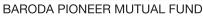
## **Application Form STP / SWP**

Amount ₹







Please read product labeling details available on cover page and the instructions before filling up the Application Form. Tick (\*) whichever is applicable, strike out whichever is not required. Please refer the STP / SWP: Terms & Conditions while filling up the Form. Tick (\*) whichever is applicable, strike out whichever is not required.

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of the schemes of Baroda Pioneer Mutual Fund)						
Distributor / Broker ARN	Sub-Broker Code	Sub-Broker ARN	EUIN	LG Code	I H No. (K Bolt)	Date & Time Stamp
127182			E206630		For Office use only	For Office use only
		itor, based on the investor's assessment of va			er/sales person of the above dis	tributor or notwithstanding the
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 and the distributor has not charged any advisory fees on this transaction.  TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Please refer Instructions for filling up the Application Form - VIII)						
I confirm that I am a First time investor across Mutual Funds.						
(₹150 deductible as Transaction Charge and payable to the Distributor) (₹100 deductible as Transaction Charge and payable to the Distributor)						
In case the subscription amount is ₹10,000/- or more and your distributor has opted to receive Transaction Charges, they are deductible, as applicable, from the purchase / subscription amount and payable to the distributor. Units will be issued against the balance amount.						
Please note that the applicant details and mode of holding are as per the existing Folio Number						
Folio No.						
Name of Sole / First Unit Holde	r					
SYSTEMATIC TRANSFER PLAN (STP)						
No. of units Div	vidend Capital App	preciation	ount (Please tick one o	ption only).		
Folio No.	PAI	N	Er	nclosed (please √)	PAN copy	KYC
Mobile No.	Em	ail ID				
Amount ₹ (in figures)	₹ (i	n words)				OR
Units						
	thly (Default) Calendar Qu	iarter STP Period	Start From D D	M M Y Y Y	Y End On D D	M M Y Y Y Y
STP Date 1st 10th (Default) 15th 25th						
FROM Scheme Option Sub-Option						
TO Scheme		Option		Sub-Option		
	DAMAL DLAN (CWD)	Орион		oub c	pption	
SYSTEMATIC WITHDRAWAL PLAN (SWP)						
Fixed Amount Capital Appreciation (Please tick one option only)						
Folio No.	PAI		Er	nclosed (please √)	PAN copy	KYC
Mobile No.		ail ID				
Amount ₹ (in figures)	₹ (iı	n words)				OR
Units						
SWP Frequency Mon	arter SWP Period	SWP Period         Start From         D         D         M         M         Y         Y         Y         End On         D         D         M         M         Y         Y         Y         Y         End On         D         D         M         M         Y				
SWP Date	☐ 15th ☐ 25th	□ 25th				
FROM Scheme Option Sub-Option						
DECLARATION AND SIGNATURES						
I/We have read and understood the contents of the scheme related documents and hereby apply for allotment of units in the Scheme. I/We agree to abide by the terms, conditions, rules & regulations governing the						
Scheme. I/We hereby declare that I/We am/are authorized to make this investment and that the amount invested in the Scheme is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any act, rule, regulation, notification or direction or any other applicable laws issued by the Government of India or any regulatory or statutory authority. The ARN holder has						
disclosed to me/us all the commission (in the form of trail commission or any other mode), payable to him/it for the different competing schemes of various mutual funds from amongst which the Scheme is being recommended to me/us. I/We have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct,						
complete and truly stated. Applicable for NRIs: I/We confirm that I am/we are Non-Residents of Indian nationality/origin but not residents of the United States and Canada and I/we hereby confirm that I/we have remitted funds from abroad through approved banking channels or from my/our monies in my/our domestic account maintained in accordance with applicable RBI guidelines.						
Signature / Thumb Ir 1st Applicant / POA			ession of 2nd Applicant / r / Guardian	S	Signature / Thumb Impression POA Holder / Gua	
INSTRUCTION						
1. An STP will be treated like an SWP from the outgoing scheme and an SIP into the incoming scheme. 2. Exit Load, as applicable from time to time, will be levied on STP/SWP. 4. For SWP - incase the payout date is not mentioned, the payroll will continue till the balance units are reduced to zero.						
3. In the case of STP/SWP, the request to start the STP/SWP must reach the ISC at least 7 working days  For STP - incase the period or end date is not given, STP units / amounts will get switched out till it						
prior to the first STP/SWP.  meets the minimum investment amount in switched in scheme.  Incase the from date is not mentioned, it will be treated as the 1st day of the following month.						
						····>
ACKNOWLEDGMENT SLI	TO be filled in by the Applicar	11)				
Investor Name						
Folio No.			Dated D D	M M Y Y Y	Y	
STP / SWP						
Scheme / Plan / Ontion / Sub-0	1)ntion		To (for STP Only)			