

## Form for Aadhaar seeding for Authorized Signatories

То
Sundaram BNP Paribas Fund Services Limited
Name of the Non-Individual  PAN:
I/We,, Company Secretary / Competent Authority (to issue this certification on behalf of the organization) hereby confirm thatenclosed lie of personnel covers all authorized signatories_(associated with MF investments and allied activities) on behalf our organization. These signatories have consented for sharing the information with Sundaram BNP Paribas Fund Services Limited / participating MFs by signing the enclosed form and also for validating the same with UIDAI wherever warranted.
I hereby provide my consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (iii) updating my Aadhaar number in accordance with the Aadhaar Act, 2016 (and regulations made there under) and PMLA. I / We hereby provide my / our consent for sharing / disclose of the Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer (RTA) for the purpose of updating the same in my folio/s with my PAN.
Regards
For < Name of the Non-Individual)
<signature &="" (name="" authority="" company="" competent="" of="" seal)="" secretary="" sign="" stamp="" with=""></signature>
Enclosed: List of Authorized Signatories along with their Aadhaar

 1	SUNDARAM BNP PARIBAS
	FUND SERVICES

nnex AN	ure		- List of Author	rized Signatories:		
S. No.	Name of the Authorized Signatory (AS)#	Date of Birth (as per Aadhaar Card)#	Gender (M-Male, F-Female & T-Transgender)	PAN of AS#	Aadhaar of AS#	Signature (Consent for sharing Aadhaar information authentication with UIDAI and sharing with MFs/RTAs)
	/here Aadhaar Number in fav our of authoris horised person is not eligible to be enrolled				dhaar	'