



ASSOCIATION OF MUTUAL FUNDS IN INDIA

One Indiabulls centre, Tower 2, Wing B, 701, 7th Floor, 841, Senapati Bapat Marg,
Elphinstone Road, Mumbai – 400013

Form for providing the details to AMFI

Name of the Distributor	
ARN	
Tax status of the Distributor	
Address1	
Address2	
Address3	
City	
Pin code	
Telephone Number (Residence)	
Telephone Number (Office)	
Mobile Number:(1)	
Mobile Number:(2)	
Mobile Number:(3)	
Mobile Number:(4)	
Mobile Number:(5)	
Email Id(1)	
Email Id(2)	
Email Id(3)	
Email Id(4)	
Email Id(5)	
PAN	
ARN Valid From	
ARN valid till	
KYD complied status	
Bank Mandate (1): (Default)	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank Address3	
Bank City	
Bank State	
Bank Country	
Bank Pin code	
Bank Mandate (2) :	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank Address3	

Bank City	
Bank State	
Bank Country	
Bank Pin code	
Bank Mandate (3) :	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank Address3	
Bank City	
Bank State	
Bank Country	
Bank Pin code	
Bank Mandate (4) :	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank Address3	
Bank City	
Bank State	
Bank Country	
Bank Pin code	
Bank Mandate(5) :	
Bank Name	
Branch Name	
Ac Type	
Ac No	
IFSC Code	
ECS No	
Bank Address1	
Bank Address2	
Bank Address3	
Bank City	
Bank State	
Bank Country	
Bank Pin code	
Note: 1. Please provide proof of address if the same is different from the one already registered	
Note 2. Please provide a cancelled cheque for the accounts mentioned above.	

Signature

Date:

For corporate distributors the above data should be provided by the authorized signatory along with the official stamp.