



DISTRIBUTOR COMMON NON FINANCIAL TRANSACTION REQUEST

The relevant section to be filled-in are indicated in the title of respective section. Please fill in the information below in English and in BLOCK Letters.

The request form is solely for registered Advisors / Distributors and should not be circulated to investors / prospective investors

IMPORTANT: Please strike off the unused section(s) to prevent any unauthorised use.

Date:	D	D	M	M	Y	Y	Y	Y
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A. BROKER'S INFORMATION (Mandatory)	
Broker code	ARN - 24952
	EUIN - E347831
Name	

B. CHANGE OF BANK MANDATE/MODE OF PAYMENT (Please fill section A + B + H) Mandatory to attach proof.	
Account Number	
Name of the Bank	
Bank Branch	Bank City
9 Digit MICR Code	11 Digit IFSC
Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR	Enclosed (Please ✓): <input type="checkbox"/> Bank Account Details Proof Provided (Mandatory)

C. NEW CONTACT DETAILS (Please fill section A + C + H)	
Mobile	Tel.
Email	

D. UPDATION OF PAN (Please fill section A + D + H)	
Enclosed (Please ✓): <input type="checkbox"/> Self attested PAN card copy (Mandatory)	PAN

E. UPDATION OF ARN RENEWAL (Please fill section A + E + H)	
ARN Renewal Period:	
	To
Enclosed (Please ✓): <input type="checkbox"/> Self attested Renewed ARN card copy (Mandatory)	

ACKNOWLEDGEMENT



Change in Bank Mandate Contact Details PAN Updation ARN Renewal Signature Updation Nomination

ICICI Prudential Asset Management Company Limited
2nd Floor, Block B-2, Nirlon Knowledge Park, Western Express Highway, Goregaon (East), Mumbai 400 063.
Toll free Call: 1800 200 5050, Website: www.icicipruamc.com, Email: enquiry@icicipruamc.com

 Time stamp and signature of Receiving Officer
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F. REGISTRATION/CHANGE/MODIFICATION OF NOMINATION (For Individuals / Sole Proprietors Only) (Please fill section A+ F+H) REGISTRATION CHANGE/MODIFICATION

I do hereby nominate the following person as my nominee to receive the amount of commission pertaining to the business done by me, in the event of my death.

Nominee Name										
Guardian Name (If Nominee is Minor)										
Nominee's Date of Birth If Nominee is Minor	D	D	M	M	Y	Y	Y	Y		
Address of Nominee's/Guardian's (if nominee is minor)										
	City									
	Pin code								State	
Mobile										

Note: I/We agree and accept that: (a) All payments and settlements made to nominee(s) and signature of nominee(s) acknowledging will constitute a full & valid discharge of the liability of the AMC/Mutual Fund/Trustees. (b) This nomination will stand cancelled in the event of the nominee(s) pre-deceasing me/us. (c) I/We have read the AMC's instructions on nomination as regulated by regulatory and I/we hereby confirm to adhere to such rules or amendments there to as may be made from time to time. (d) The nomination will be registered only when it is complete in all respects to the satisfaction of the AMC. (e) The AMC will not entertain any claim other than that of a registered nominee(s), unless so directed by any competent court. (f) This instruction supersedes all previous nominations made by me/us in respect of the broker code indicated above.


G. UPDATION OF SIGNATURE (Please fill section A+ G+H)

- I do hereby submit the request to update my new signature. The following documents have been submitted for processing my above stated request: (Please tick).
- Attestation done from registered bank mandate for new signature:
- Signature attested by the registered bank
 - Copy of photo identification (id) proof PAN, passport, Aadhaar card, driving license etc.
(Photo id proof will be attested by bank/notary/AMC designated person and also self-attested by the Distributor)
- Attestation cannot be done from non-registered bank of the Distributor for new signature:
- Copy of photo identification (id) proof and Address proof e.g. Passport, Aadhaar card, driving license, copy of registered mobile/landline bill copy
 - Attestation from new bank of the Distributor **OR**,
 - Affidavit on Rs.100/- stamp paper for new signature with notary attestation

Note: 1. Bank attestation in original and will include account number, name of signatory, employee code, designation (branch Manager & above), bank Full seal and signature).
2. Notary attestation will be in original and will include notary registration number with full address, seal and signature of the notary).

H. Signature

I hereby agree to abide all Distributor's Code of Conduct notified/as may be notified by Securities Exchange Board of India/Association of Mutual Fund in India.

Place: _____	Signature of Distributor	
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