

# POWER OF ATTORNEY REGISTRATION/ CANCELLATION/ MODIFICATION FORM



<input type="checkbox"/> REGISTRATION	<input type="checkbox"/> CANCELLATION	<input type="checkbox"/> MODIFICATION	Time Stamping
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I/We, the undersigned, hereby submit the request to register Power of Attorney (POA) as per the below given details.

UNIT HOLDER INFORMATION									
<b>MANDATORY</b>	<table style="width:100%;"> <tr> <td style="width:15%;">Folio No.</td> <td style="width:55%;"></td> <td style="width:20%;">KYC compliance status (Please (✓))</td> <td style="width:10%;"><input type="checkbox"/> 1st Applicant</td> </tr> <tr> <td>First/Sole Holder</td> <td colspan="3"></td> </tr> </table>	Folio No.		KYC compliance status (Please (✓))	<input type="checkbox"/> 1st Applicant	First/Sole Holder			
Folio No.		KYC compliance status (Please (✓))	<input type="checkbox"/> 1st Applicant						
First/Sole Holder									

OLD POA HOLDER DETAILS	NEW POA HOLDER DETAILS
POA Holder Name	POA Holder Name
PAN/PEKRN	PAN/PEKRN
KYC ID (KIN)	KYC ID (KIN)
Relationship with the unitholder	Relationship with the unitholder
CONTACT DETAILS Office No.	CONTACT DETAILS Office No.
Mobile No.	Mobile No.
Email ID	Email ID

DOCUMENT TO BE ENCLOSED.								
Sr. No.	Documents	Tick (✓)						
1.	Notarised copy of the POA agreement dated <table style="display: inline-table; border: 1px solid black; text-align: center; width: 100px;"> <tr> <td style="width: 20px;">D</td><td style="width: 20px;">D</td><td style="width: 20px;">M</td><td style="width: 20px;">M</td><td style="width: 20px;">Y</td><td style="width: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y	<input type="checkbox"/>
D	D	M	M	Y	Y			
2.	KYC of the POA holders	<input type="checkbox"/>						
3.	Any other, please specify _____	<input type="checkbox"/>						

**IMPORTANT INSTRUCTIONS**

i. ONLY in case of Modification, BOTH Old and New POA detail sections are to be filled.

ii. POA holder signature ONLY to be provided for Modification and New Registration cases.

iii. Signature of unit holder to be provided as per holding status for successful registration of request.

iv. \*IDFC Asset Management Company Limited/ Fund may call for additional documents if required.

v. In case of non-submission of any of the documents or if the documents are not found to be in order, the AMC reserves the right to reject the application.

\* Unitholders are requested to note that the name of 'IDFC Asset Management Company Limited' would be changed to 'Bandhan AMC Limited' or any other name as may be approved by Regulatory Authorities in due course.

Alterations if any should be countersigned.

SIGNATURE(S)			
<b>Signature of POA Holder</b>			
<b>SIGN HERE</b>		POA Holder Signature	
<b>Signature of Unitholder</b>			
<b>SIGN HERE</b>		First / Sole holder Signature	Second holder Signature
		Third holder Signature	