Transaction Form



Please refer to the general ins	structions for assistance and cor	nplete all sections in English	. For legibility, please use BLC	CK LETTERS in black or dark ink	Time Stamp
Distributor Code	Sub-Distributor ARN	Branch Code	Relationship Manager's Name		EUIN
A D N A D N A 0 0 0 4 7			Mobile +91-		
ARNARN-109217	Sub-Distributor Code		E-mail		E-150257
nitial Commission will be	noid by the investor directly	to the distributor based		factors including the service rendered by	the Dietributer
nvestor's declaration who We herby confirm that to relationship manager/sale	ere EUIN is not furnished. the EUIN box has been inte	ntionally left blank by me butor or notwithstanding	e/us as this is an "executi the advice of the in appro	on only" transaction without any interaction priateness, if any, provided by the employ	on or advice by the employed
X (Sole/Firs	t Applicant/Guardian)	X	(Second Applicant)	X (Third	d Applicant)
1. APPLICANT IN	FORMATION				
KYC is mandatory. Please	older First Name Unlit Holder e enclose a copy of KYC ac AILS OF SOLE/1ST UN	knowledgement letters f	Middle Name conի Unlit Holder or all applicants.	Last Name Folio	
Mobile No. +91-		E-mail ID			
	URCHASE (Please ensure	that the cheque compli	es to CTS 2010 standards)	
Scheme Name Option (√) Investment Mode	L&T Bonus Cheque/DD/Pay orde		tment Dividend Payor	ut Dividend Frequency (✓) □ NEFT/Online Transfer/Fund Transfer	Monthly Quarterly
	Amount (in ₹):	Drawn or		Cheque/DD/Payment Instrument No.	
Payment made by (✓)	First/Second/Third Un	it Holder	Guardian	Others	
4. SWITCH Scheme Name	L&T				
Option (✓) Fo Scheme	☐ Growth ☐ Bonus	Dividend Reinvestme	ent Dividend Payout	Dividend Frequency (✓)	Monthly Quarterly
Option (✓)	Growth* Bonus^	Dividend Reinvestme	_ ,	Dividend Frequency (✓)	• — •
Please tick any one (✓) 5. REDEMPTION	Amount (₹)		OR No. of units	OR All	Units
From Scheme	L&T				
Option (✓) Please tick any one (✓)	Growth Bonus Amount (₹)	Dividend Reinvestme	OR No. of units	Dividend Frequency (✓) ☐ OR ☐ All United to the bank account registered with u	its
f you have multiple bank	ered bank account for electory accounts registered with us the proceeds will not be paid	and wish to receive the	ank account.	(Please enclose an originank account other than your default account No.	nal cancelled cheque leaf) unt please provide the below
	VITHDRAWAL PLAN (S	WP) - Please note that		ance in the source scheme should be a	t least Rs. 25,000
From Scheme Option (✓) Withdrawal preference (L&T Bonus	Dividend Reinvestme	ent Dividend Payout	Dividend Frequency (✓) WTH plan only) Withdrawal frequency (√	☐ Monthly ☐ Quarterly
Withdrawal date (✓)	1st 5th 10th	* 15th 25th With	ndrawal period From	$M \mid Y \mid Y \mid Y \mid Y$ To $M \mid M \mid Y \mid Y \mid Y$	OR Till balance
7. SYSTEMATIC T	RANSFER PLAN (STP)	- Please note that the	value of the unit balance	in the source scheme should be at lea	st Rs. 25,000
From Scheme Option (🗸)	L&T Bonus	Dividend Reinvestme	ent Dividend Payout	Dividend Frequency (✓) □	Monthly Quarterly
Го Scheme Option (✓)	L&T Bonus^			Dividend Frequency (✓)	•
Transfer preference (✓) Transfer frequency (✓) *Default option if not sele 8. DECLARATION	Monthly* Weekly (vected Available in			n only) From MMYYYYYY To MM r(<') 1st 15th* Quarterly (<') 1st	
I/We have read and understood directly or indirectly in making t	I the respective Scheme Informatio this transaction. I/We understand t tributor. Also, the AMFI registered o	hat the upfront commission wi	Il be paid directly by me/us to the	mation Memorandum. I/We have neither received n e AMFI registered distributors based on my/our ass mission or any other), payable to him for different so Date	sessment of various factors includir
X (Sole/	/First Unit Holder)	Х	(Second Unit Holder)	X (Third	Unit Holder)
ACKNOWLEDGE	MENT SLIP (To be filled i				L&T Mutual Fun
Folio No.	Received from		Name of the Sole/First	Unit Holder	
Scheme/Plan/Option Additional Purchase	D- 0		Chagu-/DD/D	otrum ant Na	
Amount (in Rs) Switch Request	Drawn On		Cheque/DD/Payment In	strument No.	For Office Use Onl
Please tick any one (✓) Redemption Request	Amount	OR No. of	units	OR All Units	
Please tick any one (✓) SWP	Amount Instalment amount	OR No. of		OR All Units Quarterly	Acknowledgement
STP	Instalment amount			Quarterly	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.

3. Additional Purchase Request:

- a. 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.
- b. If you are not investing through a Distributor, please suffix "Direct Plan" after the scheme name.
- c. Your investment cheque should be crossed "Account Payee only" and drawn favoring the scheme name where the investment is in a specific scheme
- d. Please ensure that the investment cheque issued by you complies with CTS 2010 requirements stipulated by the Reserve Bank of India. The words "CTS 2010" should appear on the face of the cheque.
- e. Payments made by Cash/Money Order/Postal Order, Non- MICR cheques Outstation cheques are not accepted. Post dated cheques will not be accepted except for investment made under Systematic investment Plan.
- f. Third Party Payments for investments are not accepted except in the below cases :
 - Payments made by Parents/Grand Parents/related persons on behalf of a minor in consideration of natural love and affection for value not exceeding Rs 50,000\
 - Payment by employer on behalf of employees under SIP or lump sum subscription through Pay Roll deductions
 - Custodian on behalf of an FII or Client made by Custodian.

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.

If you wish to hold your investments in the Dematerialised mode, please provide the name and DP ID of your Depository Participant and your Beneficiary Account Number. Please also attach a copy of the Client Master that you may have received from your Depository Participant.

Please ensure that the sequence of names in the application form matches the sequence in which the Demat account is held. If the sequence of names does not match with the Demat account details provided therein, the Units will not be transferred to the Demat Account and the Units will be held in the physical mode.

Please note that this is an additional facility offered to unit holders who wish to hold units in the dematerialised mode. This is not a mandatory requirement and unit holders can continue holding units physically with the mutual fund. If you do not wish to hold your mutual fund units in the dematerialised form, please strike off this section.

If the demat account details in the application form are incomplete/incorrect or does not match with the records of the Depository, units would be allotted and held electronically in the Fund's books and an Account Statement confirming the unit allotment would be sent to you.

4. Redemption Request:

- Please specify scheme details and the amount/number of units you wish to redeem.
 If you wish to redeem all units, tick against the box provided.
- If your redemption request specifies both amount and units for redemption, the latter will be processed.
- c. A redemption will be processed only for the amount which has been realized.
- d. To safeguard investors against fraudulent action, where the redemption request is received along with Change of address/bank request, the AMC reserves the right to release the payment only after completing necessary additional checks.

5. Switch Request:

- a. Please ensure that the Target and Source schemes are correctly indicated.
- Please specify the amount/number of units you wish to switch. If you wish to switch all units, tick against the box provided.
- If your switch request specifies both amount and units for redemption, the latter will be processed.
- d. If the balance in the source scheme/option, after taking the switch into account falls below the minimum redemption size (either in amount or units whichever is less), the entire balance in the Source scheme will be switched to the Target Scheme.

6. Systematic Withdrawal Plan (SWP):

- a. The minimum withdrawal size is Rs 1000 or 100 units.
- b. SWP will be processed within 7 calendar days from the date of your request.
- You can cancel a registered SWP at any time by submitting a written request. The cancellation will be processed within 15 days.
- d. If your SWP request specifies both amount and units, the SWP will be processed for the amount.
- e. 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.

7. Systematic Transfer Plan (STP):

- a. The minimum transfer size is Rs 1000 or 100 units.
- b. STP will be processed 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.
- If the minimum balance criteria are not met when processing an installment, the entire available unit balance will be transferred and the STP will be ceased.
- 8. 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.