Transaction Form For STP & SWP



Please refer to the Gener	ral Instructions for assistance.	If you are not investing the	hrough a Di	stributor, write DIRE	CT in the Distri	butor Code.	Time Stamp
Distributor Code	Sub-Distributor ARN	EUIN	E	Branch Code	Relationship	Manager's Name	
ARN-	Sub-Distributor Code				Mobile +91-		
103807		E133071			E-mail		
Initial Commission will b	e paid by the investor directly	to the distributor, based	d on assess	ment of various fac	tors including t	he service rendered	by the Distributor.
SEBI (Mutual Fund)	Transaction Charges Regulations allow deduction	on of transaction cha	arges of	I/We confirm that the		laration where EUIN is	s not furnished ank by me/us as this is an "executio
to receive transaction ch deductible are Rs. 150/- making a SIP Investment	tment for payment to your distriarges for investments sourcer if you are investing in Mutual, the transaction charges would ould be levied if you are not invest than Rs.10,000/-	d by him. The transaction Funds for the first time. I I be deducted over 3-4 ins	n charges If you are stalments.	sales person of the if any, provided by	above distribute the employee/	or and/or notwithstand	the employee/relationship manage ing the advice of inappropriateness sales person of distributor and th saction.
If this is the first time,	you are investing in any mu	itual fund, please tick h	nere		plicant	∠ 2nd Applicant	
1. APPLICANT II	NFORMATION						
Name of Sole/1st Unit H	lolder First Name		Middle Nar		Last Na	me Fo	lio No.
PAN F	irst Unit Holder		Second L	Jnit Holder		Third	Unit Holder
KYC is mandatory. Ple	ase enclose a copy of KYC	acknowledgement lett	ers for all	applicants.			
Mobile No. +91-		E-mail ID)				
2. SYSTEMATIC	WITHDRAWAL PLAN (S	WP) - Please note that	t the value	of the unit balance	e in the sourc	e scheme should be	e at least Rs. 25,000
Scheme Name L&T Option (<) Growth Dividend Reinvestment							Dividend Payout
Dividend Frequency (wherever applicable)	Daily Weekly	Monthly*	Quarterly	Annual^	Semi-Annual [^]	
Withdrawal preference	e (✓)	OR Capital Appre	eciation (Av	ailable for GROWTH	l plan only)		
Withdrawal frequency	(✓)	Quarterly Sem	i-Annual	Annual			
Withdrawal date (✓) □] 1st _ 5th _ 10th* _ 1	5th □ 20th □ 25th	Withdrawa	I neriod From	MIYIYIYI	Y To M M Y	Y Y Y OR □ Till balance
Scheme Name L&T	TRANSFER PLAN (STP)	- Please note that the	value of the	1		neme should be at I nus^ Dividend Rei	•
	✓wherever applicable) □ Da	illy Weekly Mo	nthly*	Quarterly An	nual^ Ser	mi-Annual^	
To Scheme L&T				Option (✓) ☐ C	Growth* Div	vidend Reinvestment	Dividend Payout
	✓wherever applicable) □ Da	illy Weekly Mo	nthly*		nual^	ni-Annual^	
Transfer preference (✓	/ —	R Capital Appreciation	-		. —		OR Till balance
Transfer frequency (✓				Wed Thu		Fortnightly(✓)	1st 15th*
Transfer frequency (*	Monthly* Quarter			10th* 15th		25th	130 1301
*Default option if not s					2001	2301	
·	N & SIGNATURES (To be	in select schemes onl	-				
I/We have read and und nor been induced by an registered distributors b	erstood the respective Schem ly rebate or gifts, directly or in ased on my/our assessment	le Information Document adirectly in making this tr of various factors include	t, Statemen ransaction. ding the se	I/We understand th rvice rendered by the	at the upfront one distributor. A	commission will be pales, the AMFI register	ndum. I/We have neither receive aid directly by me/us to the AMF ered distributor has disclosed th is being recommended to me/us
€ (So	le/First Unit Holder)		S (Second	Unit Holder)		Æ (Th	uird Unit Holder)
ACKNOWLEDGE	EMENT SLIP (To be filled i	n by the Applicant)					L&T Mutual Fund
Folio No.	Received from		Name o	f the Sole/First Unit	Holder		
Scheme/Plan/Option							For Office Use Only
SWP	Instalment amount	Frequ	uency(√)	Monthly Q	uarterly		
STP	Instalment amount	Frequ	uency(√)	Monthly Q	uarterly W	eekly Fortnightly	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

2. Systematic Withdrawal Plan (SWP):

- a The minimum withdrawal size is Rs 500
- b. SWP will be registered 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.
- 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.
- b. STP will be registered within 7 calendar days from the date of your request.
- 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.
- h. STP transfers can be made on a daily basis i.e. Monday to Friday subject to such days being business days..
- 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.
- 5. 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.