



ICICI Prudential Target Returns Fund

(An Open Ended Diversified Equity Fund. There is no guarantee or assurance of returns)
(New Fund Offer from ICICI Prudential Mutual Fund)

Application Form (for Resident Indians and NRIs/PIOs)

(Please read the instructions before completing the application form)	ARN- 25682 <small>ARN - Broker Code</small>	<small>Sub-Broker Code</small>	<small>Bank Serial No.</small>	<small>Date & Time of Receipt</small>
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New Fund Offer Opens On
April 15, 2009
New Fund Offer Closes On
May 14, 2009

1 FOR EXISTING UNITHOLDERS

If you have an existing folio with PAN validation & KYC validation (if applicable), please mention the folio number in the space provided and proceed to Step 5. Please note that the applicable details and mode of holding will be as per the existing folio.

Folio No.

Date: _____

Application No.

2 ABOUT YOU

Name of First Applicant

Mr. Ms. M/s.

Date of Birth (Mandatory)

Name of Guardian (in case of minor) / Contact Person (In case of non-individual investors)

Mr. Ms.

Status [Please tick (✓)]

- | | |
|--------------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Minor | <input type="checkbox"/> Trust |
| <input type="checkbox"/> NRI/PIO* | <input type="checkbox"/> Bank/FI |
| <input type="checkbox"/> Resident Individual | <input type="checkbox"/> AOP/Bol |
| <input type="checkbox"/> HUF | <input type="checkbox"/> Club/Society |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Company |
| <input type="checkbox"/> Partnership Firm | |
| <input type="checkbox"/> Others (Please specify) _____ | |

Designation of the Contact Person (In case of non-individual investors)

Mailing Address (Please provide full address) (Mandatory)

	<input style="width: 100%;" type="text"/>				
City	<input style="width: 100%;" type="text"/>	PIN (Mandatory)	<input style="width: 100%;" type="text"/>	Country	<input style="width: 100%;" type="text"/>
State	<input style="width: 100%;" type="text"/>				

*NRIs/PIOs applications to be submitted ONLY at any of the designated ICICI Bank, Citibank, HDFC Bank Collection Centres or at AMC branches.

Communication

Tel. <input style="width: 100%;" type="text"/>	Tel. (Off.) <input style="width: 100%;" type="text"/>	Mobile <input style="width: 100%;" type="text"/>
E-Mail <input style="width: 100%;" type="text"/>		

Overseas Address (in case of NRIs/FIIs)

	<input style="width: 100%;" type="text"/>			
City	<input style="width: 100%;" type="text"/>	ZIP/PIN (Mandatory)	<input style="width: 100%;" type="text"/>	Country (Mandatory)
State	<input style="width: 100%;" type="text"/>			

Name of Second Applicant

Mr. Ms.

Mode of holding [Please tick (✓)]

- | | |
|----------------------------------------------------------------------------------------------------|--------------------------------|
| <input type="checkbox"/> Single | <input type="checkbox"/> Joint |
| <input type="checkbox"/> Anyone or Survivor
<small>(Default option: Anyone or Survivor)</small> | |

Name of Third Applicant

Mr. Ms.

Permanent Account Number (PAN) - Mandatory <small>(Please submit a copy of PAN card. In case the 1st applicant is minor, please provide Guardian's PAN. Refer to Instruction No. II-b(4) }</small>	Know Your Customer (KYC) <small>(Please refer to instruction no. IX) (Mandatory for investment of Rs.50,000 & above)</small>
1st Applicant <input style="width: 100%;" type="text"/>	Copy of KYC acknowledgement enclosed <input type="checkbox"/>
Guardian (in case 1st applicant is minor)/POA <input style="width: 100%;" type="text"/>	Copy of KYC acknowledgement enclosed <input type="checkbox"/>
2nd Applicant <input style="width: 100%;" type="text"/>	Copy of KYC acknowledgement enclosed <input type="checkbox"/>
3rd Applicant <input style="width: 100%;" type="text"/>	Copy of KYC acknowledgement enclosed <input type="checkbox"/>

Occupation [Please tick (✓)]

- | | |
|--------------------------------------------------------|------------------------------------|
| <input type="checkbox"/> Professional | <input type="checkbox"/> Housewife |
| <input type="checkbox"/> Business | <input type="checkbox"/> Service |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Student |
| <input type="checkbox"/> Others (Please specify) _____ | |

3 E-MAIL COMMUNICATION – We wish to receive the following via e-mail instead of physical document:

Account Statement
 Quarterly Review & Annual Report
 Other statutory information

ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Received from: Mr./Ms./M/s.

Address

Application No.

Signature, Stamp & Date

4 BANK ACCOUNT DETAILS OF FIRST APPLICANT (Refer instruction No.III)

MANDATORY

Bank Particulars (Name of the Bank) _____

Branch Address _____ City _____

Account Number _____ Account Type Current Savings NRO NRE

9 Digit MICR code _____ IFSC Code (11 digit) _____

If "Mandatory Details" are not provided, your application is liable to be rejected.

(a) Please quote **9 Digit Code No.** of your Bank and Branch corresponding to Bank Account details. (This number appears on every leaf of your cheque book after your cheque number). (b) Please attach a **blank "cancelled" Cheque or a clear photocopy of a cheque** issued by your bank verifying of the Code No. (c) The AMC reserves the right to make dividend payments through ECS where MICR code is available.

5 YOUR INVESTMENT DETAILS

Retail Option: In case, the investor has not selected the sub-option for his investments or selected multiple sub-options, the default sub-option will be Dividend Reinvestment.

Institutional Option I : Please use a separate application form available on the website www.icicpruamc.com.

Scheme Name: **ICICI PRUDENTIAL TARGET RETURNS FUND** (There is no guarantee or assurance of returns)

Retail Option

Growth Sub-option Dividend Payout Dividend Reinvestment

Dividend Sub-option _____

TRIGGER (Please) (Trigger can be done only from Growth Sub-option)

Trigger choice: (Tick NAV Appreciation): 12% 20% 50% 100%

Switch: Appreciation amount only All units

For the list of eligible Schemes, Options & Sub-options please refer to the instruction No.IV (d)

- ICICI Prudential Liquid Plan ICICI Prudential Short Term Plan
- ICICI Prudential Floating Rate Plan – ICICI Prudential Income Plan
- Plan A Plan B

AMOUNT INVESTED AND PAYMENT DETAILS

Amount Paid (A) Rs. _____ DD Charges (B) Rs. _____ Amount Invested (C) = (A) + (B) Rs. _____

Bank Name & Branch _____

City _____ Cheque/DD No. _____ Cheque/DD Date _____ Account Type (For NRI Investors) NRO NRE FCNR

Sub-options (Please tick)

Growth/Cumulative Growth AEP' (Appreciation & Regular)

Dividend Pay-out Dividend Reinvestment

Trigger at 20% with appreciation in NAV and switch into ICICI Prudential Liquid Plan - Growth Option will be the default options under trigger option. Please refer to the instruction for details on Trigger option.

* Cumulative - AEP Regular option: Encashment of units is subject to declaration of dividend into respective scheme(s).

6 NOMINATION DETAILS (Optional) • For single nomination, please fill in the details below. • For multiple nominations, please use the nomination form overleaf.

I/We hereby nominate the undermentioned Nominee to receive the amounts to my/our credit in event of my/our death. I/We also understand that all payments and settlements made to such Nominee and signature of the Nominee acknowledging receipt thereof, shall be a valid discharge by the AMC/Mutual Fund/Trustees.

Name of the Nominee _____ **Date of Birth** (if nominee is minor) (Mandatory) _____

Mr. Ms. M/s. _____

Address of Nominee (Please provide full address) _____

_____ PIN Code _____

Name of the Guardian (if nominee is minor) - Mandatory _____ **Relationship with minor** _____

Address of Guardian _____ **Signature of Guardian** _____

_____ PIN Code _____

7 YOUR CONFIRMATION

To the Trustee, ICICI Prudential Mutual Fund – I/We have read and understood the Offer Document/Key Information Memorandum of ICICI Prudential Target Returns Fund (There is no guarantee or assurance of returns). I/We apply for the units of ICICI Prudential Target Returns Fund (An Open Ended Diversified Equity Fund). There is no guarantee or assurance of returns) and I/We agree to abide by the terms, conditions, rules and regulations of the scheme. I/We confirm to have understood the terms & conditions, investment objectives, investment pattern, fundamental objectives and risk factors applicable to the Scheme. I/We have understood the details of the scheme and I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We agree to abide by the terms, conditions, rules, regulations and other statutory requirements of SEBI, AMFI, Prevention of Money Laundering Act, 2002 and such other regulations as may be applicable from time to time. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I/We agree that in case my/our investment in the Scheme is equal to or more than 25% of the corpus of the Scheme, then ICICI Prudential Asset Management Co. Ltd., Investment Manager to the Scheme, has full right to refund the excess to me/us to bring my/our investment below 25%. I/We interested in receiving promotional material from ICICI Prudential AMC Ltd. via mail, SMS, telecall, etc. If you do not wish to receive, please call on tollfree no. 1800 222 999 (MTNL/BSNL) or 1800 200 6666 (Others)

SIGNATURE(S)

First Applicant _____

Second Applicant _____

Third Applicant _____

Please ensure that the following details are complete and accurate, in the absence of which the application will be rejected & refunded.

1. First applicant's Bank name.
 2. First applicant's Bank account number.
 3. Cheque/DD date should be on or before the NFO closure date.
 4. PAN details and copy of PAN for all the holders.
 5. KYC acknowledgement for all the holders, if applicable.
 6. Application amount should be equal to or greater than the minimum subscription amount.
- The above mentioned cases are not an exhaustive list of situations in which the rejection could happen.

Application for Units of **ICICI Prudential Target Returns Fund** (An Open Ended Diversified Equity Fund. There is no guarantee or assurance of returns)

Option _____ **Retail Option**

Sub-Options (Please tick) Growth Sub-option Dividend Payout Dividend Reinvestment

Application Amount Rs. _____ Cheque/DD No. _____ Dated _____

drawn on _____ branch _____

TRIGGER NAV Appreciation: 12% 20% 50% 100% Scheme (in which you wish to switch): Scheme, Option & Sub-option: _____

