Application Form STP / SWP







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	INFURI	VIATIO	N (Only	empane	lled Distribut	ors / Brok	cers will	be pe	ermitted to d	listribut	e Units of the sche	mes of E	Baroda Pioneer Mu	tual Fund)			
Distributor / Broker ARN Sub-Broker Co			cer Code	le Sub-Broker ARN				EUIN		LG Code	I	H No. (K Bolt)	Date & Time	•			
120166 Upfront commission shall be pa	aid directly by	the invest	or to the AA	ACI registered	diatributor board o	n the investor	rla aaaaaaam	ant of us	18570		onion randarad by the distr		or Office use only	For Office u	se only		
I/We hereby confirm that the advice of in-appropriateness, if													les person of the above dis	tributor or notwithstand	ding the		
											refer Instructions f						
☐ I confirm that I am											I am an existing		• • • • • • • • • • • • • • • • • • • •				
(₹ 150 deductible as In case the subscription						antad to ra	oivo Tron	nootio			e as Transaction Char				wahla ta tha		
distributor. Units will be is	ssued agai	nst the ba	alance am	nount.								, 110111 1116	purchase / subscripti	on amount and pa	lyable to the		
Please note th	hat the	applic	ant de	tails an	d mode of	holding	g are a	s pe	r the exis	ting Fo	olio Number						
Folio No.																	
Name of Sole / First U	Jnit Holde	r															
SYSTEMATIC	TRANS	FER P	LAN (STP)													
☐ No. of units	☐ Div	/idend		Capita	l Appreciation	1	Fixe	d Am	ount (Please	tick on	e option only).						
Folio No.					PAN						Enclosed (please	√)	PAN copy	KYC			
Mobile No.					Email ID												
Amount ₹ (in figures)	res) ₹ (in words)																
Units																	
STP Frequency	Mon	thly (De	efault) [Calenda	ar Quarter	ST	P Period		Start From	D C) M M Y Y	YY	End On D D	M M Y Y	Y Y		
STP Date																	
FROM Scheme								, di	Sub-Option								
TO Scheme					Option Option			Sub-Option Sub-Option									
SYSTEMATIC	WITHDI	ο Λ\ <i>λ</i> /Λ	I DI AI	I (CIMD)		Орг	1011					oub Optio	JII				
				v (3WF)									/DI	anna kinkama ni	ation and A		
Fixed Amount	Capit	ai Appre	eciation					T 1				0 =	`	ease tick one or	otion only)		
Folio No.					PAN						Enclosed (please	√) L	PAN copy	KYC			
Mobile No.					Email ID												
Amount ₹ (in figures)			<u> </u>		₹ (in words)	<u> </u>	1 1								OR		
Units																	
SWP Frequency	Mon	thly (De	efault) [Calenda	ar Quarter	SW	P Period	l	Start From	D C	M M Y Y	YY	End On D D	M M Y Y	YY		
SWP Date	☐ 1st			Oth (Defa	ult) 🗌 15th		<u> </u>	ith									
FROM Scheme						Option				Sub-Option							
DECLARATION	N AND S	SIGNA	TURES														
I/We have read and unde																	
	ntion or eva	sion of a	ny act, rul	le, regulatio	n, notification (or direction	or any otl	her ap	plicable laws is	ssued by	the Government of Inc	ia or any r	egulatory or statutory	authority. The ARI	N holder has		
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 or statutory at other model, payable to him/it for the different competing schemes of various mutual funds from amongst which the Scheme is bein 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 correc														m is correct,			
complete and truly stated funds from abroad throug														onfirm that I/we ha	ave remitted		
Signatur	re / Thumb I	mnression	n of Sole /			Signat			ession of 2nd Ap			Signs	ture / Thumb Impression				
1st App																	
INSTRUCTION																	
An STP will be treated		P from th	ie outaoin	a scheme a	nd an SIP into th	ne incomin	a scheme.	_	4. For SWP	- incase	the payout date is not	mentione	d, the payroll will con	tinue till the balar	ice units are		
2. Exit Load, as applicab	le from tim	e to time,	, will be le	vied on STF	P/SWP.	•			reduced	to zero.	, ,		, , ,				
In the case of STP/SW prior to the first STP/S'		uest to st	tart the S	TP/SWP mu	ist reach the IS	C at least 7	working	days	meets the	e minimu	the period or end date im investment amount	in switche	d in scheme.				
									Incase th	e from da	ate is not mentioned, it	will be trea	ated as the 1st day of t	ne following month	1.		
ACKNOWLEDGM														0			
Investor Name																	
Folio No.									Dated	D C) M M Y Y	YY					
STP / SW	Р										1 1 1 1 1						
Scheme / Plan / Option		Option							To (for STP 0	nlv)							
Amount ₹		- F							1,1,0,1,0	.57			Signati	ure, Stamp & Da	ate		