DECLARATION FORM FOR OPTING OUT OF NOMINATION

Arudha SIF
by Bandhan Mutual Fund

Bandhan AMC Limited
6th Floor, Tower 1C, One World Center, 841, Senapati Bapat Marg,
Prabhadevi (West), Mumbai - 400 013.

Date	D	D	M	M	Y	Y	Y	Y

Folio Number

Sole / First Holder Name First Name

Middle Name Surname

Second Holder Name First Name

Middle Name Surname

Third Holder Name First Name

Middle Name Surname

DECLARATION & SIGNATURE (S) (to be signed by all unit holders including joint holders, irrespective of mode of holding).

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

Signature:

First / Sole Applicant	Second Applicant	Third Applicant