



APPLICATION FORM FOR ZOOM INVESTMENT PAC (ZIP) Z

Investors must read the guidelines to ZIP & instructions before completing this form.

TO BE FILLED IN CAPITAL LETTERS. Please read the instructions carefully, before filling up the application form. All Columns marked * are mandatory.

1. AGENT INFORMATION		2. EXISTING UNIT HOLDER INFORMATION	OFFICE USE ONLY
Broker Code / Name (AMFI registered members only) ARN No.11295	Sub Broker Code	Folio No.	Receipt Date / Time

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

3. UNIT HOLDER INFORMATION (Please fill in BLOCK Letters)

Name of First / Sole Applicant* Mr. Ms. M/s. Date of Birth _____

_____ F I R S T N A M E _____ L A S T N A M E _____ D | D | M | M | Y | Y | Y | Y |

Contact Person (In case of non-individual Investors) / Name of Guardian (In case of minor) Mr. Ms. Date of Birth _____

_____ F I R S T N A M E _____ L A S T N A M E _____ D | D | M | M | Y | Y | Y | Y |

Mailing Address of First/Sole Applicant* _____

_____ PIN CODE* _____

PAN No.* _____ Enclosed (✓) Attested PAN Card KYC Acknowledgement attached (Applicable in respect of investments of Rs. 50,000 and above) Nationality* _____

Telephone* _____ Residence _____ Office _____ Fax _____

_____ Mobile _____ Email _____

I wish to receive updates via sms on my mobile. (Please ✓) Physical Communication Email Communication (Please ✓) Frequency Daily Weekly Monthly

If the option is not given specifically by the unit holder, the AMC will send the account statement, annual report & other communication by email, if the email address is given by the unit holder in the application form. In case the investor wants to receive the Account Statement in physical copy please tick at the appropriate place in the application form. On request, the AMC will change the mode of sending the account statement. The frequency mentioned above is applicable only for email account statements.

Name of the Second Applicant Mr. Ms. M/s. _____

_____ F I R S T N A M E _____

_____ L A S T N A M E _____

PAN No.* _____ Date of Birth _____

_____ D | D | M | M | Y | Y | Y | Y |

Enclosed (✓) Attested PAN Card KYC Acknowledgement attached (Applicable in respect of investments of Rs. 50,000 and above)

Name of the Third Applicant Mr. Ms. M/s. _____

_____ F I R S T N A M E _____

_____ L A S T N A M E _____

PAN No.* _____ Date of Birth _____

_____ D | D | M | M | Y | Y | Y | Y |

Enclosed (✓) Attested PAN Card KYC Acknowledgement attached (Applicable in respect of investments of Rs. 50,000 and above)

POA Holder Details Mr. Ms. M/s. _____

_____ F I R S T N A M E _____ L A S T N A M E _____

PAN No.* _____ Enclosed (✓) Attested PAN Card KYC Acknowledgement attached (Applicable in respect of investments of Rs. 50,000 and above)

Overseas Address* (Mandatory in case of NRI and FII applicant in addition to mailing address.) _____

City _____ Country _____ Zip Code _____ Contact No. _____

4. STATUS OF SOLE/FIRST APPLICANT (Please ✓) (In Rs.)

Mode of holding** (Please ✓)	Status of first applicant (Please ✓) (Mandatory)	<input type="checkbox"/> Society/Club	<input type="checkbox"/> NRI Repatriable (NRE)
<input type="checkbox"/> Single <input type="checkbox"/> Joint	<input type="checkbox"/> Resident Individual	<input type="checkbox"/> HUF	<input type="checkbox"/> Trust
<input type="checkbox"/> Anyone or Survivor	<input type="checkbox"/> Partnership Firm	<input type="checkbox"/> Bank / Financial Institution	<input type="checkbox"/> Others _____
	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Company	
		<input type="checkbox"/> NRI Non-Repatriable (NRO)	
		<input type="checkbox"/> On behalf of minor	

** In case of more than one applicant, if choice is not indicated the mode of holding will be treated as joint.

Occupation (of sole / First Applicant) (Please ✓) (Mandatory)

<input type="checkbox"/> Bureaucrat	<input type="checkbox"/> Doctor	<input type="checkbox"/> Lawyer	<input type="checkbox"/> Teacher	<input type="checkbox"/> MNC Employee	<input type="checkbox"/> Agriculture/Fishery
<input type="checkbox"/> Telecommunication	<input type="checkbox"/> Banking/Financial Institution	<input type="checkbox"/> Housewife	<input type="checkbox"/> Jeweller	<input type="checkbox"/> Student	<input type="checkbox"/> Retired
<input type="checkbox"/> Indian Private Company Employee	<input type="checkbox"/> PSU/Govt. Employee	<input type="checkbox"/> Scientist	<input type="checkbox"/> Money Service Bureau	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Politically Exposed Person
<input type="checkbox"/> Dealers in high value commodities (Arms, Bullion, Jewellery etc.)	<input type="checkbox"/> Military Official	<input type="checkbox"/> Other Business	<input type="checkbox"/> Other Professional	<input type="checkbox"/> Other Service _____ please specify	

5. BANK ACCOUNT DETAILS (Please note that, as per SEBI Regulations it is mandatory for investors to provide bank account details)

Name of the Bank	Branch	City
Account No.	Branch Address	
Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> FCNR	MICR Code	
RTGS Code	NEFT Code	



ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Type of Investment (Please tick one option): Fresh Investment Existing Investment

Received from Mr./Ms./M/s. _____ Address _____

_____ an application of amount of Rs. _____ (in figures)

_____ (in words) for purchase/switch in of units in ING Liquid Fund (Regular Plan - Growth Option) under Zoom Investment Pac (ZIP) the details of which are as given below: (For Fresh Investments, please fill in all details as given below.)

Switch in to ING Liquid Fund (Regular Plan - Growth Option)	Switch / Cheque Amount	Cheque / DD No	Cheque / DD Date	Bank	Branch
From Scheme:					
Option:					

Please Note: All Purchases are subject to realisation of cheque(s)/demand draft(s).

ZIP TRANSFER DETAILS

Folio No.	Total Amount to be transferred (Rs.)	Daily Transfer Amount (Rs.)	Scheme to be Transferred to	Official Collection Centre Date & Stamp

6. INVESTMENT DETAILS: Regular Investments (Third party cheques not allowed)

The Cheque/DD should be drawn favouring "ING Liquid Fund"

Cheque/DD No. _____ Cheque/DD Date _____ Account Type SB CA NRE NRO FCNR

DD Amount Rs. a) _____ DD charges Rs. b) _____ Net Amount Invested Rs. (c) (a-b=c): _____

(Words) _____ Drawn on Bank _____ Branch _____

I/We undertake that the detail of the payment instrument mentioned above pertain to my/our own bank account in my/our name and is not a third party cheque except guardian in case of minor. The AMC reserves the right to reject the application in case of third party cheque. Cheque to be drawn in favour of the scheme / plan applied for.

8. SWITCH REQUEST TO ING LIQUID FUND (Regular Plan - Growth Option)

From Scheme: _____ Plan _____ Option: _____

Amount (Rs. in figures): _____ Amount (Rs. in words): _____

Units _____ All units

9. ZOOM INVESTMENT PAC (ZIP) (Please fill a separate application form to register individual ZIP transactions)

Total investment amount to be transferred from ING Liquid Fund (Regular Plan-Growth Option):

In Figures: Rs. In Words: Rs.

To Scheme (Please tick only one scheme from alongside)	<input type="checkbox"/> ING Core Equity Fund	<input type="checkbox"/> ING Balanced Fund	<input type="checkbox"/> ING Gilt Fund - Regular	<input type="checkbox"/> ING OptiMix 5 Star Multi-Manager FoF Scheme
	<input type="checkbox"/> ING Tax Savings Fund*	<input type="checkbox"/> ING Midcap Fund	<input type="checkbox"/> ING Income Fund	<input type="checkbox"/> ING OptiMix Multi Manager Equity Fund
	<input type="checkbox"/> ING Domestic Opportunities Fund	<input type="checkbox"/> ING Dividend Yield Fund	<input type="checkbox"/> ING Short Term Income Fund	<input type="checkbox"/> ING OptiMix Asset Allocator Multi-Manager FoF Scheme
	<input type="checkbox"/> ING Nifty Plus Fund	<input type="checkbox"/> ING Contra Fund		

Choice of Option for "To Scheme"

Growth* Dividend

In case of "Dividend Option" please tick any one

Dividend Reinvestment* Dividend Payout

*Daily Transfer Amount (Rs.) in "To Scheme"

99 199 499 999* 1999 4999 Other** _____

Other than ING Tax Savings Fund

**Please note: You may specify any other amount to be transferred daily such that the minimum transfer amount cannot be below Rs. 99/-.

*Daily Transfer Amount (Rs.) In ING Tax Savings Fund

500 1000 1500 2000 Other*** _____

***Please note: You may specify any other amount to be transferred daily such that the minimum transfer amount cannot be below Rs. 500/- and has to be in multiples of Rs.500/- thereafter. *Default

10. E-MAIL COMMUNICATION (Please ✓)

a) I/We wish to receive the Account Statement via e-mail instead of physical document: Yes No

b) If yes, please specify the frequency: Daily Weekly Monthly

Please note e-statements will be send to the ID provided under the first / sole applicants information.

In case no e-mail id is mentioned, ING Investment Management (India) Pvt. Ltd. would be dispatching the Accounts Statement as mandated in the SEBI regulations. It is the responsibility of the investor to inform the AMC in case of change in e-mail id. Non-receipt of e-mails due to such change or technical reason is not the liability of the AMC.

11. NOMINATION DETAILS (For nomination facility please refer alongside)

12. DECLARATIONS & SIGNATURE(S)

I/We have read and understood the contents of the offer document(s) of the respective scheme(s) of ING Mutual Fund. I/We hereby apply for allotment/purchase of units in the 'To Scheme' (as defined in the 'ZIP' form) indicated as above and agree to abide by the terms and conditions applicable thereto. I/We here declare that I/We are authorised to make this investment in the above mentioned 'To Scheme' and this transfer does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the Provisions of Income Tax Act, Anti Money Laundering Act, Anti Corruption Act or any other applicable laws enacted by the Government of India from time to time. 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 hereby agree to provide the AMC with necessary additional proofs/documents that may be required for the purpose of compliance with Prevention of Money Laundering Act. *Applicable to NRIs only: I/We confirm that I am/We are Non-resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from my/our Non-resident External / Ordinary Account/FCNR/NRSR Account. I/We hereby declare that I /We am / are authorised to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. Further I/We are declare that, I/We are not involved in any high risk occupation. In case of non-individual(s), I/We here by confirm that the ultimate beneficial owner (holding >25% of the shares/voting rights) are not linked to any sanction/high risk countries and are not involved in any money laundering /terrorist financing activity.

First / Sole Applicant/ Guardian/ POA	
Second Applicant/ POA	
Third Applicant/ POA	
Date: _____	

Applications from investors residing in USA, Canada, Cuba, Syria, North Korea, Iran, Myanmar and Sudan shall be rejected.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

Guidelines to Filling the ZIP Application Form

Investment in ZIP should be done by filling a ZIP application form. This form has to be used for effecting a ZIP transfer either through an existing folio (including switch) or for putting in a fresh investment. The form should be submitted to any of the ING offices / CAMS ISCs and TPs. The cut-off time for the application would be as per the offer document of the respective schemes.

After submission of the forms the acknowledged slip will be handed over to the investor over the counter only where complete details are mentioned.

Please consider the following points before filling the Application Form:

1. The investment should be made only in ING Liquid Fund (Regular Plan – Growth Option). Minimum investment amount is Rs. 5,000/-
2. The form can be used to switch existing investment (from any scheme) to ING Liquid Fund. The switch has to be in amount only and not units.
3. If the ‘To Scheme’ is not selected then the default scheme would be ING Nifty Plus Fund.
4. In the ‘To Scheme’ if no investment option is ticked, default option will be ‘Growth Option’.
5. If no dividend option type is selected, default option will be ‘Reinvestment’.
6. The amount would be transferred to ‘To Scheme’ as per the trigger amount. If no amount is selected then the default trigger would be Rs. 999/-.
7. The daily transfer amount cannot be changed at a later date.
8. The first ZIP transaction will begin on the 5th business day from the date of investment made in ING Liquid Fund based on the clear funds available and units allotted in ING Liquid Fund.
9. The daily transfers will be effected only on business days.
10. The daily transfer will be processed on the basis of amount and not on units.
11. If the residual amount in ‘From Scheme’ is less than the daily transfer amount mentioned in the application form, then the residual amount will be transferred with the last ZIP installment.
12. If the total investment amount in the ‘ING Liquid Fund’ is lesser than the amount to be utilized for daily transfers (as mentioned in the application form) to any equity schemes, then the investment will continue to remain in ING Liquid Fund and the said daily transfer will not be effected.
13. If the total investment amount to be transferred is not mentioned then the entire invested amount in ING Liquid Fund will be transferred.
14. Termination on the ZIP transfer, if any, requested by the investor will be effective from the 7th business day from the date of submission of the request.
15. There will be no separate ZIP number. Instead regular folio number will be generated and should be used for any future references.
16. While choosing any daily transfer amount, please note it cannot be less than Rs.99/-.
17. Any fresh or existing investment for ZIP transfer should be submitted with a separate ZIP instruction. Only after completion of ZIP transfer cycle investor can submit additional purchase in ING Liquid Fund else AMC is liable to reject the purchase transaction.
18. Every ZIP registration form has to be accompanied with a unit purchase request for ING Liquid Fund.
19. In case of exceptional holiday, (apart from declared holidays) 2 ZIP transaction will be processed on the next business day in the ‘To Scheme’.
20. If redemption is put for all units or entire amount in ING Liquid Fund during the ZIP transfer then the ZIP would cease off after units are redeemed.
21. If partial redemption is placed in ING Liquid Fund then only the balance amount left would be transferred as ZIP.
22. The minimum holding in ‘To Scheme’ shall be Rs. 99/-
23. Entry and exit load structure in ZIP will be applicable as per the scheme structure.

Dispatch of Account Statement

1. 1st account statement dispatch will be undertaken within 10 business days from the date of investment along with a ZIP registration letter. The same would have two account statements. One for initial investment in liquid fund and the second for the first transfer to any of the chosen equity scheme.
2. The next statement will be sent only at the end of each calendar quarter.
3. A soft copy would be sent to the investor on the frequency as specified by the investor under the header ‘Email Communication’ in the application form.
4. An account statement will also be sent at the end of all the ZIP installments or termination (if termination is requested by the investor), whichever falls early.
5. An intimation letter informing the investor about the completion of ZIP on the folio along with a ZIP application form for fresh investment would be sent 7 business days in advance of the closure of the ZIP transaction.
6. As per the investor’s request for an account statement, he will be sent a physical copy of the account statement and/or a soft copy of the account statement if the email id is provided.