum duration of 40 years.					
☐ ³ OTM Debit Mandate is already registered in the folio. Please fill, Unique Mandate (UMRN)*					
Debit Bank Name Account No.					
☐ OTM Debit Mandate to be registered in the folio. (If selected, OTM to be filled in mandatorily) Note: *Existing Mandate should be valid for the enrolled period.					
4. SIP TOP-UP					
Top Up Amount ₹ Top Up Frequency (✓) ☐ Half Yearly* ☐ Yearly					
☐ Top Up to continue till# DD/MM/YYYY maximum duration of 40 years (Please ✓ any 1) OR ☐ Top Up to continue till SIP amount reaches^ ₹					
* Default option if not selected. # It is the date from which SIP Top Up amount will cease. ^ SIP Top Up will cease once the mentioned amount is reached.					
DECLARATION & SIGNATURE(S) : I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above to debit my/our account directly or through participation in Auto Debit. If the transaction his delayed or not effected at all for reasons of incomplete or incorrect information. I/We would not hold the user institution responsible. I/We will also inform AMC, about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned. I/We confirm that 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 different competing Schemes of various Mutual Funds from amongst which the Scheme is recommended to me/us. For investors investing in Direct Plan: I/We hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product/scheme/plan. Applicable to Micro Investors (Delete if not applicable): I/We hereby declare that I/We do not have any existing Micro Investments which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year.					
SIGNATURE (S) (Applicants must sign as per Common Application Form)		x Sole/1st Applicant/Guardian/Authorised Signatory/POA		x 2nd Applicant/Guardian/Authorised Signatory/POA	
				x 3rd Applicant/Guardian/Authorised Signatory/POA	



PGIM
India Mutual Fund

ONE TIME MANDATE FORM FOR NACH / ECS / AUTO DEBIT / LUMP SUM / SIP

(*Mandatory field)

UMRN		OFFICE USE ONLY	Date* D D M M Y Y Y Y
Utility Code	CIT100002000000037		☒ Create ☒ Modify ☒ Cancel
Sponsor Bank Code	CIT1000PIGW	I/We hereby authorize	PGIM India Mutual Fund
To debit (tick ✓)	☒ SB / CA / CC / SB-NRE / SB-NRO / Other	Bank a/c number*	
With Bank	IFSC / MICR*		
an amount of Rupees*	₹		
Debit Type*	☒ Fixed Amount ☒ Maximum Amount		
Frequency*	☒ Daily ☒ Weekly ☒ Bi-Monthly ☒ Monthly ☒ Quarterly ☒ Half-Yearly ☒ Annually ☒ As and when presented		
Reference - 1	Reference - 2		
1. 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 bank. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the user entity / Corporate to debit my account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorized to cancel / amend this mandate by appropriately communicating the cancellation / amendment request to the user entity / corporate or the bank where I have authorized the debit. 4. I/we understand and accept in case transaction's initiated against this mandate (within period of mandate) is/are rejected due to insufficient funds or such other reason as permitted under applicable law action may be taken against me/us under applicable law (including Negotiable Instruments Act).			
Maximum period of validity of this mandate is 40 years only.			
PERIOD*	From DD MM YYYY To DD MM YYYY		
Signature of Primary Bank Account Holder		Signature of Account Holder	
1. Name as in bank records		2. Name as in bank records	
		3. Name as in bank records	

INSTRUCTIONS TO FILL IN THE SIP TRANSACTION FORM

1. DISTRIBUTOR INFORMATION

- In case, the investor is directly applying, then they should clearly mention "DIRECT" in the ARN column.
- Any edition or cancellation of the Distributor Information should be countersigned by the investor else the same is liable to be rejected.
- Quoting of EUIN is mandatory in case of advisory transactions.
- Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column "Sub broker ARN code" separately provided in addition to the current practice of affixing the internal code issued by the main ARN holder in the "Sub broker code (as allotted by ARN holder)" column and the EUIN of the Sales Person (if any) in the "EUIN" column.
- Distributors are advised to ensure that they fill in the RIA code, in case they are a Registered Investment Advisor.
- Investors are requested to note that EUIN is applicable for transactions such as Purchases, Switches, Registrations of SIP / STP / Trigger STP / IDCW Transfer Plan and EUIN is not applicable for transactions such as Installments under SIP / STP / SWP / STP Triggers, IDCW Reinvestments, Redemption, SWP Registration, Zero Balance Folio creation and installments under IDCW Transfer Plans.
- Investors are requested to note that EUIN is largely applicable to sales persons of non individual ARN holders only (whether acting in the capacity of the main distributor or sub broker). Further, EUIN will not be applicable for overseas distributors who comply with the requirements as per AMFI circular CIR/ ARN-14/12-13 dated July 13, 2012.

2. UNIT HOLDER DETAILS:

- Please furnish the name of the Sole/First Unit Holder and the existing Folio Number.
- Please provide us with CKYC form for you to comply with the revised KYC requirements. For more details, please visit our website <http://www.pgimindiaf.com> and download the CKYC form.

Note: Renaming of Dividend Options

Investors are requested to note that pursuant to SEBI circular no. SEBI/HO/IMD/DF3/CIR/P/2020/194 dated October 05, 2020, the 'Dividend options' under all the existing schemes of PGIM India Mutual Fund ('the Mutual Fund') shall be renamed as follows with effect from April 1, 2021.

Option/facility	Name
Dividend Payout	Payout of Income Distribution cum Capital Withdrawal option (IDCW)
Dividend Re-investment	Reinvestment of Income Distribution cum Capital Withdrawal option (IDCW)
Dividend Transfer/Sweep Plan	Transfer/Sweep of Income Distribution cum Capital Withdrawal plan (IDCW)

Investors are requested to note that the above changes are changes in the disclosure requirements. There is no change in the current manner of calculation and distribution of dividend. Whenever distributable surplus will be distributed, a clear segregation between income distribution (appreciation on NAV) and capital distribution (Equalization Reserve) shall be suitably disclosed in the Consolidated Account Statement provided to investors.

3. SIP DETAILS:

- Investors subscribing under Direct Plan of the Schemes should indicate the Scheme/Plan name in the transaction form as "Scheme Name - Direct Plan" for e.g. "PGIM India Midcap Opportunities Fund - Direct Plan". Investors should also indicate "Direct" in the ARN column of the transaction form. However, in case Distributor code is mentioned in the transaction form, but "Direct Plan" is indicated against the Scheme name, the Distributor code will be ignored and the transaction will be processed under Direct Plan.
- Please note, where application is received for Regular Plan without Distributor code or "Direct" mentioned in the ARN Column, the application will be processed under Direct Plan.
- Please indicate whether your request is for Registration of a new SIP, Renewal of an existing SIP or for Change in Bank Details of an existing SIP.
- The below mentioned criteria should be met for an SIP investment as specified in the Scheme Information Document or any addenda issued there to:
 - Minimum amount per instalment
 - Minimum number of instalments
 - Aggregate investment via SIP
- Please furnish/indicate the below mentioned details with respect to your systematic investment. Investor can register up to 3 different SIPs in the same Folio using the Multiple SIP Registration facility.

- Scheme/Plan/Option and IDCW Frequency, where applicable.
- SIP Instalment Amount. In case of multiple SIP, The initial Amount should match the total amount.
- SIP Frequency** - Monthly or Quarterly. Please tick the appropriate option.
- SIP Dates (Monthly/Quarterly)** - Any date of the month & quarter.
- The validity of the mandates can be only for a maximum duration of 40 years or below from the Start Date.
- SIP Instalment Requirement:

SIP (All open ended schemes except PGIM ELSS Tax Saver Fund)			
Frequency	Min Amount Rs.	Multiple of Rs.	Min Number of Instalments
Monthly & Quarterly	1000	1	5

SIP - PGIM ELSS Tax Saver Fund			
Frequency	Min Amount Rs.	Multiple of Rs.	Min Number of Instalments
Monthly	500	500	12
	1000 and above	500	6
Quarterly	1000	500	6

- Your first Instalment can be for any day of the month. However, please note that there has to be a minimum gap of 21 days between your first SIP and your second SIP instalment (if you are paying for your subsequent SIP through Auto Debit).
- SIP renewal -Please provide the scheme details and the OTM details.
- Change in OTM -Change in OTM for a SIP registered earlier fresh OTM has to be filled in.

AUTO RENEWAL INSTRUCTIONS:

- Facility for Auto renewal SIP is available for Fresh SIP registration.
- The auto renewal option can be chosen at the time of fresh SIP registration.
- Auto renewal SIP option is available for SIP registered upto 20 years.
- If the Auto Renewal period is not specified, the default period previously selected will be applied.
- Investor must verify the validity of the NACH Mandate at the time of SIP registration and opting for Auto Renewal facility.
- SIP cancellation for auto renewal is permitted.

MULTIPLE SIP DETAILS:

- Investors can register up to 3 different SIP's in the same folio using the multiple SIP registration facility.
- If the Multiple SIP is opted then the investment amount should match with the total SIP amount.

SIP TOP UP INSTRUCTIONS (Optional):

This sections is to be filled only if the investor wish to increase the SIP amount on half yearly/ yearly basis by pre-decided incremented amount.

- SIP Top-Up Facility: Investors can opt for SIP Top Up facility wherein the amount of SIP can be increased at fixed intervals.
 - The minimum amount of increase under SIP Fixed Amount Top-Up facility should be Monthly SIP: Rs. 100/- and in multiples of Re. 1/- thereof.
 - Quarterly SIP: Rs. 100/- and in multiples of Re. 1/- thereof.
- For PGIM India Long Term Equity Fund the minimum amount of increase under SIP Fixed Amount should be Rs. 500/- and in multiples of Rs. 500/- for monthly and Rs. 1000/- and in multiples of Rs. 500/- for quarterly frequency.
- SIP Top-Up frequency in case of investors availing Monthly SIP facility will be half yearly and yearly and for availing Quarterly SIP facility, the frequency will be yearly. In case the SIP Top-Up frequency is not indicated under Monthly SIP, it will be considered as half yearly.
- Your investment cheque should be crossed "Account Payee only" and drawn favoring the scheme name where the investment is in a specific scheme h. Please ensure that the investment cheque issued by you complies with CTS 2010 requirement stipulated by the Reserve Bank of India. The words "CTS 2010" should appear on the face of the cheque.
- Payments made by Cash/Money Order/Postal Order, Non-MICR cheque, outstation cheques are not accepted.
- For detailed terms and conditions on SIP, SIP Top-up, OTM facility, please visit our website www.pgimindiaf.com and also refer to scheme related documents.

ONE TIME MANDATE INSTRUCTIONS FOR NACH / AUTO DEBIT

- One Time Mandate (OTM) is an authorization to the bank issued by an investor to debit their bank account up to a maximum limit as provided by the investor in the OTM mandate. This would facilitate debits for all purchases initiated by the investor up to maximum limit from the bank account provided in the section. To avail this facility the investors of the fund shall be required to submit one time mandate, completely filled in with all the details in the designated mandate form. Please attach a cancelled cheque copy.
- Investors, who have not registered for OTM facility, may fill the OTM form and submit duly signed with their name mentioned.
- Mobile Number and Email Id: Unit holder(s) should mandatorily provide their mobile number and email id on the mandate form. Where the mobile number and email id mentioned on the mandate form differs from the ones as already existing in the folio, the details provided on the mandate will be updated in the folio. All future communication whatsoever would be, thereafter, sent to the updated mobile number and email id.
- Unit holder(s) need to provide along with the mandate form an original cancelled cheque (or a copy) with name and account number pre-printed of the bank account to be registered or bank account verification letter for registration of the mandate failing which registration may not be accepted. The Unit holder(s) cheque/ bank account details are subject to third party verification.
- Investors are deemed to have read and understood the terms and conditions of OTM Facility, SIP registration through OTM facility, the Scheme Information Document, Statement of Additional Information,

Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of PGIM India Mutual Fund.

- Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
- Utility Code of the Service Provider will be mentioned by PGIM India Mutual Fund
- Tick on the respective option to select your choice of action and instruction.
- The numeric data like Bank account number, Investors account number should be left padded with zeroes.
- Please mention the Name of Bank and Branch, IFSC / MICR Code also provide An Original Cancelled copy of the cheque of the same bank account registered in One Time Mandate.
- Amount payable for service or maximum amount per transaction that could be processed in words. The amount in figures should be same as the amount mentioned in words, in case of ambiguity the mandate will be rejected.
- For the convenience of the investors the frequency of the mandate will be "As and When Presented"
- Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking.
- PGIMIF may amend the above terms and conditions, at any time without prior notice to investors and such amended terms and conditions will there upon apply to and will binding on the investor.
- For period selection investor has option to mention end date.
- The validity of the mandates can be only for a maximum duration of 40 years or below from the Start Date.

For more information visit us at

 www.pgimindiaf.com

E-mail us at

 care@pgimindia.co.in



Investor Helpline: 1800-209-7446

(Mon - Fri) from 9.30 AM to 6.30 PM

STP FORM (NEW STP / TOP-UP / CAPITAL APPRECIATION)

Distributor Code	Sub-Distributor	Sub-Distributor Code	EUIN*
ARN - 361161	RIA -		E689889

1. INVESTOR DETAILS (Please provide the following details in full)

Name: First Name Middle Name Last Name

Folio No.

PAN

First/Sole Unitholder/Guardian Second Unitholder Third Unitholder

2. ☐ NEW STP / ☐ NEW STP WITH TOP-UP / ☐ EXISTING STP WITH TOP-UP / ☐ NEW STP-CAPITAL APPRECIATION / ☐ EXISTING STP - CAPITAL APPRECIATION

From Scheme **PGIM INDIA** Plan

Option ☒ Growth ☐ IDCW Payout* ☐ IDCW Reinvestment* Note: Top up facility available for monthly and quarterly frequency only.

To Scheme **PGIM INDIA** Plan

Option ☒ Growth ☐ IDCW Payout* ☐ IDCW Reinvestment* *IDCW option is not available for FOF Schemes.

Transfer Instalment Amount ₹ Starting Date Ending Date

☐ Daily (Note: Daily STP would be processed on all business days)

☐ Weekly (STP Day) ☒ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri No. of Instalments

☐ Monthly^ ☐ Quarterly (STP Date) (Any date of the month)

3. STP TOP-UP

Top Up Amount ₹ Top Up Frequency ☒ ☐ Half Yearly* ☐ Yearly

☐ Top Up to continue till# ☐ Top Up to continue till STP amount reaches^ ₹

* Default option if not selected. # It is the date from which STP Top Up amount will cease. ^ STP Top Up will cease once the mentioned amount is reached.

4. STP CAPITAL APPRECIATION

From Scheme **PGIM INDIA** Plan

Option ☒ Growth ☐ IDCW Payout* ☐ IDCW Reinvestment*

To Scheme **PGIM INDIA** Plan

Option ☒ Growth ☐ IDCW Payout* ☐ IDCW Reinvestment* *IDCW option is not available for FOF Schemes.

Starting Date Ending Date

☐ Weekly (STP Day) ☒ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri No. of Instalments

☐ Monthly ☐ Quarterly (STP Date) (Any date of the month)

5. DECLARATION & SIGNATURES (To be signed as per the Existing Mode of Holding)

DECLARATION & SIGNATURE(S) : I/We hereby declare that the particulars given above are correct and express my willingness to make payments referred above to debit my/our account directly or through participation in Auto Debit. 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 will also inform AMC, about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned. I/We confirm that 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 different competing Schemes of various Mutual Funds from amongst which the Scheme is recommended to me/us. **For investors investing in Direct Plan:** I/We hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product/scheme/plan. **Applicable to Micro Investors (Delete if not applicable):** I/We hereby declare that I/We do not have any existing Micro Investments which together with the current application will result in aggregate investments exceeding ₹ 50,000 in a year.

I/We, hereby apply to the Trustee of PGIM India Mutual Fund for allotment of units of the respective Scheme(s) of PGIM India Mutual Fund, as indicated above and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I/We declare that I am/We are authorised to make this investment and the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I/We have read and understood the contents of the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum of PGIM India Mutual Fund. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. 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. For investors investing in Direct Plan : I/We hereby agree that the AMC has not recommended or advised me/us regarding the suitability or appropriateness of the product / scheme / plan. Please 3 if the EUIN space is left blank : I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/ relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Investor Details	1st Holder	2nd Holder	3rd Holder
Name			
SIGNATURE (S)	x	x	x

Date Place

Instructions for New STP:

Frequency	Minimum Amount (Rs.)	Multiple of (Rs.)	Minimum no. of Instalments
STP - All open ended schemes except PGIM India ELSS Tax Saver Fund and PGIM India Retirement Fund			
Daily, Weekly, Monthly and Quarterly	1000	1	5
STP - Target Scheme - PGIM India ELSS Tax Saver Fund ; Source Scheme - All open ended schemes			
Daily	500	500	12
Weekly, Monthly and Quarterly	1000	500	6

- The STP transaction is available on any date for monthly and quarterly and for weekly any day from Monday to Friday will be consider.
- In case if the start date is not provided by the unit holder, then the first STP would be the 7th working day from the date of submission of the form (excluding Submission date).
- For Physical STP registration requests, the first instalment would get triggered on the 3rd working day from the date of submission of the form (excluding Submission date)
- Load Structure of the Scheme & Target Schemes as on the date of enrolment of STP shall be applicable.
- STP Top Up facility is amount based facility and applicable for all Open ended schemes except ELSS Tax Saver and Retirement Fund.
The provision of 'Minimum redemption amount' specified in the SID of Scheme and 'Minimum application amount' specified in the SID of the Target Schemes will not be applicable for Daily STP.
- As Source Scheme for PGIM India ELSS Tax Saver Fund & PGIM India Retirement Fund, STP is available only after completion of lock in period.
- Transfer to ELSS Scheme should be mentioned in amount (Multiple of 500).
- Please note that STP request would be registered within 3 business days from the date of submission of form (excluding submission date).
- If any STP instalments due date falls on a non-Business day, then the respective transactions will be processed on the next Business day.
- If the STP period or no. of instalments is not specified by the applicant in the transaction form, STP mandate will terminate automatically if all Units from the respective source scheme are redeemed or upon the Mutual Fund receiving a written intimation of death of the sole / 1st Unit holder.
- The STP mandate may be discontinued by a Unit holder by giving a notice of 7 days.
- STP will stop if source scheme balance is NIL.

Instructions for STP with Top-Up: Investors can opt for STP Top Up facility wherein the amount of STP can be increased at fixed intervals.

- Top-up facility under Systematic Transfer Plan is an amount based facility and applicable for all open ended schemes except PGIM India ELSS Tax Saver Fund & PGIM India Retirement Fund as Source schemes. These 2 schemes will be considered as Source schemes only after completion of lock in period.
- Eligible frequencies under STP for Top Up is Monthly and Quarterly.
- Half Yearly and Yearly Top Up options will be available for investors under Monthly frequency. Similarly the same top up options will be available for Quarterly frequency.
- Under the Half Yearly Top Up option, Monthly Frequency, the amount of investment through STP installment shall be increased post every 6th STP installment. In case of Quarterly Frequency, the amount of investment through STP installment shall be increased post every 2nd STP installment.
- Under the Yearly Top Up option, Monthly Frequency, the amount of investment through STP installment shall be increased post every 12th STP installment. In case of Quarterly Frequency, the amount of investment through STP installment shall be increased post every 4th STP installment.
- Minimum Top Up amount is Rs.1000/- and in multiples of Re.1 (in multiples of Rs.500/- in case of STP into PGIM India ELSS Tax Saver Fund)
- Default Top Up option will be Half Yearly Top Up.
- Load Structure of the Source Scheme & Target Scheme as on the date of enrolment of STP shall be applicable.
- This facility will not be available for STP registered via Exchange and Channel Partners.
- The broker code for initial STP registration request will remain the same for STP Top-Up request.
- If the STP period or number of installments are not specified by the investor in the form, the transactions will be processed until the balance of units in Source scheme becomes zero in the folio.

Instructions for STP with Capital Appreciation option:

- STP request with capital appreciation would be registered within 3 days from the date of submission of form for new and existing investors.
- STP Capital Appreciation is available for all open ended schemes of the Mutual Fund and shall be allowed for ELSS and Retirement scheme (as Source Scheme) only after the completion of lock in period.
- For any STP due date, if the capital appreciation amount is falling short of minimum transfer amount, STP transaction on that due date shall not be processed.
- Minimum number of Instalment should be 5 for STP of Rs. 1000/- each and in multiples of Re. 1/- thereafter, for all open ended schemes and for ELSS Scheme minimum number of instalment should be 6 for Rs.1000/- each and in multiples of Rs.500/-.
- Weekly, Monthly & Quarterly interval, investor will be eligible to transfer the capital appreciation amount (Minimum amount is Rs.1000/-) on the date opted by the investor.
- If the selected day is a non business day, STP Capital Appreciation will be processed on next business day.
- Capital Appreciation to be calculated as; Capital Appreciation Amount = Value as on the date of trigger – Value as on the date of Capital Appreciation registration for the applicable units.
- STP Capital Appreciation may be discontinued by the investor giving a notice of 7 days.
- If the number of instalments is not specified, the transfer of capital appreciation will remain active until there is a balance in the scheme.

PGIM
India Mutual Fund

Acknowledgment Stamp

Instructions for New SWP:

1. The minimum withdrawal amount under SWP facility is the same as the minimum redemption amount under the scheme.
2. The SWP transaction is available on any date for monthly, quarterly and annual option.
3. Minimum no. of Instalment should be 5 for SWP of Rs. 1000/- each and in multiples of Re. 1/- thereafter for all open ended scheme.
4. Frequency of Annual is any date.
5. Please note that SWP request would be registered within 3 business days from the date of submission of form (excluding submission date).
6. If any SWP instalment due date falls on a non-Business day, then the respective transactions will be processed on the next Business day, the transaction shall be effected on the immediate next Business day.
7. If the SWP period or no. of installments is not specified in the transaction Form, the SWP transactions will be processed until the balance of units in the unit holder's folio in the Source scheme becomes zero.
8. The SWP mandate may be discontinued by a Unit holder by giving a notice of 7 days.
9. SWP mandate will terminate automatically if all Units held by the unitholder in the Scheme are redeemed or upon the Mutual Fund receiving a written intimation of pledged or death of the sole / 1st Unit holder.
10. SWP will stop if scheme balance is NIL.
11. For PGIM India ELSS Tax Saver Fund & PGIM India Retirement Fund, SWP is available only after completion of lock in period.
12. The SWP transfer will be processed to the default bank account registered under the folio.

Instructions for SWP with Top-Up: Investors can opt for SWP Top Up facility wherein the amount of SWP can be increased at fixed intervals.

1. Top-up facility under Systematic Withdrawal Plan is an amount based facility and applicable for all open ended schemes except PGIM India ELSS Tax Saver Fund & PGIM India Retirement Fund. For PGIM India ELSS Tax Saver Fund & PGIM India Retirement Fund, SWP is available only after completion of lock in period.
2. Eligible frequencies under SWP for Top Up is Monthly, Quarterly and Annual.
3. Half Yearly and Yearly Top Up options will be available for investors under Monthly and Quarterly frequency. Yearly Top Up option will be available for investors under Annual frequency.
4. Under the Half Yearly Top Up option, Monthly Frequency, the amount of investment through SWP installment shall be increased post every 6th SWP installment. In case of Quarterly Frequency, the amount of investment through SWP installment shall be increased post every 2nd SWP installment.
5. Under the Yearly Top Up option, Monthly Frequency, the amount of investment through SWP installment shall be increased post every 12th SWP installment. In case of Quarterly Frequency, the amount of investment through SWP installment shall be increased post every 4th SWP installment.
6. Under the Yearly Top Up option, Annual Frequency, the amount of investment through SWP installment shall be increased yearly
7. Minimum Top Up amount is Rs.1000/- and in multiples of Re.1
8. Default Top Up option will be Half Yearly Top Up for Monthly and Quarterly Frequency. In case of Annual Frequency, Default Top Up option will be Yearly Top Up.
9. Load Structure of the Scheme as on the date of enrolment of SWP shall be applicable.
10. This facility will not be available for SWP registered via Exchange and Channel Partners.
11. The broker code for initial SWP registration request will remain the same for SWP Top-Up request.
12. If the SWP period or number of instalments are not specified by the investor in the form, the transactions will be processed until the balance of units in the scheme becomes zero in the folio.

Instructions for SWP with Capital Appreciation option:

1. SWP request with capital appreciation would be registered within 3 days from the date of submission of form for new and existing investors.
2. SWP Capital Appreciation is available for all open ended schemes of the Mutual Fund and shall be allowed for ELSS and Retirement scheme only after the completion of lock in period.
3. For any SWP due date, if the capital appreciation amount is falling short of minimum withdrawal amount, SWP transaction on that due date shall not be processed.
4. Minimum number of Instalment should be 5 for SWP of Rs. 1000/- each and in multiples of Re. 1/- thereafter.
5. Weekly, Monthly, Quarterly & Annual interval, investor will be eligible to transfer the capital appreciation amount (Minimum amount is Rs.1000/-) on the date opted by the investor.
6. If the selected day is a non business day, SWP Capital Appreciation will be processed on next business day.
7. Capital Appreciation to be calculated as; Capital Appreciation Amount = Value as on the date of trigger – Value as on the date of Capital Appreciation registration for the applicable units.
8. SWP Capital Appreciation may be discontinued by the investor giving a notice of 7 days.
9. If the number of instalments is not specified, the withdrawal of capital appreciation will remain active until there is a balance in the scheme.