

Application for approval of mutual funds investing in the eligible issue of public companies under Paragraph 1(z)(ii) of Schedule XV to the Act

Part – A				
1.	Details of mutual fund			
	(i)	Name		(refer note 1)
	(ii)	Address		(refer note 2)
	(iii)	Permanent Account Number		
2.	Tax year			
Part – B				
3.	Details of the trustees of the fund			
	A.	(i)	Names	(refer note 1)
		(ii)	Address	(refer note 2)
		(iii)	Professional experience	
		(iv)	Other important details	
	B.	(Repeat, if required)		
4.	Objects of the fund			
	(i)	Main Objects		
	(ii)	Ancillary objects		
5.	Whether registered with SEBI:			(i) Yes (ii) No (select one)
	(i)	If yes, Date of order		dd/mm/yyyy
	(ii)	Order Number		(refer note 3)
6.	Whether notified under Schedule VII (Table: Sl. No. 20 or 21) of the Act:			(i) Yes (ii) No (select one)
	(i)	If yes, Date of order		
	(ii)	Order Number		(refer note 3)
7.	Details of the custodians			
8.	Details of the Asset Management Company:			
9.	Details of various schemes launched so far.			
10.	A	(i)	Name of the Banker	(refer note 1)
		(ii)	Address of the Banker	(refer note 2)
	B	(Repeat, if required)		

11.	A	(i)	Name of the Auditor	<i>(refer note 1)</i>
		(ii)	Address of the Auditor	<i>(refer note 2)</i>
		(iii)	Membership number	
	B	<i>(Repeat, if required)</i>		
Part – C				
12.	Details of the proposed scheme to be launched for purposes of Paragraph 1(z)(ii) of Schedule XV to the Act			
	(i)	Number of units		
	(ii)	Face value (Net Asset Value)		
	(iii)	Total amount to be mobilised		
	(iv)	Other important details		
13.	Details of the public company in whose public issue subscription is proposed to be made			
	(i)	Name of the public company		<i>(refer note 1)</i>
	(ii)	Address		<i>(refer note 2)</i>
	(iii)	Permanent Account Number		
	(iv)	Company Identification Number		
	(v)	Details of the issue		
	(vi)	Date of approval of the board for the public issue		<i>dd/mm/yyyy</i>
	(vii)	Order number		<i>(refer note 3)</i>
14.	Other details to be provided as separate enclosure:			<i>(Attach as per note 4)</i>
Verification				
I, _____, certify that the information furnished above is true to the best of my knowledge and belief.				
<i>(Signatures of the authorised signatory)</i>				

Note:

- In case of individual, the first, middle and last name shall be provided in full without any abbreviations. In any other case also, the name shall be provided in full.
- The address shall contain (i) Country/Region, (ii) Flat/Door/Building, (iii) Road/Street/ Block/Sector, (iv) PIN/ZIP Code, (v) Post Office, (vi) Area/locality, (vii) District and (viii) State.
- The relevant order number shall be the reference number of the registration or notification or approval, as the case may be.
- With respect to (row No. 16), following details shall be provided as annexures, namely:–

Annexure	Particulars
A-1	A copy of the Mutual Fund Deed as per row No. 4
A-2	A copy of the SEBI's order as per row No. 5
A-3	A copy of the notification as per row No. 6

A-4	A copy of the custodian agreement for the mutual fund as per row No. 7
A-5	Details of Asset Management company such as names of directors with their experience, qualifications and profession, and whether related to the trustees as per row No. 8
A-6	A copy of the audited balance sheet of the Asset Management Company for the last 3 years as per row No. 8
A-7	Plan-wise details of various schemes launched so far and the application of their proceeds as per row No. 9
A-8	A copy of the audited balance sheet for the last three years as per row No. 9
A-9	A copy of the approval by SEBI as per row No. 12
A-10	A copy of the approval of the public issue by the Board as per row No. 13

5. Some of the information in the form would be pre-filled to the extent possible.