

# Transaction Form For STP & SWP



Please refer to the general instructions for assistance and complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink.

Time Stamp

Distributor/RIA Code	Sub-Distributor ARN	Sub-Distributor Code	EUIN	Branch Code
24952			E347831	

Initial Commission will be paid by the investor directly to the distributor, based on assessment of various factors including the service rendered by the Distributor.

Transaction Charges: SEBI (Mutual Fund) Regulations allow deduction of transaction charges of Rs. 100/- from your investment for payment to your distributor if your distributor has opted to receive transaction charges for investments sourced by him. The transaction charges deductible are Rs. 150/- if you are investing in Mutual Funds for the first time. If you are making a SIP Investment, the transaction charges would be deducted over 3-4 instalments. No transaction charges would be levied if you are not investing through a Distributor or your investment amount is less than Rs.10,000/-. If this is the first time, you are investing in any mutual fund, please tick here

Investor's Declaration where EUIN is not furnished: I/We confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor and/or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of distributor and the distributor has not charged any advisory fees on this transaction.

Sole/1st Applicant  2nd Applicant  3rd Applicant

## 1. APPLICANT INFORMATION

Name of Sole/1st Unit Holder: First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_ Folio No. \_\_\_\_\_

PAN/PEKRN\*\* \_\_\_\_\_ First Unit Holder \_\_\_\_\_ Second Unit Holder \_\_\_\_\_ Third Unit Holder \_\_\_\_\_

Aadhaar No. \_\_\_\_\_ First Unit Holder \_\_\_\_\_ Second Unit Holder \_\_\_\_\_ Third Unit Holder \_\_\_\_\_

KIN\* \_\_\_\_\_ First Unit Holder \_\_\_\_\_ Second Unit Holder \_\_\_\_\_ Third Unit Holder \_\_\_\_\_

Date of Birth\* (1st Unit Holder) [D][D][M][M][Y][Y][Y][Y] Date of Birth\* (2nd Unit Holder) [D][D][M][M][Y][Y][Y][Y] Date of Birth\* (3rd Unit Holder) [D][D][M][M][Y][Y][Y][Y]

Mobile No. +91- \_\_\_\_\_ E-mail ID \_\_\_\_\_

KYC is mandatory. Please enclose copies of KYC acknowledgement letters for all applicants. \*\*PEKRN required for Micro investments upto Rs. 50,000 in a year.  
 ^ 14 digit KYC Identification Number (KIN) and Date of Birth is mandatory for Individual(s) who has registered under Central KYC Records Registry (CKYCR).

## 2. SYSTEMATIC WITHDRAWAL PLAN (SWP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000

Scheme Name L&T \_\_\_\_\_ Option (✓)  Growth  Dividend Payout  Dividend Reinvestment  Bonus^

Dividend Frequency (✓ wherever applicable)  Daily  Weekly  Monthly\*  Quarterly  Annual^  Semi-Annual^

Withdrawal preference (✓)  Amount (₹) \_\_\_\_\_ OR  Capital Appreciation (Available for GROWTH plan only)

Withdrawal frequency (✓)  Monthly\*  Quarterly  Semi-Annual  Annual

Withdrawal date (✓)  1st  5th  10th\*  15th  20th  25th  28th Withdrawal period From [M][M][Y][Y][Y][Y] To [M][M][Y][Y][Y][Y] OR  Till balance

^Available in select schemes only

## 3. SYSTEMATIC TRANSFER PLAN (STP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000

Scheme Name L&T \_\_\_\_\_ Option (✓)  Growth  Dividend Payout  Dividend Reinvestment  Bonus^

Dividend Frequency (✓ wherever applicable)  Daily  Weekly  Monthly\*  Quarterly  Annual^  Semi-Annual^

To Scheme L&T \_\_\_\_\_ Option (✓)  Growth  Dividend Payout  Dividend Reinvestment  Bonus^

Dividend Frequency (✓ wherever applicable)  Daily  Weekly  Monthly\*  Quarterly  Annual^  Semi-Annual^

Transfer preference (✓)  Amount (₹) \_\_\_\_\_ OR  Capital Appreciation (Available for GROWTH plan only) From [M][M][Y][Y][Y][Y] To [M][M][Y][Y][Y][Y] OR  Till balance

Transfer frequency (Please ✓ anyone)

Daily  Weekly  Mon\*  Tue  Wed  Thu  Fri

Fortnightly  1st  15th\*  Monthly\*  1st  5th  10th\*  15th  20th  25th  28th

Quarterly  1st  5th  10th\*  15th  20th  25th  28th

\*Default option if not selected ^Available in select schemes only

## 4. DECLARATION & SIGNATURES (To be signed as per Mode of Holding)

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this transaction. I/We understand that the upfront commission will be paid directly by me/us to the AMFI registered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed the commissions to me/us (in trail commission or any other), payable to him for different schemes of mutual funds from amongst which the scheme is being recommended to me/us.

Applicable for AADHAAR SUBMISSION: I/We hereby give you my/our consent to validate Aadhaar with UIDAI and for updating/linking my Aadhaar number based on the PAN given in all my accounts maintained with CAMS serviced Mutual Funds for KYC & other related due diligence purpose in line with PMLA requirements and Account enrichment purpose.

(Sole/First Unit Holder)  (Second Unit Holder)  (Third Unit Holder)

## ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)



Folio No. \_\_\_\_\_ Received from \_\_\_\_\_ Name of the Sole/First Unit Holder \_\_\_\_\_

Scheme/Plan/Option \_\_\_\_\_

SWP Instalment amount \_\_\_\_\_ Frequency (✓)  Monthly  Quarterly  Semi Annual  Annual

STP Instalment amount \_\_\_\_\_ Frequency (✓)  Daily  Weekly  Fortnightly  Monthly  Quarterly

For Office Use Only

Acknowledgement Stamp & Date