

Systematic Investment Plan (SIP) / Micro SIP Form



L&T Mutual Fund

Please refer to the General Instructions & Checklist for assistance. If you are not investing through a Distributor, write DIRECT in the Distributor Code.

Time Stamp

Distributor Code	Sub-Distributor ARN	EUIN	Branch Code	Relationship Manager's Name
ARN - 18053 ARN-	Sub-Distributor Code	E040403		Mobile +91- _____
				E-mail _____

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 (Mandatory. If left blank, the application is liable to be rejected)

Name of Sole/First Unit Holder	First Name _____	Middle Name _____	Last Name _____	Folio No. _____
PAN/PEKRN**	First Unit Holder	Second Unit Holder	Third Unit Holder	

KYC is mandatory. Please enclose a copy of KYC acknowledgement letters for all applicants.

Mobile No. +91- _____ E-mail ID _____

2. SIP & INVESTMENT DETAILS (Mandatory. If left blank, the application is liable to be rejected)

<input type="checkbox"/> New SIP Registration	<input type="checkbox"/> SIP Renewal	<input type="checkbox"/> Update new bank details for SIP Debits (If selected, move to Section 4)
---	--------------------------------------	--

Scheme Name L&T

Option (✓) Growth* Dividend Payout Dividend Reinvestment

Dividend Frequency

First Instalment Details:	Instrument No. _____	Instrument Date <input type="text" value="D D M M Y Y Y Y"/>
Account Type (✓)	<input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRE <input type="checkbox"/> NRO <input type="checkbox"/> Others	
Drawn On _____	Bank Name _____	Bank Branch _____
	Bank City _____	

SIP Amount	₹ _____
(Minimum 500 for Equity schemes & 1000 for Non Equity schemes)	
SIP Debit Date (✓)	<input type="checkbox"/> 1st <input type="checkbox"/> 5th <input type="checkbox"/> 10th* <input type="checkbox"/> 15th <input type="checkbox"/> 25th <input type="checkbox"/> All five dates
SIP Frequency (✓)	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly
SIP Period	<input type="checkbox"/> Until Cancelled OR From <input type="text" value="M M Y Y Y Y"/> To <input type="text" value="M M Y Y Y Y"/>

(Note: Minimum gap of 30 days required between first cheque and subsequent instalment. In case of discrepancy in the SIP Period, the one mentioned in the Debit Mandate will be considered.)

Reason for your SIP (✓) Children's education Children's marriage House Car Retirement

SIP Top Up (Optional) - Available only for investments effected through Auto Debit.

Top Up Amount ₹

Top Up Frequency Half Yearly Yearly*

Top Up to continue till SIP amount reaches ₹

Top Up to continue till # (Please check any one)

* SIP Top Up will cease once the mentioned amount is reached.

*Default option if not selected

It is the date from which SIP Top-Up amount will cease

** PEKRN required for Micro investments upto Rs. 50,000 in a year

3. DECLARATION & SIGNATURES (Mandatory. If left blank, the application is liable to be rejected)

I/We have read and understood the respective Scheme Information Document, Statement of Additional Information and Key Information Memorandum of L&T Mutual Fund. I/We hereby declare that I/We do not have any existing Micro SIPs which together with the current application will result in aggregate investments exceeding Rs. 50,000 in a year. I/We have neither received nor been induced by any rebate or gifts directly or indirectly in making this Systematic Investment. The ARN holder has disclosed to me/us all the commissions (in trail commission or any other), payable to him for the different competing schemes of Mutual Funds from amongst which the Scheme is being recommended to me/us. I/We hereby declare that the particulars given here are correct and express my/our willingness to make payments referred above through participation in ECS/ACH/Auto Debit. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I/We would not hold L&T Mutual Fund, their Investment Manager - L&T Investment Management Limited, or any of their appointed service providers or representatives responsible. I/We will also inform L&T Investment Management Limited about any changes in my/our bank account. I/We have read and agreed to the terms and conditions mentioned overleaf.

SIGNATURE/S AS PER L&T MUTUAL FUND (To be signed as per Mode of Holding)

X

Sole/First Applicant/Guardian

X

Second Applicant

Third Applicant

4. DEBIT MANDATE FORM FOR NACH/ECS/AUTO DEBIT

L&T Mutual Fund	UMRN <input type="text"/> Office use only <input type="text"/>	Date <input type="text" value="D D M M Y Y Y Y"/>
Tick (✓)	Sponsor Bank Code <input type="text"/> Office use only <input type="text"/>	Utility Code <input type="text"/> Office use only <input type="text"/>
<input type="checkbox"/> CREATE <input type="checkbox"/> MODIFY <input type="checkbox"/> CANCEL	I/We hereby authorize <input type="text"/> L&T Mutual Fund	to debit (✓) <input type="checkbox"/> SB <input type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> SB-NRE <input type="checkbox"/> SB-NRO <input type="checkbox"/> Other
Bank A/c No. <input type="text"/>	With Bank <input type="text"/> Bank Name <input type="text"/> IFSC <input type="text"/> or MICR <input type="text"/>	an amount of Rs <input type="text"/> Amount in words <input type="text"/> ₹ <input type="text"/>
Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half Yearly <input type="checkbox"/> As & when presented	Debit Type <input type="checkbox"/> Fixed Amount <input type="checkbox"/> Maximum Amount	Scheme <input type="text"/> Email Id <input type="text"/>
Scheme <input type="text"/>	Folio No. <input type="text"/> Mobile No. +91- <input type="text"/>	
Period From <input type="text" value="D D M M Y Y Y Y"/> To <input type="text" value="D D M M Y Y Y Y"/> or <input type="checkbox"/> Until Cancelled	<input checked="" type="checkbox"/> Signature of First Account Holder <input type="text"/>	<input checked="" type="checkbox"/> Signature of Second Account Holder <input type="text"/>
	1. Name as per Bank Records <input type="text"/>	2. Name as per Bank Records <input type="text"/>
		3. Name as per Bank Records <input type="text"/>

This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate or the bank where I have authorized the debit.

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.

2. SIP & Investment Details:

- 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.
- 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 or in a financial year 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.
- In case of investments held jointly, the first holder must not possess a PAN.
- 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.
- 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 or deductions out of expense re reimbursements.

- 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.

- Investors can opt for SIP Top Up facility wherein the amount of SIP can be increased at fixed intervals. Top Up facility will not be available for investments where Auto Debit period has not been indicated by the investor.
- Your investment cheque should be crossed "Account Payee only" and drawn favouring 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 cheques Outstation cheques are not accepted.

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 Debit Mandate Form for NACH/ECS/Auto Debit. The sole/first holder must be one of the holders in the bank account..
- The UMRN, the Sponsor Bank Code and the Utility Code are meant for office use only and need not be filled by the investors.
- 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	<input type="checkbox"/>
Name of the Sole/First Holder furnished in the Form	<input type="checkbox"/>
SIP details listed below are furnished	<input type="checkbox"/>
<input type="checkbox"/> SIP installment amount <input type="checkbox"/> No. of SIP installments <input type="checkbox"/> SIP date <input type="checkbox"/> SIP frequency <input type="checkbox"/> SIP period <input type="checkbox"/> SIP Scheme	<input type="checkbox"/>
Complete Bank details are furnished in the form	<input type="checkbox"/>
<input type="checkbox"/> Name of the Sole/1 st Holder of the Bank Account <input type="checkbox"/> Bank A/c No <input type="checkbox"/> MICR <input type="checkbox"/> IFSC	<input type="checkbox"/>
All holders have signed in accordance with the Mode of Holding as provided to us at the relevant place	<input type="checkbox"/>
All Bank Account Holders have signed in the same manner and sequence as their Bank Account in the relevant place	<input type="checkbox"/>