Systematic Investment Plan (SIP) / Micro SIP Form



Please refer to the general instructions for as	ssistance and complete all secti	ons in English. Fo	or legibility, please use BL	OCK LETTERS in bla	ck or dark ink.		Time Stamp	
Distributor/RIA Code Sub-Distributor A		ARN Sub-Distributor Code			EUIN		Branch Code	
ARN-64917					E434563			
Transaction Charges: SEBI (Mutual Fund) R investments sourced by him. The transaction No transaction charges would be levied if you Investor's Declaration where EUIN is not furnish person of the above distributor and/or notwiths	ned: I/We confirm that the EUIN box	has been intention	ally left blank by me/us as th	nis is an "execution only	" transaction without any in	teraction or advice	e by the employee/relationship manager/sales	
⊯ Sole/1st Applicant		⊯ 2nd Applica	int		⊮ 3rd Appli	cant		
OTM DEBIT MANDATE FO	RM FOR NACH/ECS	AUTO DE	BIT					
L&T Financial Services Mutual Fund UMR			ffice use only			Date		
Utility Code							O Cancel	
		1////	hereby outborize			ſ Mutual Fur		
to debit (✓) ○ SB ○ CA ○ CC	C O SB-NRE O SB-NR		e hereby authorize Bank A/c No.					
			Bankyvorto					
With Bank	Ba	ink Name			IFSC/ MICR			
an amount of Rupees		Amo	ount in words			₹		
Debit Type Fixed Amount	Maximum Amount	Frequence	y Monthly	Quarterly	Half Yearly	X Yearly	As & when presented	
Reference 1			Reference	2				
1. I agree for the debit of mandate proc	essing charges by the bank	whom I am aut			schodulo of charges o	f the bank 2	This is to confirm that they declaration	
has been carefully read, understood & that I am authorized to cancel / amend to	made by me/us. I am autho	rising the user	entity / Corporate to de	ebit my account, ba	used on the instructions	s as agreed an	nd signed by me. 3. I have understood	
Period				ienument request t				
From D D M M Y Y	YY							
To 3 1 1 2 2 0		ture of First Acc			Second Account Hold		Signature of Third Account Holder	
or 🛛 Until Cancelled	1. Nam	e as in Bank I	Records 2.	Name as	in Bank Records	3.	Name as in Bank Records	
APPLICANT INFORMATIO	N							
Name of Sole/1st Unit Holder	First Name		Middle Name		Last Name	Fol	lio No.	
PAN/PEKRN**	irst Unit Holder		Second	Unit Holder		Thi	ird Unit Holder	
KIN*	it Holder		Se¢ond	Unit Holder		T	hird Unit Holder	
Date of Birth* (1st Unit Holder)		Date of Birth*	(2nd Unit Holder)	D M M Y Y	Y Y Date of Birt	h* (3rd Unit Ho	older) D D M M Y Y Y Y	
Mobile No. +91-			E-mail ID					
SIP & INVESTMENT DETAILS	(Mandatory. If left blank	, the applica	tion is liable to be	rejected)				
○ New SIP Registration ○ SIP Renewal	•				Debit Mandate to be regist	tered in the folio.	(If selected, Section 4 to be filled in mandatorily)	
O OTM Debit Mandate is already	registered in the folio. P	lease fill, Unique	e Mandate Reference N					
Debit Bank Name Scheme Name L&T				Account No.				
Option (\checkmark) \bigcirc Growth* \bigcirc	IDCW [@] Payout O IE			stributed out of inv	estors' capital (Equaliz	ation Reserve	e). which is part of the sale price that	
[®] Note: IDCW stands for 'Income Dis represents realized gains, as may be								
First Instalment Details: Instrument Drawn On		Instrument	Date D D M M Y	Bank Brar		ngs () Current	t O NRE O NRO O Others Bank City	
SIP Amount ₹	Dalik Nallie		SIP Fre	quency O Month			Darik Oity	
SIP Debit Date O 1st O 5th O 7th O (Note: Minimum gap of 30 days required bet	○ 10th* ○ 15th ○ 20th ○ 2	5th 〇 28th 〇 A			,	MIMIYE	Y Y Y OR O Until Cancelled	
(Note: Minimum gap of 30 days required bet Equity schemes & 1000 for Non Equity sche Reason for your SIP (✓) ○ Childre	emes)					date will be cons	idered.) (For SIP amount Minimum 500 for ^Available in select schemes only	
O SIP Top Up (Optional) - Available		÷			Top Up Amoun		unt in multiples of ₹ 500 only	
Top Up to continue till SIP amount rea ^ SIP Top Up will cease once the mer			te from which SIP Top			ncy (Please √a n if not selecte	any one) O Half Yearly O Yearly* ed	
Note: Effective February 1, 2021, u amount. Net Asset Value (NAV) wil								
DECLARATION, CONSENT & S	SIGNATURES (Mandate	ory. If left bla	nk, the application	is liable to be re	ejected)			
IWe have read and understood the respective Schen application will result in aggregate investments excee trail commission or any other), payable to him for the payments referred above through participation in EC Limited, or any of their appointed service providers o I/We hereby accord my/our consent to disclose, shart for any valid business purposes including marketing.	ading Rs. 50,000 in a year. I/We have different competing schemes of Mutu S/ACH/Auto Debit. If the transaction i r representatives responsible. I/We w e, remit in any form, mode or manner, or sales promotion or with any statut	neither received nor al Funds from among s delayed or not effer ill also inform L&T In all/any of the informa ry or judicial authorit	tion and Key Information Memo been induced by any rebate or st which the Scheme is being in cted at all for reasons of incom vestment Management Limite tion provided by me/us, includ ies, without any prior intimation	gifts directly or indirectly i recommended to me/us. I/ plete or incorrect informal d about any changes in m ing all changes, updates to n to me/us, until notified b	Ind. I/We hereby declare that i/ in making this Systematic Invest We hereby declare that the pa ion, I/We would not hold L&T I y/our bank account. I/We have o such information as and when y me/us otherwise.	we do not have any stment. The ARN ho rticulars given here Mutual Fund, their In read and agreed to n provided by me/ u	Vexising which ossister with the current older has disclosed to melvica all the commissions (i are correct and express my/our willingness to mak nextiment Manager - L&T Investment Managemen o the terms and conditions mentioned overleaf. Is to the group companies of L&T Financial Service	
SIGNATURE/S AS PER L&T MUTU					,			

GENERAL INSTRUCTIONS

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black or dark ink. All information sought in the form is mandatory except where it is specifically indicated as optional. All instructions & notes are subject to SEBI & AMFI guidelines as amended from time to time. Please note in case of any error while filling the form all applicants must sign against the corrections.

1. Applicant Information: Please furnish the Folio Number, Name and PAN of Sole/First Applicant Section 1 of the Form. Your investment would be processed in the specified folio.

Your personal information and bank account details would apply to this investment as well.

Please provide the Mobile Number and E-Mail Address of the Sole / First Applicant in the form in case of Individuals and Key Contact in case of Non Individuals. This would help us seamlessly communicate with you on your investments.

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).

Permanent Account Number (PAN): Furnishing of PAN is mandatory for all applicants except where specific dispensation is provided under law.

2. SIP & Investment Details:

- a. New Investors who wish to enroll for SIP investment are required to fill (i) OTM Mandate Form (ii) SIP Registration Form and (iii) the respective Scheme Application form (included in the Key Information Memorandum). New Investors can apply for SIP into respective Scheme / Plans / Option without any existing investment /folio. Please mention the name of the Scheme where you plan to make your investment and your preferred option. If you do not indicate your preferred option, your application would be processed based on the terms & conditions set out in the Scheme Information Document. If you are not investing through a Distributor, please suffix "Direct Plan" after the scheme name.
- b. Where a One Time Mandate is already registered in a folio for a bank account, the Unit Holder(s) is not required to fill the OTM debit mandate again. However, please mention the UMRM, debit bank name & account number.
- c. Where the OTM mandate is getting submitted for the first time, please fill the OTM debit mandate form for NACH/ ECS/ Auto debit mandatorily. Enclose cancelled cheque leaf of the bank where OTM is getting registered if the initial purchase cheque is not from the same bank account.
- d. Micro SIP: As per AMFI notification and guidelines issued on July 4, 2009, SIPs or Lumpsum purchases by eligible investors in a rolling 12 month period not exceeding Rs. 50,000 shall be exempt from the requirement of PAN. From January 1, 2012, KYC is mandatory for all holders of Micro investments.
- The exemption of PAN requirement is only available to individuals.
- Eligible investors may invest through SIP or lumpsum purchase without providing PAN subject to the threshold amount as mentioned above.
- Eligible investors should attach a copy of KYC acknowledgment letter quoting PAN exempt KYC Reference No. (PEKRN) along with the application form.
- e. Third Party Payments: Third Party Payments for investments are not accepted except in the below cases

- Payment by employer on behalf of employees under SIP or lump sum subscription through Pay Roll deductions or deductions out of expense re imbursements.
- Custodian on behalf of an FPI or Client made by Custodian.
- Payment by an AMC to its empanelled distributor on account of commission/ incentive etc. in the form of Mutual Fund units through SIP or lump sum/one time subscription.
- Payment by a Corporate to its Agent/Dealer/Distributor on account of commission or incentive payable for sale of its goods/services in the form of Mutual Fund units through SIP or lump sum/one time subscription.

In the above cases, necessary declaration / banker's certificate needs to be provided confirming the source of funds for the investment. Please refer the SAI for more details.

- f. SIP Top-Up Facility: Investors can opt for SIP Top Up facility wherein the amount of SIP can be increased at fixed intervals.
- The minimum amount of increase under SIP Fixed Amount Top-Up facility should be Rs. 500/- and in multiples of Rs.500/- thereof.
- SIP Top-Up frequency in case of investors availing Monthly SIP facility will be half yearly and yearly and for availing Quarterly SIP facility, the frequency will be yearly. In case the SIP Top-Up frequency is not indicated under Monthly SIP, it will be considered as yearly.
- g. Your investment cheque should be crossed "Account Payee only" and drawn favoring the scheme name where the investment is in a specific scheme
- Please ensure that the investment cheque issued by you complies with CTS 2010 requirement stipulated by the Reserve Bank of India. The words "CTS 2010" should appear on the face of the cheque.
- Payments made by Cash/Money Order/Postal Order, Non- MICR cheque, outstation cheques are not accepted.
- For detailed terms and conditions on SIP, SIP Top-up, OTM facility, please visit our website www.ltfs.com and also refer to scheme related documents.
- k. Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.

3. Declarations & Signatures:

Unit holders need to sign here in accordance to the Mode of Holding provided to us and as per the mode of holding in the bank account in the same sequence and manner in the relevant boxes provided in the form.

4. Debit Mandate:

- Please fill all the required details in the OTM Debit Mandate Form for NACH/ ECS/Auto Debit. The sole/first holder must be one of the holders in the bank account.
- b. The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
- c. The 9 digit MICR code and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.

CHECK LIST FOR SIP INVESTMENT FORM		
Application No./Folio No. quoted on the Form	0	
Name of the Sole/First Holder furnished in the Form	0	
SIP details listed below are furnished SIP installment amount No. of SIP installments SIP date SIP frequency SIP period SIP Scheme	0	
Complete Bank details are furnished in the form Name of the Sole/1 st Holder of the Bank Account Bank A/c No MICR IFSC	0	
All holders have signed in accordance with the Mode of Holding as provided to us at the relevant place		
All Bank Account Holders have signed in the same manner and sequence as their Bank Account in the relevant place		

call 1800 4190 200 or 1800 2000 400

email investor.line@Intmf.co.in

www.ltfs.com

Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021. Please note our lines are open from 9 am to 6 pm, Monday to Friday and 9 am to 1 pm on Saturday.

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

Systematic Investment Plan (SIP) / Micro SIP Form

7

Please refer to the general instructions for ass	istance and complete all sections in English	. For legibility, please use BLOCH	(LETTERS in black or dark	ink.	Time Stamp
Distributor/RIA Code	Sub-Distributor ARN	Sub-Distributor Coo	de	EUIN	Branch Code
ARN-64917		E	E434563		
No transaction charges would be levied if you Investor's Declaration where EUIN is not furnished	are not investing through a Distributor or you ed: I/We confirm that the EUIN box has been inten	ur investment amount is less than tionally left blank by me/us as this is	Rs.10,000/ If this is the first t an "execution only" transaction	time, you are investing in any on without any interaction or a	or has opted to receive transaction charges for charges would be deducted over 3-4 instalments. mutual fund, please tick here advice by the employee/relationship manager/sales not charged any advisory fees on this transaction.
⊯ Sole/1st Applicant	🗷 2nd Appl	licant		⊯ 3rd Applicant	
OTM DEBIT MANDATE FOR	M FOR NACH/ECS/AUTO E	EBIT			
L&T Financial Services Mutual Fund		Office use only		Dat	te D D M M Y Y Y Y
Utility Code				○ Create ○ Modif	fy O Cancel
Sponsor Bank Code	· · · · · · · · · //	We hereby authorize		L&T Mutual	Fund
to debit (\checkmark) \bigcirc SB \bigcirc CA \bigcirc CC		r Bank A/c No.			
With Bank	Bank Name		IFS	C/ MICR	
an amount of Rupees	A	mount in words			₹
Debit Type Kixed Amount	Maximum Amount Freque	ency Monthly D	🛛 Quarterly 🛛 🖂 Ha	lf Yearly 🛛 🛛 Yea	rly 🗹 As & when presented
Reference 1		Reference 2			
					a. 2. This is to confirm that thae declaration
					d and signed by me. 3. I have understood e bank where I have authorized the debit.
Period			· · ·		
	Y Y		Circulations of Constant (Circulation of Third Account Holder
To 3 1 2 2 0 or X Until Cancelled X	9 9 Image: Signature of First A 1.		Signature of Second A Name as in Bank		Signature of Third Account Holder Name as in Bank Records
APPLICANT INFORMATION					
Name of Sole/1st Unit Holder	First Name	Middle Name		ast Name	Folio No.
PAN/PEKRN**	rst Unit Holder	Second Un	it Holder		Third Unit Holder
KIN* Firşt Uhi	t Holder	Seçond Urli	t Hþider		Third Unit Holder
Date of Birth* (1st Unit Holder)	MMYYYYY Date of Birt	th* (2nd Unit Holder)	ΜΙΜΙΥΙΥΙΥΙΥ	Date of Birth* (3rd Un	it Holder) D D M M Y Y Y Y
Mobile No. +91-		E-mail ID			
	Mandatory. If left blank, the appli				
-	Opdate new OTM debit mandate for already registered in the folio. Please fill, Uni			date to be registered in the	folio. (If selected, Section 4 to be filled in mandatorily)
Debit Bank Name			Account No.		
Scheme Name L&T					
Option (✓) Growth* @Note: IDCW stands for 'Income Distr represents realized gains, as may be of		'. The amounts can be distrib from time to time (subject to			erve), which is part of the sale price that ated in accordance with the Regulations).
First Instalment Details: Instrument		ent Date D D M M Y Y		(✓) ○ Savings ○ Cu	rrent O NRE O NRO O Others
Drawn On SIP Amount ₹	Bank Name		Bank Branch ency O Monthly* O C	Juarterly	Bank City
	0 10th * ○ 15th ○ 20th ○ 25th ○ 28th ○			-	Y Y Y Y OR O Until Cancelled
(Note: Minimum gap of 30 days required betw Equity schemes & 1000 for Non Equity schemes	veen first cheque and subsequent instalment.	In case of discrepancy in the SIP	Period, the one mentioned in		considered.) (For SIP amount Minimum 500 for ^Available in select schemes only
	only for investments effected through A				mount in multiples of ₹ 500 only
Top Up to continue till SIP amount rea SIP Top Up will cease once the men	<pre>ches^ ₹ OR Top Up to e tioned amount is reached.</pre>	continue till # D D M M		• Up Frequency (Pleas *Default option if not sel	e ✓any one) ○ Half Yearly ○ Yearly* lected
Note: Effective February 1, 2021, ur amount. Net Asset Value (NAV) will	nits will be allotted only upon receip be applied based on realization of i	t of subscription amount b funds for all purchases inc	y the Fund House for cluding systematic tra	utilisation irrespective nsactions registered	e of any scheme category/investment
SIGNATURE/S AS PER L&T MUTU	AL FUND (To be signed as per Moo	le of Holding)			
✓ Sole/First Applicant/Guardian	≪ Secon	d Applicant			
		6 F			7

GENERAL INSTRUCTIONS

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black or dark ink. All information sought in the form is mandatory except where it is specifically indicated as optional. All instructions & notes are subject to SEBI & AMFI guidelines as amended from time to time. Please note in case of any error while filling the form all applicants must sign against the corrections.

1. Applicant Information: Please furnish the Folio Number, Name and PAN of Sole/First Applicant Section 1 of the Form. Your investment would be processed in the specified folio.

Your personal information and bank account details would apply to this investment as well.

Please provide the Mobile Number and E-Mail Address of the Sole / First Applicant in the form in case of Individuals and Key Contact in case of Non Individuals. This would help us seamlessly communicate with you on your investments.

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).

Permanent Account Number (PAN): Furnishing of PAN is mandatory for all applicants except where specific dispensation is provided under law.

2. SIP & Investment Details:

- a. New Investors who wish to enroll for SIP investment are required to fill (i) OTM Mandate Form (ii) SIP Registration Form and (iii) the respective Scheme Application form (included in the Key Information Memorandum). New Investors can apply for SIP into respective Scheme / Plans / Option without any existing investment /folio. Please mention the name of the Scheme where you plan to make your investment and your preferred option. If you do not indicate your preferred option, your application would be processed based on the terms & conditions set out in the Scheme Information Document. If you are not investing through a Distributor, please suffix "Direct Plan" after the scheme name.
- b. Where a One Time Mandate is already registered in a folio for a bank account, the Unit Holder(s) is not required to fill the OTM debit mandate again. However, please mention the UMRM, debit bank name & account number.
- c. Where the OTM mandate is getting submitted for the first time, please fill the OTM debit mandate form for NACH/ ECS/ Auto debit mandatorily. Enclose cancelled cheque leaf of the bank where OTM is getting registered if the initial purchase cheque is not from the same bank account.
- d. Micro SIP: As per AMFI notification and guidelines issued on July 4, 2009, SIPs or Lumpsum purchases by eligible investors in a rolling 12 month period not exceeding Rs. 50,000 shall be exempt from the requirement of PAN. From January 1, 2012, KYC is mandatory for all holders of Micro investments.
- The exemption of PAN requirement is only available to individuals.
- Eligible investors may invest through SIP or lumpsum purchase without providing PAN subject to the threshold amount as mentioned above.
- Eligible investors should attach a copy of KYC acknowledgment letter quoting PAN exempt KYC Reference No. (PEKRN) along with the application form.
- e. Third Party Payments: Third Party Payments for investments are not accepted except in the below cases

- Payment by employer on behalf of employees under SIP or lump sum subscription through Pay Roll deductions or deductions out of expense re imbursements.
- Custodian on behalf of an FPI or Client made by Custodian.
- Payment by an AMC to its empanelled distributor on account of commission/ incentive etc. in the form of Mutual Fund units through SIP or lump sum/one time subscription.
- Payment by a Corporate to its Agent/Dealer/Distributor on account of commission or incentive payable for sale of its goods/services in the form of Mutual Fund units through SIP or lump sum/one time subscription.

In the above cases, necessary declaration / banker's certificate needs to be provided confirming the source of funds for the investment. Please refer the SAI for more details.

- f. SIP Top-Up Facility: Investors can opt for SIP Top Up facility wherein the amount of SIP can be increased at fixed intervals.
- The minimum amount of increase under SIP Fixed Amount Top-Up facility should be Rs. 500/- and in multiples of Rs.500/- thereof.
- SIP Top-Up frequency in case of investors availing Monthly SIP facility will be half yearly and yearly and for availing Quarterly SIP facility, the frequency will be yearly. In case the SIP Top-Up frequency is not indicated under Monthly SIP, it will be considered as yearly.
- g. Your investment cheque should be crossed "Account Payee only" and drawn favoring the scheme name where the investment is in a specific scheme
- Please ensure that the investment cheque issued by you complies with CTS 2010 requirement stipulated by the Reserve Bank of India. The words "CTS 2010" should appear on the face of the cheque.
- i. Payments made by Cash/Money Order/Postal Order, Non- MICR cheque, outstation cheques are not accepted.
- j. For detailed terms and conditions on SIP, SIP Top-up, OTM facility, please visit our website www.ltfs.com and also refer to scheme related documents.
- k. Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.

3. Declarations & Signatures:

Unit holders need to sign here in accordance to the Mode of Holding provided to us and as per the mode of holding in the bank account in the same sequence and manner in the relevant boxes provided in the form.

4. Debit Mandate:

- a. Please fill all the required details in the OTM Debit Mandate Form for NACH/ ECS/Auto Debit. The sole/first holder must be one of the holders in the bank account.
- b. The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
- c. The 9 digit MICR code and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.

www.ltfs.com

CHECK LIST FOR SIP INVESTMENT FORM			
Application No./Folio No. quoted on the Form	0		
Name of the Sole/First Holder furnished in the Form	0		
SIP details listed below are furnished SIP installment amount No. of SIP installments SIP date SIP frequency SIP period SIP Scheme	0		
Complete Bank details are furnished in the form Name of the Sole/1 st Holder of the Bank Account O Bank A/c No MICR IFSC			
All holders have signed in accordance with the Mode of Holding as provided to us at the relevant place			
All Bank Account Holders have signed in the same manner and sequence as their Bank Account in the relevant place			

call 1800 4190 200 or 1800 2000 400 email investor.line@Intmf.co.in

Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.

Please note our lines are open from 9 am to 6 pm, Monday to Friday and 9 am to 1 pm on Saturday.

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

Transaction Form For STP & SWP



1. APPLICANT INFORMATION Name of Sole/1st Unit Holder First Name Marke of Sole/1st Unit Holder First Name PAN/PEKRN** First Unit Holder Pan/PEKRN** E-mail ID Cycle mandtony Please enclose copies of KYC acknowledgement letters for all applicants. "PEKRN required for Micro Investments upto Res. 50,000 in a year." 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 OLCW Reinvestment © Bonus^A DCW Frequency (~ wherever applicable) Dality Weekly Monthly*	the general monorono for abolate	ance and complete all sect	tions in English. For legibil	ity, please use BLOCK LETT	ERS in black or dark i	nk.	Time	e Stamp
Intervention of the paid by the function of the setting of the setting in the paid in in the pa	Distributor/RIA Code	Sub-Distributor	ARN SI	ub-Distributor Code		EUIN	Brar	nch Code
handball dapplicant in the set of a later of the set of	ARN-64917				E	434563		
<pre>network deviations where SUM is not show the second by the bank by main and the an "rescalate or those are identicable on an object by the restriction of the second by the second by the bank by main and the analytic of the second by the restriction of the second by the second by the restriction of the second by the restrict</pre>		•			-	•		
1. APPLICANT INFORMATION Name of Sole/1st Unit Holder Folio No. ANAPEKRN** Freq Unit Holder Prod Unit Pecker Becodd Unit Holder ANAPEKRN** Freq Unit Holder CMM Beter Office Tomation CMM Freq Unit Holder CMM Freq Unit Holder CMM Capital Appreciation (Available for GROWTH plan only) Withdrawal preference (*) Annual Mithdrawal preference (*) Annual Mithdrawal Preferency (*/ Horever applicable) Daily Weekly Option (*) Growth IDCWP Payout IDCWP Reversement © Banua* DCWF Frequency (*/ Horever applicable)	nvestor's Declaration where EUIN is not furnished: I/	We confirm that the EUIN bo	x has been intentionally left b	lank by me/us as this is an "exe	cution only" transaction	without any interaction	or advice by the employee/r	elationship manager/sale
Harme of Sole/1st Unit Holder First Name Last Name Folio No. PANPEKRN** Freq Unit Holder Prod Unit Holder Prod Unit Holder PANPEKRN** Freq Unit Holder Prod Unit Holder Prod Unit Holder ON* Freq Unit Holder Prod Unit Holder Prod Unit Holder ON* Freq Unit Holder Prod Unit Holder Prod Unit Holder ON* Freq Unit Holder Freq Unit Holder Prod Unit Holder ON* State of Birth* (ter Unit Holder Freq Unit Holder Prod Unit Holder OVEr In anodotory Frequency (Volt Brown Holder State Note that the value of the Unit Investments upto Rs. 50,000 in a year. 14 digr KYC Beautification Rume (KVR) Semi-Annual Scheme Name LST Option (<) Growth IDCW Payout DCW Revestment Bonus^A DCW Frequency (//) Marchity* Quarterly Semi-Annual Annual Mithdrawal ter (QUENC) Capital Appreciation (Available to GROWTH plan only) Withdrawal terguency (//) Marchity* Quarterly Semi-Annual Annual Capital Appreciation (Available to a tesset Rs. 25,000 StySTEMATIC TRANSFER PLAN (STP) - Piesae note that the value of the unit balance in the source scheme should be at tesset Rs. 25,000 DCWP Frequency (// wherever applica	⊯ Sole/1st Applicant		⊯ 2nd Applicant			≝ 3rd Applicant		
PANPERKN** Prod Unit Holder Prod Unit Holder NN* Prod Unit Holder Prod Unit Holder NN* Prod Unit Holder Prod Unit Holder NN* Prod Unit Holder Prod Unit Holder Address of Bith* (set unit Holder) Date of Bith* (set unit Holder) Prod Unit Holder VCI is mandatory. Presse anclose copies of KYC achnowledgement letters for all applicants. "PERNI required for Micro Investments upto Rs. 50,000 in 9 year. Image: Control of Control of Control of Control of Control Of Control of Development (set unit Sec unit Holder) 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 LST Option (Option (//) Growth DCW Prequency ('wherever applicable) Daily Weekly Monthy* Quarterly Annual Withdrawal did c/() std Sth Th 10th* Option (//) Growth IDCW® Reinvestment Bons* 2. SYSTEMATIC TRANSFERE PLAN (STP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000 Scheme Name LST Option (//) Growth IDCW® Reinvestment Bons* DCW® Frequency ('wherever applicable) Daily Weekly Monthy* Quarterly Annual Semi-Annual*	1. APPLICANT INFORMATIO	ON						
NN* Freqt UnterHeider Event UnterHeider Event UnterHeider Event UnterHeider Ade of Birth* (hut inte Heider) Event ID Event ID Event ID VCI is maddatory. Please enclose of KVC acknowledgement letters for all applicants. ***ERKN required for Micro investments upto Rs. 50,000 in a year. *** *** digit KV Steamadory. Please enclose of KVC acknowledgement letters for all applicants. ***ERKN required for Micro investments upto Rs. 50,000 in a year. *** *** digit KV Steamadory. Please enclose of KVC acknowledgement letters for all applicants. *** *** *** *** digit KV Steamadory. Please enclose of KVC acknowledgement letters for all applicants. *** *** *** *** *** *** *** *** *** *** *** **** **** ****<	Name of Sole/1st Unit Holder	First Name	Ν	/liddle Name	Las	t Name	Folio No.	
Date of Birth* (is tune Holder) Date of Birth* (is tune Holder) Difference VC is maddatory. Please enclose copies of KYC acknowledgement letters for all applicants. ""FERM required for Micro Investments upto Rs. 50.00 in a year. 14 diff KY Gledination Number (iff) (iff) and Date of Birth is mandatory for Middataly with one are givened with Construct KY Records Registry (KYCR). 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 DCW Prequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual* Withdrawal preference (*) Amount (*) OR Capital Appreciation (Available for GROWTH plan only) Withdrawal frequency (*) Monthly* Quarterly Semi-Annual Annual Withdrawal frequency (*) Monthly* Quarterly Semi-Annual Annual Withdrawal frequency (*) Monthly* Quarterly Semi-Annual* Semi-Annual* SysTEMATIC TRANSFER PLAN (STP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000 DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual* Semi-Annua* So Scheme L&T Option (*) Growth DCW® Frequency	PAN/PEKRN**	Unit Holder		Second Unit Hold	ler		[Third Unit Holder	
Mobile No. +91	KIN* Fir\$t Uhit H	older		Se¢on¢ Urlit Hplde	r		Third Unit Hold	er
YC is maidatory. Please enclase copies of KYC achnowledgement litters for all applicants. "*EKRN required for Micro Investment upon Rs. 50,000 in a year." Y dight KYC isindification kunker (W) and Date of Bthis is mandatory for Individual(s) who has registered und? contral KYC Records. Registry (CXCR). 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 IDCW Payout IDCW Reinvestment Bonus* DCW Frequency (^wherever applicable) Daily Weekly Monthly* Quarterly Annual Withdrawal preference (?) Amount (?) OR Capital Appreciation (Available for GROWTH plan only) Withdrawal frequency (^) Monthly* Quarterly Semi-Annual Annual Withdrawal frequency (^) Monthly* Quarterly Semi-Annual Annual SystEMATIC TRANSFER PLAN (STP) - Please note that the value of the unit balance in the source scheme should be at least Rs. 25,000 Source scheme should be at least Rs. 26,000 Scheme Name L&T Option (/) Growth IDCW® Payout IDCW® Reinvestment Bonus* DotW® Frequency (^wherever applicable) Daily Weekly Monthly* Quarterly Annual* Semi-Annual* DCW® Frequency (^wherever applicable) Daily Weekly Monthly* Quarterly Annual* Semi-Annual* DotW® Payout IDCW® Reinvestment Bonus* DCW® Frequency (^wherever applicable) Daily Weekl	Date of Birth* (1st Unit Holder)	ΙΜΙΥΙΥΙΥΙΥ	Date of Birth* (2nd Un	nit Holder) D D M M	ΥΥΥΥΥ	Date of Birth* (3rd	Unit Holder)	1 M Y Y Y Y
Y digit YC kinefication Number (K0) and Date of Birth is mandatory for Individual(9 who has registered under Centel XFC accodes Registry (CKYCB). 22. 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 (7) Growth IDCW Payout IDCW Reinvestment Bonus ⁴ DCW Frequency (~wherever applicable) Daily Weekly Monthly ⁴ Quarterly Annual Withdrawal preference (7) Amount (8) OR Capital Appreciation (Available for GROWTH plan only) Withdrawal frequency (~) Monthly ⁴ Quarterly Semi-Annual Annual Withdrawal frequency (~) Nonthly ⁴ Quarterly Semi-Annual Annual Withdrawal frequency (~) Ibth* 15th 20th 25th 28th Withdrawal period From MM Y Y Y To MM Y Y Y O OR Till balance Available in esolet's 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 (7) Growth IDCW® Payout IDCW® Reinvestment Bonus* DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual <td>Mobile No. +91-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Mobile No. +91-							
Scheme Name L&T Option (') Growth DCW Payout DCW Reinvestment Bonus* DCW Frequency ('wherever applicable) Daily Weekly Monthly* Quarterly Annual* Withdrawal proference (') Amount (R) Quarterly Semi-Annual Annual Withdrawal proference (') Monthly* Quarterly Semi-Annual Annual Withdrawal det (') 1st 1st 2sth 2sth Withdrawal period From MMINIY To MMINIY QR Till balance 'Available in select schemes only S Sth Withdrawal det (') 1st Sth 20th Option (') Growth IDCW® Reinvestment Bonus* 'S 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 IDCW® Reinvestment Bonus* DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterly Annual* Semi-Annual* For Scheme L&T Option (') Growth IDCW® Reinvestment Bonus* DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterly								
DCW Frequency (*wherever applicable) Daily Weekly Monthly* Capital Appreciation (Available for GROWTH plan only) Withdrawal frequency (*) Monthly* Quarterly Semi-Annual Annual Withdrawal date (*) 15 th 15 th 28 th Withdrawal period From MIM Y Y Y OR Till balance *Available in select schemes only Stheme Name L&T Option (*) Growth IDCW® Payout IDCW® Reinvestment Bonus* DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual* PMole: DCW and for Income Distribution curve Capital Withdrawal option: The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of th PCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual* PMole: DCW Serequeers Capital Appreciation	2. SYSTEMATIC WITHDRAWA	L PLAN (SWP) -	Please note that th	e value of the unit ba	lance in the sou	irce scheme sho	uld be at least Rs.	25,000
Withdrawal preference (*) Amount (?) OR Capital Appreciation (Available for GROWTH plan only) Withdrawal frequency (*) Monthly* Quarterly Semi-Annual Annual Withdrawal date (*) 1st 5th 7th 10th* 15th 20th 25th 25th Withdrawal period From MMY (*) To MMY (*) OR Till balance *Available in select schemes only Balance State and the source scheme should be at least Rs. 25,000 Scheme Name L&T Option (*) Growth IDCW® Payout IDCW® Reinvestment Bonus* DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual Semi-Annual Plate IDCW Stato for Income Capital Withdrawal option: The amounts can be distributed out of investor's capit	Scheme Name L&T			Optior	ו (י∕) Growth (OIDCW Payout	DCW Reinvestmer	nt ○ Bonus^
Withdrawal frequency (*) Monthly* Quarterly Semi-Annual Withdrawal frequency (*) Monthly* Quarterly Semi-Annual Withdrawal de (*) 1st 5th 28th Withdrawal period From Mail (*) To Mail (*) 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 IDCW® Payout IDCW® Reinvestment Bonus* DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual* Semi-Annual* Fo Scheme L&T Option (*) Growth IDCW® Payout IDCW® Reinvestment Bonus* DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual* Semi-Annual* Protection Contracter with the Regulations). The amounts can be distributed out of investors' capital (Equilization Reserve), which is part of th as protection frepresents realized gains, as may be declared by the Trustees at its discributed out of investors' capital (Equilization Reserve), which is part of th as protection frepresents realized gains, as may be declared at the second by the Trustees at its discri	DCW Frequency (✓ wherever applica	able) 🔿 Daily 🤇	🔾 Weekly 🛛 Mor	nthly* O Quarterly	⊖ Annual^	O Semi-Annual^		
Withdrawal date (1st 5th 20th 28th Withdrawal period From MMY To MMY 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 IDCW® Payout IDCW® Reinvestment Bonus^A DCW® Frequency (Wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^ To Scheme L&T Option (Growth IDCW® Reinvestment Bonus^A DCW® Frequency (Wherever applicable) Daily Weekly Monthly* Quarterly Annual^A Semi-Annual^A Plote: IDCW stands for Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investors' capital (Equilization Reserve), which is part of the algoritic thit regulations). Inscription from time to time (subject to the availability of distributable surplus as calculate in accordance with the Regulations). Finansfer preference (Amount (?) CR Capital Appreciation (Available for GROWTH plan only) From To Monthly* Ist Sth 7th 10th* 15th 20th	Nithdrawal preference (✔) ◯Amou	nt (₹)		OR Capita	al Appreciation (Available for GRO	WTH plan only)	
Available in select schemes only B. 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 IDCW® Payout IDCW® Reinvestment Bonush DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterity Annual^ Semi-Annual^A To Scheme L&T Option (*) Growth IDCW® Payout IDCW® Reinvestment Bonush DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterity Annual^A Semi-Annual^A State proce that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculate in accordance with the Regulations). Transfer preference (*) Amount (*) OR _ Capital Appreciation (Available for GROWTH plan only) From Market (*) **********************************	Nithdrawal frequency (🗸) 🔿 Month	nly* O Quart	erly O Semi-	Annual O Annu	ual			
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 IDCW® Payout IDCW® Reinvestment Bonush DCW® Frequency (wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^ To Scheme L&T Option (<) Growth IDCW® Payout IDCW® Reinvestment Bonush DCW® Frequency (wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^ @Note: IDCW stands for 'Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investor's capital (Equalization Reserve), which is part of the sace price that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculate in accordance with the Regulations). Transfer preference (<) Amount (?) OR Capital Appreciation (Available for GROWTH plan only) From Maint (Equalization Reserve), which is part of the accordance with the Regulations). Please (<) anyone) Weekly Mon* Tue Wed Thu Fri © Fortnightly 1st 5th 7th Yote: Effective February 1, 2021, units will be alloted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investmer mount. Net Asset Value (MW) will be applied based on receipt of subscription amount by the Guarterly IDCW will be applied based on receipt of subscription amount by the fund House for utilisation irrespective of any scheme category/investmeri mount. Net Asset Value (KW) will be applied	Withdrawal date (\checkmark) \bigcirc 1st \bigcirc 5th \bigcirc 7	′th ○ 10th* ○ 15th ○	\bigcirc 20th \bigcirc 25th \bigcirc 28th	h Withdrawal period f	rom M M Y	<u>Ү</u> Ү Ү То М	1 M Y Y Y Y	OR O Till balance
Scheme Name L&T Option (~) Growth IDCW® Payout IDCW® Reinvestment Bonus^A DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^A DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterly Annual^A Semi-Annual^A DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Quarterly Annual^A Semi-Annual^A DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Annual^A Semi-Annual^A DCW® Frequency (~wherever applicable) Daily Weekly Monthly* Annual^A Semi-Annual^A DCW@ Frequency (~wherever applicable) Daily Weekly Monthly* Annual^A Semi-Annual^A Inascordance with the Regulations). reastands for incoversions capital (Equalization Reserve), which is part of this tale price that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculater in accordance with the Regulations). Transfer frequency Daily Plany OR Capital Appreciation (Available for GROWTH plan only) From Monthy* To Monthy*								••
DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^ To Scheme L&T Option (<) Growth IDCW® Payout IDCW® Reinvestment Bonus^A DCW® Frequency (*wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^ Mote: IDCW stands for income Distribution cum Capital Withdrawal option The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of the ale price that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributeable surplus as calculate in accordance with the Regulations). Transfer frequency OAI OR Capital Appreciation (Available for GROWTH plan only) From MIM Y Y Y OR OR Till balance Transfer frequency Daily Non* Tue Wed Thu Fri Please (<) anyone) Weekly Mon* Tue Wed Thu Fri Option if not selected ^Available in select schemes only Weekl Other 20th 25th 28th Default option if not selected ^Available on select as for using systematic transactions registered prior or post February 1, 2021, units will be		2LAN (STP) - Plea	ase note that the val					
fo Scheme L&T Option (<) Growth IDCW [®] Payout IDCW [®] Reinvestment Bonus ^A DCW [®] Frequency (wherever applicable) Daily Weekly Monthly* Quarterly Annual ^A Semi-Annual ^A Note: IDCW stands for Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of the are presents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculated a coddance with the Regulations). Transfer preference (Amount (?) OR Capital Appreciation (Available for GROWTH plan only) From Mark (Y) (Y) To Mark (Y) (Y) OR Till balance (Transfer frequency Daily Please (V) anyone) Weekly Mon* Tue Wed Thu Fri Gonthly* 15th 7th 10th* 15th 20th 25th 28th 28th 28th 28th 28th 28th 28th 28		cable) O Daily O			. ,	,		stment O Bonus^
DCW® Frequency (wherever applicable) Daily Weekly Monthly* Quarterly Annual^ Semi-Annual^ PNote: IDCW stands for 'Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of the accordance with the Regulations). Interview (Subject to the availability of distributable surplus as calculate a accordance with the Regulations). Transfer preference (Amount (OR Capital Appreciation (Available for GROWTH plan only) From Interview (Mitty (M							o	
Whote: IDCW stands for 'Income Distribution cum Capital Withdrawal option'. The amounts can be distributed out of investors' capital (Equalization Reserve), which is part of the sale price that represents realized gains, as may be declared by the Trustees at its discretion from time to time (subject to the availability of distributable surplus as calculate in accordance with the Regulations). Transfer preference (') Amount (?) OR Capital Appreciation (Available for GROWTH plan only) From MMMY Y Y Y To MMMY Y Y OR Till balance Transfer preference (') Amount (?) OR Capital Appreciation (Available for GROWTH plan only) From MMMY Y Y To MMMY Y Y OR Till balance Transfer preference (') Amount (?) OR Capital Appreciation (Available for GROWTH plan only) From MMY Y Y To MMY Y Y OR Till balance Transfer frequency Daily Nonthity* 1st 15th* Oth 25th 28th Please (') anyone) Weekly Mon* Tue Wed Thu Fri Capital Appreciation of the select schemes only Sth 7th 10th* 15th 20th 28th Default option if not selected ^Available in select schemes only Y Available in select schemes only Y Y Y Y Y	_						t O IDCW [@] Reinve	stment O Bonus^
Transfer frequency Daily Please (*) anyone) Weekly Mon* Tue Wed Thu Fri Fortnightly 1st 15th* Monthly* 1st 5th 7th 10th* 15th 20th 25th 28th Default option if not selected ^Available in select schemes only Vote: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021. 4. DECLARATION, CONSENT & SIGNATURES (To be signed as per Mode of Holding) We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither receive or 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 AM egistered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed to immissions to me/us (in trail commission any other), payable to him for different schemes of mutual funds from amongst which the scheme is being recommended to me/u We hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to sure formati	[®] Note: IDCW stands for 'Income Distr	ibution cum Capital V ins, as may be decla	Withdrawal option'. Th ared by the Trustees a	he amounts can be dist at its discretion from tin	ributed out of inv ne to time (subje	estors' capital (Equ ct to the availabilit	y of distributable su	rplus as calculated
Please (*) anyone) Weekly Mon* Tue Wed Thu Fri Please (*) anyone) Fortnightly 1st 15th* Monthly* 1st 5th 7th 10th* 15th 20th 25th 28th Quarterly 1st 5th 7th 10th* 15th 20th 25th 28th Default option if not selected ^Available in select schemes only Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investmeration amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021. A. DECLARATION, CONSENT & SIGNATURES (To be signed as per Mode of Holding) We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither receive or 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 AM gistered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to surformation as and when provided by me/us to the group companies of L&T Fi	• ())OR	Capital Appreciation	n (Available for GROWTH	plan only) From	MYYYYY	o MMYYYYY	\bigcirc OR \bigcirc Till balance
Monthy* 1st 5th 7th 10th* 15th 20th 25th 28th Quarterly 1st 5th 7th 10th* 15th 20th 25th 28th Default option if not selected ^Available in select schemes only Vote: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investmeration. Monthy* 1 5th 7th 10th* 15th 20th 28th Default option if not selected ^Available in select schemes only Vote: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investmeration Monthy* 1 1 1 20th 28th Monthy* 1 1 1 10th* 15th 20th 28th Default option if not selected ^Available in select schemes only 20th 28th 28th Default option if not selected ^Available in select schemes only 20th 28th 28th Default option if not selected ^Available in select schemes only	Please (✓) anyone) O Weekly			⊖ Wed O⊺	Thu O Fr			
Available in select schemes only Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021. 4. DECLARATION, CONSENT & SIGNATURES (To be signed as per Mode of Holding) We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither receive or 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 AM registered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed th ommissions 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 We hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to suc formation as and when provided by me/us to the group companies of L&T Financial Services for any valid business purposes including marketing or sales promotion or win hy statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.	0			○ 7th ○ 1	10th* 0 15	th O 20th	∩ ○ 25th	○ 28th
Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment mount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021. I. DECLARATION, CONSENT & SIGNATURES (To be signed as per Mode of Holding) We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither receive or 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 AM gistered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed th ommissions 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 formation as and when provided by me/us to the group companies of L&T Financial Services for any valid business purposes including marketing or sales promotion or win hy statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.		,			10th* 0 15	th O 20th	n O 25th	○ 28th
L DECLARATION, CONSENT & SIGNATURES (To be signed as per Mode of Holding) We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither receive or 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 AM gistered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed the mmissions 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 We hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to suc formation as and when provided by me/ us to the group companies of L&T Financial Services for any valid business purposes including marketing or sales promotion or win statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.	lote: Effective February 1, 2021, units	will be allotted only	upon receipt of subso	cription amount by the				
Ne have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum. I/We have neither receive or 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 AM gistered distributors based on my/our assessment of various factors including the service rendered by the distributor. Also, the AMFI registered distributor has disclosed th mmissions 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/u Ne hereby accord my/our consent to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/us, including all changes, updates to suc formation as and when provided by me/ us to the group companies of L&T Financial Services for any valid business purposes including marketing or sales promotion or wi hy statutory or judicial authorities, without any prior intimation to me/us, until notified by me/us otherwise.	· · · ·			•	ystematic transa	ctions registered p	rior or post February	/ 1, 2021.
 幺 (Sole/First Unit Holder) メ (Second Unit Holder) メ (Third Unit Holder) 	We have read and understood the res or been induced by any rebate or gift gistered distributors based on my/ou mmissions to me/us (in trail commiss We hereby accord my/our consent to	pective Scheme Info s, directly or indirect r assessment of va sion or any other), pa disclose, share, ren me/ us to the group of	rmation Document, S Ily in making this tran rious factors includin ayable to him for diffe nit in any form, mode companies of L&T Fi	tatement of Additional saction. I/We understa g the service rendered rent schemes of mutua or manner, all/any of t nancial Services for ar	and that the upfro I by the distributo al funds from amo the information p ny valid business	ont commission wi or. Also, the AMFI ongst which the so rovided by me/us,	Il be paid directly by registered distributo heme is being recon including all chang	/ me/us to the AM or has disclosed th mmended to me/u es, updates to suc
		nout any prior intima		Salica by moras otherw				

Folio No Scheme/Plan/Option	Received from	Nam	For Office Use Only				
SWP Instalment amount STP Instalment amount		Frequency(✓) ○ Monthly Frequency(✓) ○ Daily	QuarterlyWeekly	○ Semi Annual○ Fortnightly	○ Annual○ Monthly	◯ Quarterly	Acknowledgement Stamp & Date

GENERAL INSTRUCTIONS

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black or dark ink. All information sought in the form is mandatory except where it is specifically indicated as optional. All instructions & notes are subject to SEBI & AMFI guidelines as amended from time to time. Please note in case of any error while filling the form all applicants must sign against the corrections.

 Applicant Information: Please furnish the Folio Number, Name and PAN of Sole / First Applicant Section 1 of the Form. Your investment would be processed in the specified folio.

Your personal information and bank account details would apply to this investment as well.

Contact Details: Please provide the Mobile Number and E-Mail Address of the Sole / First Applicant in the form in case of Individuals and Key Contact in case of Non Individuals. This would help us seamlessly communicate with you on your investments.

Permanent Account Number (PAN): Furnishing of PAN is mandatory for all applicants except where specific dispensation is provided under law.

2. Systematic Withdrawal Plan (SWP):

- a. The minimum withdrawal size is Rs.500 except for L&T Liquid Fund and L&T Cash Fund. For L&T Liquid Fund and L&T Cash Fund it is Rs. 1000.
- b. SWP will be registered within 7 calendar days from the date of your request.
- c. You can cancel a registered SWP at any time by submitting a written request. The cancellation will be processed within 15 days.
- If your SWP request specifies both amount and units, the SWP will be processed on the basis of amount.
- If the scheme/plan/option is not mentioned and there is only one scheme/plan/ option available in the folio, the same will be processed.

3. Systematic Transfer Plan (STP):

- a. The minimum transfer size is Rs.500 except for L&T Liquid Fund and L&T Cash Fund. For L&T Liquid Fund and L&T Cash Fund it is Rs. 1000.
- b. STP will be registered within 7 calendar days from the date of your request.
- c. You can cancel a registered STP at any time by submitting a written request. The cancellation will be processed within 15 days.

- d. If the plan/option if the source scheme is not mentioned and there is only one plan/option available in the folio, the STP will be processed.
- e. If the plan/option of the target scheme is not mentioned, the STP will be processed as per the default options mentioned in the Scheme Information Document of the respective scheme.
- f. In case the criterion of the minimum amount for the purpose of transfer of units under the STP facility is not met, the AMC reserves the right to discontinue the STP/cancel the registration for STP.
- g. Daily STP is availble only for fixed amounts.
- STP transfers can be made on a daily basis i.e. Monday to Friday subject to such days being business days.
- Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.
- 4. Signatures: All signatures should be in English or any other Indian Language. Thumb impressions should be from the left hand in case of males and right hand in case of females. All such thumb impressions need to be attested by a Magistrate, Notary Public or Special Executive Magistrate under his/her official seal.
- Employees Unique Identification Number (EUIN): If you are making this investment based on an investment advise received from your distributor, please quote the Employees Unique Identification Number (EUIN) of your relationship manager in the Application Form.

If your distributor has, however, not given you any advice pertaining to the investment or your investment decision is not withstanding the advice provided by your distributor regarding inappropriateness of the scheme vis-a-vis your investment needs, the EUIN box may be left blank. In this case, please sign in the space provided in Section B to confirm your acceptance to the declaration stated therein.

call 1800 4190 200 or 1800 2000 400

email investor.line@Intmf.co.in

www.ltfs.com

Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021. Please note our lines are open from 9 am to 6 pm, Monday to Friday and 9 am to 1 pm on Saturday.

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.