



PIONEER ITI Common Application Form For Open End Equity Schemes

Distributor information

Agent /Broker Code	Sub-Broker Code :
ASC8500154	Branch :
	Representative :

For Office Use Only

Application received	
On: Date _____	Time _____
By: _____	_____
(Employee Name)	(Branch)

Existing Shareholders (Please provide the following details in full)

(Please refer instruction 1)

First Applicant Name _____

Account No. _____ Fund _____

Your Personal Details (Need not be filled if you have completed the box above)

(To be filled in Block Letters. Use one box for one alphabet leaving one box blank between name and surname)

Name of First/Sole Applicant _____

Name of Second Applicant _____

Name of Third Applicant _____

Address _____

_____ Pin _____

Tel _____

STD Code _____ Work _____ Residence _____ Mobile _____

Email _____

Date of Birth _____ Name of Father/Husband of applicant/Guardian of Minor (Strike off whichever is not applicable) _____

(Tick whichever is applicable)

Mode of Holding

- Single
- Joint
- Either or Survivor(s)

Status

- Individual
- Partnership
- HUF
- NRI/OCB/FII
- Company/Body Corporate
- Club/Society
- Trust
- Minor through Guardian

I would like to invest in (Please tick)

Separate cheque/demand draft required for each investment

Scheme Name	Invested	Amount Charges	DD Paid	Net Amount	Option		Payment Details Bank and Branch
					Cash	Cheque/DD No.	
<input type="checkbox"/> Bluechip Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Prima Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Prima Plus	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Infotech Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Internet Opportunities Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> FMCG Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Pharma Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Balanced Fund	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
<input type="checkbox"/> Taxshield	_____	_____	_____	<input type="checkbox"/> GR <input type="checkbox"/> DP <input type="checkbox"/> DR	<input type="checkbox"/>	<input type="checkbox"/> _____	_____
Total							

GR - Growth Plan DP - Dividend Payout DR - Dividend Reinvestment

Statutory Details

Bank Name Branch
Account No.
Account Type Resident NRO NRE Others _____
 Savings Current
PAN/GIR No. Circle/Ward/District
For investments in excess of Rs. 50,000 (Mandatory)

For NRI / FII / OCB

Please give your overseas address (required as per RBI regulations)

Address

Status of investment (please tick) Repatriable Non Repatriable Country of Citizenship _____

Electronic Clearing Service (ECS)

Compulsory for dividend plan - payout option

I authorise Pioneer ITI Mutual Fund to credit my dividend through ECS.

The 9-Digit Code No. of my bank & branch is

This number appears on every leaf of your cheque book after your cheque number

Nomination Details

Nominee Name
Guardian, if nominee is a minor
Address
 Pin

Only for those availing Sec. 54EA/54EB exemption

(Please tick the relevant section under which application is being made)

I/We understand and agree that these units are purchased by me/us to avail the exemption under section 54EA / 54EB of the Income Tax Act, 1961 and are not repurchasable earlier than 3 years/7 years from the date of investment. I/We agree that this undertaking is irrevocable.

Declaration

To

The Board of Trustees, Pioneer ITI Mutual Fund, 75 T.T.K. Road, Chennai 18.

Dear Sirs

I/We have read and understood the Abridged Offer Documents of the schemes indicated above and hereby apply for units of these schemes. I/We agree to abide by the terms and conditions of the schemes and any amendments thereof

Date: _____

Place: _____

Signatures :

First Applicant _____

Second Applicant _____

Third Applicant _____

Systematic Investment Plan (Optional)

Existing shareholders can fill up this form for joining Systematic Investment Plan (SIP) in the following schemes. First time investors should send a fully filled up Application Form along with the SIP application and payment cheques

My/Our account number is

I/We would like to join the Systematic Investment Plan as detailed below:

Scheme Name	Amount	Period (Minimum 12 months)	Cheque Numbers From To	Bank Name and Branch
Bluechip Fund				
Prima Fund				
Prima Plus				
Infotech Fund				
Internet Opportunities Fund				
FMCG Fund				
Pharma Fund				
Balanced Fund				
Taxshield				

Signature : _____
First applicant
Second applicant
Third applicant

Acknowledgement

Received from Mr./Mrs. _____
Pin _____

Bluechip Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Prima Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Prima Plus	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Infotech Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Internet Opportunities Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
FMCG Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Pharma Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Balanced Fund	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____
Taxshield	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend <input type="checkbox"/> Payout <input type="checkbox"/> Reinvestment	Amount _____ <input type="checkbox"/> Cash <input type="checkbox"/> Cheque/DD Cheque/DD No. _____ Date _____ Bank and Branch details _____

Systematic Withdrawal Plan (Optional)

Existing shareholders can fill up this form for joining Systematic Withdrawal Plan (SWP) in the following schemes. First time investors should send a fully filled up Application Form along with the SWP application. Please note that one cannot join both SIP and SWP simultaneously in the same scheme.

My/Our account number is

I/We would like to join the Systematic Withdrawal Plan as detailed below:

Scheme Name	Amount	Period (Minimum 12 months)	
		From	To
Bluechip Fund			
Prima Fund			
Prima Plus			
Infotech Fund			
Internet Opportunities Fund			
FMCG Fund			
Pharma Fund			
Balanced Fund			

Signature :

First applicant

Second applicant

Third applicant

Instructions

Please read the unabridged offer document containing the terms of offer. All applicants are deemed to have accepted the terms subject to which the offer is being made and bind themselves to the terms upon signing the Application Form and tendering the payment.

- Resident investors already having an account in any Pioneer ITI Mutual Fund schemes can provide just their account number, fund name and first applicant name in the space provided. Such investors need not fill the section 'Personal Details'.
- The application form must be completed in BLOCK LETTERS in ENGLISH. More than one scheme can be applied for in the same application form, but with separate cheques for each scheme.
- Signatures should be in English or in any of the Indian languages. Thumb impressions must be attested by a Magistrate/Notary Public under his/her official seal. In case of HUF, the Karta will sign on behalf of the HUF
- Mode of payment:-

a. For Resident Investors

- by cash/local cheque deposited with any Pioneer ITI Mutual Fund branch
- Applicants from places where there is no KPMF branch/DR Centre can deduct DD charges [as per prevailing applicable IBA rates] from the application amount provided these **drafts are payable at Chennai only**. Applicants may send their application alongwith separate bank drafts for each scheme, to the investor service centre at Chennai
- Investors are instructed NOT to make cash payments to their agents and to KPMF district representative centres.
- Cheques should be drawn in favour of the scheme name. For e.g.

"Pioneer ITI Bluechip Fund", Pioneer ITI Prima Fund", "Pioneer ITI Prima Plus". If the application is tendered at District Representative centre, cheques should be drawn in favour of "Pioneer ITI Mutual Fund". Separate cheques should be sent for each scheme. **The fund is not obliged to represent dishonoured cheques or inform the investor/ investor's agent about it.**

b. For Non-Resident Investors:

- by NRE/FCNR/NRO account cheque from a bank located at places having a KPMF branch or a DR centre
- by Rupee draft purchased abroad payable at Chennai
- by Dollar/Pound Sterling/Deutschemark draft purchased abroad and payable at Chennai
- by wire transfer to Pioneer ITI Mutual Fund's account with ABN AMRO Bank, Haddows Road, Chennai 600 006

Please enclose a photocopy of the cheque / payment instrument or Bankers certificate or FIRC. Applications without atleast one of these may not be eligible for repatriation

- Foreign Institutional Investors and International Multilateral Agencies shall pay their subscription by direct remittance from abroad or out of their special Non Resident Account, maintained with a designated bank in India. OCBs, FIIs, Trusts must also provide the Overseas Auditor's Certificate
- In case of an application form under a Power of Attorney or by a limited company or a body corporate or a registered society, or a Trust, the relevant Power of Attorney or the relevant resolution or authority to make the application, as the case may be, or a duly certified copy thereof, alongwith a certified copy of the Memorandum and Articles of Association [where applicable] and/or bye law may be lodged alongwith the application form. The signature must be duly attested by a notary public

For any application related queries, please contact : **Pioneer ITI Mutual Fund** Investor Services: Century Centre, 75 TTK Road, Alwarpet, Chennai 600 018, Ph : 467 9200, Fax : (044) 498 7963, E-mail : services@pioneeriti.com,

www.pioneeriti.com