Deutsche Bank

Customer Order Form (Mutual Funds)

CAMS

DSP | Franklin Templeton | HSBC | SBI | ABSL | HDFC | ICICI | Bandhan | 360 ONE | Kotak | TATA MF | PPFAS | WhiteOak Capital

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Before you invest in any fund, we urge you to understand your Investment Objective and Constraints and then select appropriate Risk Profile or Product category. Enclosed is the gist of the 4 broad universal Investment needs and Suitable products respectively. Further, please find below the characteristics of mutual funds' broad categories for your informed investment decision making.

Objective	Liquidity (L)	Protection (P)	Growth (G)	Tax and Solution oriented (TS)
Description	Park money for Liquidity needs	Capital Preservation	Wealth Creation	Save Tax with Capital Appreciation and/ or fulfill a specific goal

Mutual Fund Categories

Please Tick	Objective	Fund Type	Risk	Liquidity	Return Predictability	Risk Class
	Liquidity	Overnight/ Liquid/ Ultra-short/ Low duration/ Money market				1
	Protection	Floater/ Short term/ Corporate bond/ Banking and PSU/ Arbitrage				2
	Protection	Medium duration/ Medium to Long duration/ Long duration/ Dynamic bond/ Gilt			|	3
	Protection	Conservative hybrid/ Equity savings				2
	Growth	Largecap/ Large and Midcap/ Flexicap/ Multicap/ Dividend Yield/ Contra/ Focused/ Value/ Index				3
	Growth	Fund of Funds (Domestic/ Overseas)/ Gold Funds				3
	Growth	Credit risk/ Midcap/ Smallcap/ Sectoral/ Thematic				4
	Growth	Dynamic asset allocation/ Balanced advantage/ Aggressive hybrid/ Multi-asset allocation				3
	Tax and Solution oriented	Children's fund/ Retirement fund/ ELSS			|	2 / 3

	Very Low		Low		Moderate		High		Very High

Note: The characteristics and risk class are indicative only. For further details or product specific information, read the scheme specific KIM/ SID. You may also contact your RM or branch. As the next step, you may want to refer to the Deutsche Bank's Approved List of Mutual Funds for investment decision making. This Approved List of funds is prepared by the Deutsche Bank's Investment Specialists based on our proprietary tool using quantitative and qualitative parameters.

Risk Profile Categories and Product Risk Class

Please Tick	Risk Profile	Product categories
	Very Conservative	No investment in Risk class 4 Products
	Conservative	< ~30% portfolio in Risk class 4 Products
	Moderate	< ~50% portfolio in Risk class 4 Products
	Aggressive	< ~70% portfolio in Risk class 4 Products
	Very Aggressive	~ 90% portfolio in Risk class 4 Products

Product Risk Class	Classification Criteria
1	Very low risk/ volatility, High liquidity
2	Low risk/ volatility, High liquidity
3	Low to medium risk/ volatility, Medium liquidity
4	Medium to high risk/ volatility, Low liquidity

*Deutsche Bank AG, India ("Bank") is an AMFI registered Mutual Fund Distributor of third party investment products. Deutsche Bank states that the list of Approved investment schemes is for investor's guidance only. It is not obligatory on investors to invest in these schemes. The Approved list and above-mentioned Product characteristics and Risk class or other reports/ communications covering indicative Asset-allocation, Research updates on markets/ asset – classes etc. are shared with the bank's customers in order to facilitate informed investment decisions. These are not to be construed as an advice or offer to transact or a solicitation. Please read the disclaimers attached with such reports carefully to know the bank's position on the subject matter.

Customers Signature: ____________________ ____________________ ____________________

(Sole/ Primary Holder) (Joint Holder 1) (Joint Holder 2)

Offline Order Form for Mutual Fund transactions through db WealthPro

(One form to be used for transacting in all schemes of Online Enabled AMCs)

We request you to handover only the duly completed and signed Order Forms to the Bank branch or your Relationship Manager. Please do not leave any blanks in the Form. Please strike off any section which is not filled and/ or is not required.

Investor Details – For Buy/ Sell/ SIP/ SWP Transactions

Date: D D M M Y Y Y Y Customer ID:________________ Portfolio Name: ________________

Sole/ First Holder Name: ________________

Joint Holder 1 Name: ________________ Joint Holder 1 Customer ID: ________________

Joint Holder 2 Name: ________________ Joint Holder 2 Customer ID: ________________

I/ We request you to execute the following investments/ transactions on my/ our behalf in the above mentioned Portfolio Name.

I/ We authorise you to Debit my/ our Bank Account No. ________________ with

Deutsche Bank AG. (DBAG) for total of ₹ ________________ (In Words ________________

________________)

for the below transactions. The subsequent SIP transaction will be executed subject to availability of funds in the above-mentioned Account.

Buy/ Sell

Sr. No.	Name of Scheme with option	Folio No.	Type of Transaction	Amount (₹)	No. of Units	Need (L/P/G/TS)
1			☐ Buy ☐ Sell			
2			☐ Buy ☐ Sell			
3			☐ Buy ☐ Sell			
4			☐ Buy ☐ Sell			
5			☐ Buy ☐ Sell			
6			☐ Buy ☐ Sell			

SIP/ SWP

Sr. No.	Name of Scheme with option	Folio No.	Type of Transaction	Amount (₹)/ Units	Scheme details	Need (L/P/G/TS)
1			☐ SIP ☐ SWP ☐ Cancel SIP/ SWP		Frequency: No. of Installments: Start Date:	
2			☐ SIP ☐ SWP ☐ Cancel SIP/ SWP		Frequency: No. of Installments: Start Date:	
3			☐ SIP ☐ SWP ☐ Cancel SIP/ SWP		Frequency: No. of Installments: Start Date:	
4			☐ SIP ☐ SWP ☐ Cancel SIP/ SWP		Frequency: No. of Installments: Start Date:	
5			☐ SIP ☐ SWP ☐ Cancel SIP/ SWP		Frequency: No. of Installments: Start Date:	
6			☐ SIP ☐ SWP ☐ Cancel SIP/ SWP		Frequency: No. of Installments: Start Date:	

— I/ We understand that the redemption proceeds (net of exit load and taxes, if any) will be credited by the AMC/ Fund House to my/ our Bank account mapped to my/our folio as per their records.

— All valid instructions received prior to 13.00 hrs (For Liquid Funds) and 14:00 hrs (For Non – Liquid Funds) on any business weekday will be processed on the same day.

— Please get in touch with your Relationship manager/ Branch to have nomination registered at Portfolio level.

Customers Signature: ________________ ________________ ________________

(Sole/ Primary Holder) (Joint Holder 1) (Joint Holder 2)

Offline Order Form for Mutual Fund transactions through db WealthPro

(One form to be used for transacting in all schemes of Online Enabled AMCs)

We request you to handover only the duly completed and signed Order Forms to the Bank branch or your Relationship Manager. Please do not leave any blanks in the Form. Please strike off any section which is not filled and/ or is not required.

Investor Details – For Switch/ STP Transactions

Date: D D M M Y Y Y Y Customer ID:________________ Portfolio Name: ________________

Sole/ First Holder Name: ________________

Joint Holder 1 Name: ________________ Joint Holder 1 Customer ID: ________________

Joint Holder 2 Name: ________________ Joint Holder 2 Customer ID: ________________

I/ We request you to execute the following investments/ transactions on my/ our behalf in the above mentioned Portfolio Name.

Switch/ STP

Sr. No.	Transfer 'From' Scheme with option	Folio No.	Type of Transaction	Amount (₹) / Units	Transfer 'To' Scheme with option	Investment details	Need (L/P/G/TS)
1			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
2			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
3			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
4			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
5			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
6			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
7			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	
8			☐ STP ☐ Switch ☐ Cancel STP/ Switch			Frequency: No. of Installments: Start Date:	

— The net amount available post switch out will be subject to deduction of charges and tax, if applicable, by the respective AMC/ Fund House.
— All valid instructions received prior to 13.00 hrs (For Liquid Funds) and 14:00 hrs (For Non – Liquid Funds) on any business weekday will be processed on the same day.
— Please get in touch with your Relationship manager/ Branch to have nomination registered at Portfolio level.

Customers Signature: ________________ ________________ ________________

(Sole/ Primary Holder) (Joint Holder 1) (Joint Holder 2)

I/ We also confirm that:

1. I/ We are placing instructions for these transactions at our own will and volition without being influenced by any advice or solicitation by Deutsche Bank (The "Bank") and after due consideration of my/ our risk appetite and investment needs. I/ We hereby authorise the Bank to communicate these instructions to the concerned Asset Management Company, including its agents, ("AMC") at my/ our risk and cost. I/ we shall be responsible for the completeness and correctness of the information filled in the form and agree not to hold the AMC and the Bank or its employees liable for any consequences in case of any incorrect, incomplete information for any reason whatsoever. The bank shall try its best to deliver the correct and timely instructions to the AMC, however, shall not be held responsible for any delay in such communication and any loss sustained in this regard.
2. I/ We have read and understood the terms and conditions for third party products as stated in the Investment overview form and hereby expressly acknowledge them. I/ We have read and understood the contents of the Scheme Information Document/ Offer document and the Key Information Memorandum of the above-mentioned scheme(s). I/ We agree to abide by and be bound by the terms, conditions, rules and regulations thereof.
3. I/ We hereby declare that the amount being invested by me/ us in the above scheme(s) is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any Governmental or Statutory authority from time to time.
4. I/ We understand that, a PAN is required to be quoted for Mutual Fund investments for all unit holders and that where a PAN is quoted, a self-attested and verified copy of the same is required. I/ We further understand that, I/ We need to comply with the KYC formalities for investing in mutual funds and proof of the completion of KYC formalities is also required. I/ We confirm having complied with these requirements. I/ We also understand that from time to time, any and all the changes in the regulatory guidelines shall be applicable to my/ our investments. I/ We understand and agree that my/ our investments will not be processed in case I/ We do not comply with these requirements.
5. I/ We hereby confirm that the terms and conditions stated in this form shall be read in conjunction with the terms of the Investment Overview Form and General Business Conditions laid down by the Bank.
6. In accordance with the instructions provided in the Customer Consent Form to the Bank, I/ We hereby expressly understand and acknowledge that I/ We have been provided complete information of commissions received by the Bank from AMCs for distribution of various Mutual Fund schemes.

Customers Signature: ______________________ ______________________ ______________________

(Sole/ Primary Holder) (Joint Holder 1) (Joint Holder 2)

Customers Name: ______________________ ______________________ ______________________

(Sole/ Primary Holder) (Joint Holder 1) (Joint Holder 2)

(Customer Signature)	For 'Execution only' or 'Make-Available' products I/ We confirm that I/ We have not received any investment advice, suggestions or other guidance from the Bank relating to the investment(s) detailed above. Any transaction I have decided to make is being made at my own volition and at my own risk having read and understood all relevant product literature. I/ we acknowledge and understand that the arrangement of any transaction by the Bank on my behalf is not a confirmation or an endorsement from the Bank that is suitable for me.
(Customer Signature)	For investment products purchased outside the Bank's list of Approved schemes. I/ We understand that the Bank's list of approved investment schemes is for my/ our guidance and not obligatory for me/ us to invest in these schemes. The investment scheme(s) selected by me/ us is/ are based on my/ our independent judgment/ discretion with my/ our full knowledge of risks involved.
(Customer Signature)	For investment products not matching the established Risk Profile I/ We am/ are aware that investment product(s) detailed above deviates from my/ our recommended asset allocation as per my/ our risk profile. I/ We hereby confirm that I/ we am/ are making the present investments on my/ our free will and volition being cognizant of my/ our risk appetite and understand that these investments may not be aligned with the recommended asset allocation of the Bank. I/ we am/ are fully aware of the risk involved in the investment products.
(Customer Signature)	For Non-Resident Indians I/ We declare that I am/ We are Non-Resident Indian(s). I am/ we are opening this account on my/ our volition without any solicitation or inducement from the Bank. I/ We confirm that I/ we am/ are not residents and/ or citizens of United States of America or Canada. I/ We confirm that there is no prohibition or restriction in opening of this account under the law of my/ our country of residence. I am/ we are in full compliance under the applicable laws (including tax laws) of the country of my/ our residence. I/ We undertake to fulfill any reporting, fiscal and other duties that may arise in the country of my/ our domicile/ residence, arising in connection of this banking relationship. I/ We understand that this account shall be opened on the basis of statements/ declarations made by me/ us and if any of the statement/ declaration made herein is found to be incorrect in material particulars, then in addition to other remedies available to the Bank, the Bank shall not be liable to pay any interest on the deposit made by me/ us.

For Internal Use only:

Sourcing Code: ______________________ Lead Code: ______________________ Order No: ______________________

VUC Customers (Retired Individuals/ Person >= 70 years/ Students/ Homemakers): ☐ Yes ☐ No

If Yes, Supervisor Sign-Off: ____

Maker Name: ______________________ Maker Sign: ______________________ Checker Name: ______________________

Remarks (If Any): ______________________________________ Checker Sign: ______________________

Form for Fresh Nomination/ Change of Existing Nomination

Applicable for Individual Unitholders only – whether holding Units Singly or Jointly with other holders

Please read the instructions carefully before filling up this form

Name of 1st Holder: ____________________

Name of 2nd Holder: ____________________

Name of 3rd Holder: ____________________

I/ We, the above-named Unitholders of ____________________ Mutual Fund, do hereby nominate the person(s) more particularly described hereunder to receive the Units held my/ our Folio/s listed below in the event of my/ our death by cancelling the nomination(s) made by me/ us previously in respect of the units held by me/ us in the Folio/s listed below.

Folio No./ Application No.	
1	
2	
3	

Name of the 1st Nominee*: ____________________ % of Allocation*: __________

PAN of the Nominee$: ____________________ Date of Birth of Nominee** D D M M Y Y Y Y

Nominee Relationship*: ____________________

Name of the Guardian **: ____________________ PAN of Nominee Guardian$: ____________________

Guardian's Relationship with Nominee**: ☐ Mother ☐ Father ☐ Legal Guardian

Proof of Relationship$: ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Others

Address$: ____________________

City: __________ State: __________ PIN: __________

Nominee Signature$: ____________________

Name of the 2nd Nominee*: ____________________ % of Allocation*: __________

PAN of the Nominee$: ____________________ Date of Birth of Nominee** D D M M Y Y Y Y

Nominee Relationship*: ____________________

Name of the Guardian **: ____________________ PAN of Nominee Guardian$: ____________________

Guardian's Relationship with Nominee**: ☐ Mother ☐ Father ☐ Legal Guardian

Proof of Relationship$: ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Others

Address$: ____________________

City: __________ State: __________ PIN: __________

Nominee Signature$: ____________________

Name of the 3rd Nominee*: ____________________ % of Allocation*: __________

PAN of the Nominee$: ____________________ Date of Birth of Nominee** D D M M Y Y Y Y

Nominee Relationship*: ____________________

Name of the Guardian **: ____________________ PAN of Nominee Guardian$: ____________________

Guardian's Relationship with Nominee**: ☐ Mother ☐ Father ☐ Legal Guardian

Proof of Relationship$: ☐ Birth Certificate ☐ School Leaving Certificate ☐ Passport ☐ Others

Address$: ____________________

City: __________ State: __________ PIN: __________

Nominee Signature$: ____________________

Signature of the 1st unitholder ____________________

Signature of the 2nd unitholder ____________________

Signature of the 3rd unitholder ____________________

* Mandatory $ Optional **Mandatory & Applicable in case the Nominee is a Minor

Instructions

1. The nomination can be made only by individuals applying for/ holding units on their own behalf singly or jointly.
2. Non-individuals including a Society, Trust, Body Corporate, Partnership Firm, Karta of Hindu undivided family, a Power of Attorney holder and/ or Guardian of Minor unitholder cannot nominate.
3. Nomination is not allowed in a folio of a Minor unitholder.
4. If the units are held jointly (i.e., in case of multiple unitholders in the folio), all joint holders need to sign the Nomination Form (even if the mode of holding/ operation is on “Anyone or Survivor” basis).
5. A minor may be nominated. In that event, the name and address of the Guardian of the minor nominee needs to be provided.
6. Nomination can also be in favour of the Central Government, State Government, a local authority, any person designated by virtue of his office or a religious or charitable trust.
7. The Nominee shall not be a trust (other than a religious or charitable trust), society, body corporate, partnership firm, Karta of Hindu Undivided Family, or a Power of Attorney holder.
8. A Non-Resident Indian may be nominated subject to the applicable exchange control regulations.
9. Multiple Nominees: Nomination can be made in favour of multiple nominees, subject to a maximum of three nominees. In case of multiple nominees, the percentage of the allocation/ share should be in whole numbers without any decimals, adding upto a total of 100%. If the total percentage of allocation amongst multiple nominees does not add up to 100%, the nomination request shall be treated as invalid and rejected. If the percentage of allocation/ share for each of the nominee is not mentioned, the allocation/ claim settlement shall be made equally amongst all the nominees.
10. Every new nomination for a folio/ account shall overwrite the existing nomination, if any.
11. Nomination made by a unit holder shall be applicable for units held in all the schemes under the respective folio/ account.
12. Nomination shall stand rescinded upon the transfer of units.
13. Death of Nominee/s: In the event of the nominee(s) pre-deceasing the unitholder(s), the unitholder/s is/ are advised to make a fresh nomination soon after the demise of the nominee. The nomination will automatically stand cancelled in the event of the nominee(s) pre-deceasing the unitholder(s). In case of multiple nominations, if any of the nominee is deceased at the time of death claim settlement, the said nominee’s share will be distributed equally amongst the surviving nominees.
14. Transmission of units in favour of a Nominee shall be valid discharge by the asset management company/ Mutual Fund/ Trustees against the legal heir(s).
15. The nomination will be registered only when this form is completed in all respects to the satisfaction of the AMC.
16. In respect of folios/ accounts where the Nomination has been registered, the AMC will not entertain any request for transmission/ claim settlement from any person other than the registered nominee(s), unless so directed by any competent court.

Declaration Form for Opting Out of Nomination

Date | D | D | M | M | Y | Y | Y | Y |

To: ______________________________

Name of the Mutual Fund/ AMC:______________________________

Mutual Fund/ AMC/ Address: ______________________________

Mutual Fund Folio Number/ Application Number	
Sole/ First Holder Name	
Second Holder Name	
Third Holder Name	

Declaration and Signature

I/ We hereby confirm that I/ We do not wish to appoint any nominee(s) for my mutual fund units held in my/ our mutual fund folio and understand the issues involved in non-appointment of nominee(s) and further are aware that in case of death of all the account holder(s), my/ our legal heirs would need to submit all the requisite documents issued by Court or other such competent authority, based on the value of assets held in the mutual fund folio.

Name and Signature of Unitholder(s)

Unitholder (1) Signature: ______________________________ Name: ______________________________

Unitholder (2) Signature: ______________________________ Name: ______________________________

Unitholder (3) Signature: ______________________________ Name: ______________________________