

Systematic Investment Plan (SIP) Form

(Mandate Form for ACH/ECS/Auto Debit)



Please refer to the general instructions for assistance and complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink

Time Stamp

Distributor Code	Sub-Distributor ARN	Branch Code	Relationship Manager's Name		EUIN
ARN 102683	Sub-Distributor Code		Mobile +91-		E 024075
			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.

Investor's declaration where EUIN is not furnished. I/We hereby 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 or notwithstanding the advice of the in appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

X (Sole/First Applicant/Guardian)

X (Second Applicant)

X (Third 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 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)

☐ New SIP Registration ☐ SIP Renewal ☐ Change in Bank Details (for an existing SIP)

Scheme Name L&T

Option (✓) ☐ Growth* ☐ Bonus^ ☐ Dividend Payout ☐ Dividend Reinvestment

Dividend Frequency ☐ Monthly* ☐ Quarterly

First cheque/DD/Pay Order No.

First cheque/DD/Pay Order date

Account Type (Please ✓) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ Others

Drawn On

SIP Amount

(Minimum ₹ 500 for Equity schemes & ₹ 1000 for Non-Equity schemes)

₹

SIP Debit Date

(Please ✓ any one)

☐ 1st ☐ 5th ☐ 10th* ☐ 15th ☐ 25th

☐ All five dates

SIP Frequency (✓)

☐ Monthly* ☐ Quarterly

SIP Period

From M M Y Y Y Y Y Y To M M Y Y Y Y Y Y

OR ☐ Till I instruct discontinuation*

(Note: There should be a minimum time gap of 30 days between the first cheque of SIP investment and the first instalment)

☐ SIP Top UP (Optional)

Top Up Amount* Amount in multiples of ₹ 500 only

Top Up Frequency ☐ Half Yearly ☐ Yearly*

Reason for your SIP (✓)

☐ Children's education ☐ Children's marriage ☐ House ☐ Car ☐ Retirement

*Default option if not selected

^Available in select schemes only

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.

Date D D M M Y Y Y Y Y Y

Please refer the checklist provided at the reverse of the form

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

Sole/First Applicant/Guardian

Second Applicant

(Not applicable if first applicant is minor)

Third Applicant

(Not applicable if first applicant is minor)

SIGNATURE/S AS PER BANK RECORDS (To be signed by all holder if Mode of Operation in the Bank is Joint)

Sole/First Applicant/Guardian

Second Applicant

(Not applicable if first applicant is minor)

Third Applicant

(Not applicable if first applicant is minor)

4. DEBIT MANDATE



Debit Mandate Form for NACH/ECS/Auto Debit

UMRN

Office use only

Date D D M M Y Y Y Y Y Y

Tick (✓)

CREATE
MODIFY
CANCEL

Sponsor Bank Code Office use only

Utility Code Office use only

I/We hereby authorize L&T Mutual Fund

to debit (✓) ☐ SB ☐ CA ☐ CC ☐ SB-NRE ☐ SB-NRO ☐ Other ☐

Bank A/c No.:

With Bank: Bank Name IFSC or MICR

an amount of Rupees Amt. in words ₹

Frequency ☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ As & when presented DEBIT TYPE ☐ Fixed Amount ☐ Maximum Amount

Reference 1 Folio No. Phone No.

Reference 2 Scheme Name Email Id

PERIOD

From D D M M Y Y Y Y Y Y

To D D M M Y Y Y Y Y Y

or ☐ Until Cancelled

Signature of Primary Account Holder Signature of Second Account Holder Signature of Third Account Holder

1. Name as in bank records 2. Name as in bank records 3. Name as in bank records

This is to confirm that the declaration has been carefully read, understand & made by me /us.

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:**

- 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. 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.

- d. Investors can opt for SIP Top Up facility wherein the amount of SIP can be increased at fixed intervals.

- e. Your investment cheque should be crossed "Account Payee only" and drawn favouring the scheme name where the investment is in a specific scheme

- f. 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 boxed provided in the form.

4. **Debit Mandate:**

- a. 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..
- 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 code are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.
- d. Please furnish the Folio No (if you are holding an existing folio with us) or the Application no (if this is your first investment with L&T Mutual Fund) in Reference 1 of the Mandate Form.
- e. Please furnish the Scheme Name in which you wish to invest in Reference 2 of the Mandate Form.

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"/> 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"/>
Complete Bank details are furnished in the form <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 and IFSC code	<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"/>