

Special Product Form



SIP (Post Dated Cheques) / SWP/STP form

1 INVESTOR AND INVESTMENT DETAILS

First/Sole Applicant Name											
Folio/Application No.						Existing Investors please mention Folio No. New applicants please mention the application form No.					
Scheme											
Plan											
Option											

2 SYSTEMATIC INVESTMENT PLAN (SIP) THROUGH POST DATED CHEQUES (Investor subscribing to SIP through ECS/Direct Debit must fill up the SIP Auto Debit Form)

Frequency	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly		No. of Installments											
SIP Date	<input type="checkbox"/> 1st <input type="checkbox"/> 7th <input type="checkbox"/> 10th <input type="checkbox"/> 15th <input type="checkbox"/> 20th <input type="checkbox"/> 25th													
SIP Period	SIP From	M	M	Y	Y	Y	Y	SIP To	M	M	Y	Y	Y	Y
Cheque(s) Details	SIP Amount in (figures)						Cheque Nos.							
	Cheque(s) drawn on													

New Investors are requested to fill in the Common Application Form

3 SYSTEMATIC WITHDRAWAL PLAN (SWP)

Frequency	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly		SWP from				M	M	Y	Y	SWP To				M	M	Y	Y
Amount per Withdrawal (Rs)	No of Installments																	

4 SYSTEMATIC TRANSFER PLAN (STP)

From Scheme	Plan	Option	To Scheme	Plan	Option										
STP Dates <input type="checkbox"/> 1st <input type="checkbox"/> 7th <input type="checkbox"/> 10th <input type="checkbox"/> 15th <input type="checkbox"/> 20th <input type="checkbox"/> 25th															
Frequency		<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly		STP from		M	M	Y	Y	STP To		M	M	Y	Y
Amount Per Installment (Rs)		No of Installments													

Please see the Plans & Options and Dividend policy details in the Scheme Information Document before filling in the above details.

5 DECLARATION AND SIGNATURES

I/We have read and understood the contents of the Scheme Information Document (SID) and Statement of Additional Information (SAI) of the Scheme (s). I/We hereby apply for units of the scheme as indicated above and agree to abide by the terms and conditions, rules and regulations of the Scheme and to other statutory requirements of SEBI, AMFI, Prevention of Money Laundering Act, 2002 and such other regulations as may be applicable from time to time. I/We confirm to have understood the investment objective, investment pattern and risk factors applicable to Plan/Options under the Scheme (s). I/We agree that in case my/our investment in the Scheme is equal to or more than 25% of the corpus of the scheme, then Peerless Funds Management Co Ltd, has full right to refund the excess to me/us to bring my/our investment below 25%. I/We have not received nor been induced by any rebate or gifts, directly or indirectly in making this investments. I/We undertake that these investments are my/our own and acknowledge that AMC reserves the right to call for such other additional information/documents as required to comply with KYC norms. I/We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulations or any other applicable law enacted by the Government of India or any Statutory Authority. I/We hereby declare that the particulars above are correct. I/We hereby, further agree that the Fund can directly credit all the dividend payouts and redemption amount to my bank details given above 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. The ARN holder has disclosed to me/us all the commission (in the form of train 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.

Sole/1st Applicant/Guardian/Authorised Signatory/POA Holder	2nd Applicant/Authorised Signatory/POA Holder	3rd Applicant/Authorised Signatory/POA Holder

Acknowledgment Slip (To be filled in by the investor) SIP / SWP / STP

Received from Mr./Ms./M/s.	Plan :		Option :	Collection Centre 's Stamp & Receipt Date and Time
An application for Scheme :	Plan :		Option :	
To Scheme:	Date of Commencement:			
Amount :	Frequency:			

Web site www.peerlessmf.co.in
Toll Free No. 1800 200 9995
Non Toll Free : 022 61779922
connect@peerlessmf.co.in

Communication in connection with this application should be addressed to the Registrar, Karvy Computershare Pvt. Ltd., (Unit: Peerless Mutual Fund), 8-2-596 Karvy Plaza, Avenue 4, Street No.1, Banjara Hills, Hyderabad 500034.