COMMON APPLICATION FORM

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

PGIM INDIA

An Application for scheme

Drawn on (Bank)

Along with Cheque / DD No. / UTR No.

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 (\checkmark) whichever is applicable, strike out whichever is not required.



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 Ri	sk Class								
	lisk	R	elatively Low		Moderat			ely High					
	Rate Risk ↓		(Class A)		(Class E	3)	(Cla	ss C)					
Relative	ly Low (Class I)	DOM L. J.	A-I	DOIM La Partir	B-I			C-I					
		PGIM India	Overnight Fund	PGIM India Lic PGIM India Ulf	เนเด Fund ra Short Duration	Fund	NIL						
						(No. of Segregated Portfolio	1)*						
				PGIM India Mo	ney Market Fund								
Moderat	te (Class II)		A-II		B-II			C-II					
			NIL	• PGIM	India Short Durati	ion Fund		NIL					
Relative	ly High (Class III)		A-III		B-III			C-III					
		PGIM India			India Corporate B			Nil					
		PGIM India	Dynamic Bond Fund	• PGIM	India Banking and	d PSU Debt Fund							
Sr. No.	Name of the Schem	е	Type of the Scheme										
1	PGIM India Overnight	Fund	An open ended debt schem	e investing in overnig	ht securities. A relat	tively low interest rate risk a	nd relatively low credit r	sk scheme.					
2	PGIM India Liquid Fun		<u> </u>			noderate credit risk scheme							
3	PGIM India Ultra Short		An open ended ultra-short months. A relatively low int		•	s such that the Macaulay du heme.	ation of the portfolio is I	petween 3 months to 6					
4	PGIM India Low Durati Segregated Portfolio 1	,	An open ended low duratio months. A relatively low int			uch that the Macaulay duratheme.	ion of the portfolio is be	tween 6 months to 12					
5	PGIM India Money Mar		<u> </u>			A relatively low interest rate							
6	PGIM India Short Dura	tion Fund	An open ended short term of moderate interest rate risk			n that the Macaulay duration	of the portfolio is betwe	en 1 year to 3 years. A					
7 PGIM India Gilt Fund An open ended debt scheme investing in government securities across maturities. A relatively high interest rate risk and relativel scheme.													
8 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													
9	PGIM India Corporate	Bond Fund	An open ended debt schem credit risk scheme.	e predominantly inves	sting in AA+ and abo	ove rated corporate bonds. A	relatively high interest	ate risk and moderate					
10	PGIM India Banking &	PSU Debt Fund	An open ended debt scheme Municipal Bonds. A relative		•	ents of banks, Public Sector	Jndertakings, Public Fin	ancial Institutions and					
*The schen	ne has 1 segregated port	folio which was c	reated under PGIM India Cred				ed with PGIM India Low	Duration Fund w.e.f.					
January 22	, 2022												
1. DIST	RIBUTOR INFOR	MATION											
ARN (code	RIA code		ARN / RIA Name		Sub broker ARN code	Sub broker code **	EUIN*					
ARN - 98	471 RIA -					ARN -		E115901					
			ARN holder. Upfront commission	on shall be paid directly	by the investor to the	AMFI registered Distributors	pased on the investors' as	sessment of various factor					
eclaration fo	service rendered by the dis r "execution-only" transact	ion (only where El	JIN box is left blank). I/We here	eby confirm that the EUI	N box has been inten	tionally left blank by me/us as	this transaction is execute	d without any interaction					
dvice by the ne distributor	employee/relationship mai /sub broker.	nager/sales persor	n of the above distributor/sub b	roker or notwithstanding	the advice of in-appr	opriateness, if any, provided b	y the employee/relationsh	ip manager/sales person					
By mentioning	RIA code, I/We authorize	you to share my/o	our transactions data feed/portfo	olio holdings/ NAV detai	s under Direct Plan of	f scheme(s) managed by you	with the Investment Advise	rr.					
		ardian											
2. TRAI	NSACTION CHAR	GES FOR A	PPLICATIONS THRO	DUGH DISTRIBL	ITORS ONLY	(Please ✓ any one of t	he below) (refer instr	uction no. 2)					
☐ I confi	rm that I am a First tir	ne investor in N	Mutual Funds. OR	I confirm that I an	n an existing inves	stor in Mutual Funds.	Go	Green Initiative					
3. EXIS	TING FOLIO NUM	IBER			The details in ou	ur records under the folio numberside will apply for this applicati	er 🗆	Opt-in – Physical					
	E OF HOLDING		OR Anyone or Survivo	or OR \ Join	(Default option)	gside will apply for this applicati		Opt-out – Email					
					·		Ref	er instruction no. 12					
5. DEM	AT ACCOUNT DE		indly fill the below details	for allotment of un	its in demat mode								
Dana-! !		tional Securities De	epository Limited		Denesites: Dest.	Central Depository S	ervices (India) Limited						
	Participant Name		., .,		Depository Participa	ant mame							
DP ID	ID IN Beneficiary A/c No. Beneficiary A/c No.												
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ACKNO ¹	WLEDGMENT SLI	P (To be filled in	by the investor)			Application	No.						

Dated

Amount ₹

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THIRD APPLICA	ANT'S DETAILS			# Mandato
Name#				Gender# (please ✓) ☐ Male ☐ Fem
Date of Birth#	D D M M Y Y	Y Y	of of DOB (please ✓) ☐ Passp	ort Birth Certificate Other please specify
PAN#		CKYC / KIN		
Pincode (N	Mandatory) Phor	ne (Off.)		Mobile No.#
Phone (Res)		Email ID		
Status: (Please ✓)	Minor through guardian	NRI-Repatriation NRI-Non Repatriation Company FIIs Financial Institution NBFC		Trust
Occupation:		Public Sector Service Government Service Student Forex Dealer	Business Others (Please specify)	Professional Agriculturist Retired
Gross Annual Income:		I-5 Lacs 5-10 Lacs	10-25 Lacs	>25 Lacs-1 crore
^ PEP are defined as ir officers, senior executiv	ie I am Politically Exposed P ndividuals who are or have been entrus ves of state owned corporations, impor	erson (PEP)^	country, e.g., Heads of States or of Go	Not applicable vernments, senior politicians, senior Government/judicial/ militar
		(First investment cheque is optional) Lum		t
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ONE TIME M		CH / ECS / AUTO DEBIT / LUMP		
India Mutual F	Fund			
	UMRN Sponsor Bank Code	For office use	Utility Code	Date* D D M M Y Y Y Y
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Reference - 2			Email ID	
PERIOD* From D D To D D	of mandate processing charges by the	bank whom I am authorizing to debit my account	t as per latest schedule of charges of t X X Signature of second accounts	
OR Unti	il Cancelled	Name of first account holder*	Name of second account he	older* Name of third account holder*

- 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.
 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 were I have authorized the debit.

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For Non-Individual investors, please fill in UBO form along with FATCA / CRS annexure and attach along with Application form available on our website www.pgimindiamf.com

INSTRUCTIONS FOR ONE TIME MANDATE FORM

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.
- 3. 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.
- 4. 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.

- 6. Date and the validity of the mandate should be mentioned in DD/MM/YYYY format.
- 7. Utility Code of the Service Provider will be mentioned by PGIM India Mutual Fund
- 8. 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.
- 12. For the convenience of the investors the frequency of the mandate will be "As and When Presented"
- 13. Please affix the Names of customer/s and signature/s as well as seal of Company (where required) and sign the undertaking
- 14. PGIM India MF 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 investors.
- 15. For period selection investor has option to mention end date or select until cancelled, please note that if both the option are selected then the mandate would be rejected.

	nts a nominee for my / our investn	nents. I / We unde	erstand that in the event	of death of all unith	nits in Non-Demat Form) older(s) in the folio, the legal heirs for the unulatory requirements at the stage of initiation of
the transmission request.	accuments for transmitting the t	anito in lavour of ti	le legal fiell bacea off a	ppiloabio logal / logo	natory requirements at the stage of initiation of
Name of 1st Nominee :					
PAN**			Date of Birth*	M M Y Y	Y
Relationship with 1st holder: Father	☐ Mother ☐ Spo	use Son	Daughter	Others	(Please specify)
Proof of relationship : Birth Certif	icate Marriage Certificate	Passp	oort Others		(Please specify)
Address of Nominee (Please ✓) ☐ San	ne Address as is updated in the	folio Differe	ent Address. Please prov	vide details below:	
Address:					
City:		e:			PIN
% of Allocation ² : 100%	75% 50%			Others	(Please specify)
Guardian Information (To be mandatorily	provided if Nominee is below	18 years of age)		DAN of Consideration	
Name of Guardian : Guardian's Relationship with Nominee* :	Mother Father Le	gal Guardian		_ PAN of Guardian*	
·	Mountain Taution Log	gai Gaaraian			
Name of 2 nd Nominee :					
PAN**			Date of Birth*		Y
Relationship with 1st holder: Father	☐ Mother ☐ Spo	_	Daughter	Others	(Please specify)
<u> </u>	icate Marriage Certificate	Passp	_		(Please specify)
Address of Nominee (Please ✓) ☐ San	ne Address as is updated in the	folio Differe	ent Address. Please prov	vide details below:	
Address:					
City:	Stat	_			PIN
% of Allocation ² : 100%	<u></u>		25%	Others	(Please specify)
Guardian Information (To be mandatorily	provided if Nominee is below	18 years of age)		DAN of Consideration	
Name of Guardian : Guardian's Relationship with Nominee* :	Mother Father Le	gal Guardian		_ PAN of Guardian*	
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Name of 3 rd Nominee :			D ((D) + - -		
PAN**				M M Y Y Y	Y
Relationship with 1st holder: Father	☐ Mother ☐ Spo	_	Daughter	Others	(Please specify)
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% of Allocation ² : 100% Guardian Information (To be mandatorily			25%	Others	(Please specify)
Name of Guardian :	provided if Northinee is below	10 years or age)		_ PAN of Guardian*	
Guardian's Relationship with Nominee* :	Mother Father Leg	gal Guardian		_ 1711101 Gaardian	
* Mandatory if nominee is below 18 years of age (min-	or). Please also attach a copy of the	birth certificate / alter	rnate proof of date of birth o	of the nominee. ** PAN	of nominee must be mandatorily furnished if nomine
is above 18 years of age. ¹ Nomination details provide					
11. DECLARATION AND SIGNAT	URES				
		ents of the Statement	of Additional Information o	f PGIM India Mutual Fu	und and the Scheme Information Document(s)/Key
Information memorandum of the respective Schemerespective Scheme(s) of PGIM India Mutual Fund,	e(s) and Addenda thereto, issued fro	m time to time and th	e Instructions. I/We, hereby	apply to theTrustee of	PGIM India Mutual Fund for allotment of units of the
by any rebate or gifts, directly or indirectly in making	g this investment. I/We declare that	am/We are authoris	ed to make this investment	and the amount investe	ed in the Scheme is through legitimate sources only
and is not designed for the purpose of contravention. The ARN holder has disclosed to me/us all the com-	imissions (in the form of trail commis	sion or any other mo	de), payable to him for the o	different competing Sch	emes of various Mutual Funds from amongst which
the Scheme(s) is/are being recommended to me/us satisfaction of the AMC/PGIM India Mutual Fund, I/					
redemption. I/We agree that PGIM India Mutual Fui information in the self-certification changes. For in					
product/scheme/plan. Applicable to Micro Investe exceeding Rs. 50,000 in a year. Applicable to NRI	ors: I/We hereby declare that I/We of	do not have any exist	ing Micro investments whic	h together with the curr	rent application will result in aggregate investments
abroad through normal banking channels or from	funds in my/our Non-Resident Exte	rnal/Ordinary Accour	nt/FCNR Account(s). FATC	A and CRS Declaratio	on: I/We hereby acknowledge and confirm that the
information provided in this form is true and correct I/We shall be liable for it. I/We also undertake to ke	ep you informed in writing about any	changes/modification	on to the above information	in future and also unde	rtake to provide any other additional information as
may be required at your end. I/We hereby authoris as and when provided by me/us to Mutual Fund,					
authorities/agencies including but not limited to the		J-IND), the tax /rever	nue authorities and other in		
		SIGNATUF	RE(S)		
1st Applicant Signature / Guardian Signature	2 nd Applicant Signatu	ire	3 rd Applicant Si	gnature	POA Signature
Date D D M M Y Y Y Y	Place		_		