

INVESTMENT APPLICATION FORM FOR INDIVIDUALS ONLY



App. No.

Time Stamp

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.

Distributor Code ARN- 16709	Sub-Distributor ARN	Branch Code	Relationship Manager's Name		EUIIN E039709
	Sub-Distributor Code		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/-

Investor's Declaration where EUIIN is not furnished

I/We confirm that the EUIIN 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.

If this is the first time, you are investing in any mutual fund, please tick here

Sole/1st Applicant

2nd Applicant

3rd Applicant

1. EXISTING UNIT HOLDER'S INFORMATION

If you hold a Folio with L&T Mutual Fund, please furnish the below information and move to Investment & Payment information section.

Folio No. PAN of Sole/1st Unit Holder

Name of Sole/1st Unit Holder

2. NEW APPLICANT(S) PERSONAL INFORMATION

A) 1ST APPLICANT

Name

Mobile No. +91- E-mail Id* Date of Birth

(Mandatory if first applicant is a minor)

*Investors providing e-mail id will receive Account Statements, Annual Report & other communication over e-mail. If you however wish to receive this communication in your registered postal address, please tick here

PAN Aadhaar Card No.

<p>Tax Status (✓)</p> <input type="checkbox"/> Resident Indian Individual <input type="checkbox"/> Non-Resident Indian Individual (NRI) <input type="checkbox"/> Person of Indian Origin (PIO) <input type="checkbox"/> Foreign Portfolio Investor (FPI) <input type="checkbox"/> Others (please specify)	<p>Occupation (✓)</p> <input type="checkbox"/> Private Sector Service <input type="checkbox"/> Retired <input type="checkbox"/> Housewife <input type="checkbox"/> Public Sector Service <input type="checkbox"/> Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Government Service <input type="checkbox"/> Student <input type="checkbox"/> Others (please specify) <input type="checkbox"/> Business <input type="checkbox"/> Forex Dealer	<p>Gross Annual Income (Rs.) (✓)</p> <input type="checkbox"/> <= 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs <input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs to 1 Crore <input type="checkbox"/> > 1 Crore <p>Net Worth of 1st Applicant as on</p> <input type="text"/> Rs.
--	---	--

<p>Country of Birth (✓)</p> <input type="checkbox"/> India <input type="checkbox"/> U.S.A. <input type="checkbox"/> Others (please specify)	<p>If you are a politically exposed person or related to a politically exposed person please (✓).</p> <input type="checkbox"/> I am a politically exposed person. <input type="checkbox"/> I am related to a politically exposed person.	<p>Country of Tax Residence (✓)</p> <input type="checkbox"/> India <input type="checkbox"/> U.S.A. <input type="checkbox"/> Others (please specify) Tax ID <input type="text"/>
--	---	---

ADDRESS (Address as per KRA records will overwrite this address if you are KYC compliant)

<p>Correspondence Address</p> <p>City/Town <input type="text"/> Pin <input type="text"/></p> <p>State <input type="text"/> Country <input type="text"/></p> <p>Tel (R) (ISD) (STD) <input type="text"/></p> <p>Tel (O) (ISD) (STD) <input type="text"/></p>	<p>Overseas Address (Mandatory for NRIs/PIOs)</p> <p>City/Town <input type="text"/> Pin <input type="text"/></p> <p>State <input type="text"/> Country <input type="text"/></p> <p>Tel (R) (ISD) (STD) <input type="text"/></p> <p>Tel (O) (ISD) (STD) <input type="text"/></p>
--	--

ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)

ARN - 16709

E039709



Received from _____ an application for investment in Scheme L&T _____ Option _____

App. No.

Investment Type (✓) Lumpsum SIP Multi-Scheme SIP

Investment Cheque Details: Cheque No. _____ Rs. _____ Dated

Drawn on Bank _____ Branch _____ City _____

For Office Use Only

Acknowledgement Stamp & Date

BANK ACCOUNT INFORMATION (Mandatory for receiving Redemption/Dividend payments)

Account Number Account Type Savings Current NRE NRO FCNR Others

Bank Name

Branch City

IFSC MICR

If you are not making the investment from the above mentioned bank account, please attach an original cancelled cheque leaf of the other account

Additional Information for Investments through Attorney

If your investment is being made by a Constituted Attorney on your behalf, please furnish the below details and enclose a **notarised copy** of the Power of Attorney for registering the same :

POA Holder's Name

PAN of POA Holder for 1st Applicant Aadhaar Card No. of POA Holder for 1st Applicant

(POA Holder needs to comply with applicable KYC requirements)

GUARDIAN INFORMATION (For Minor Investments)

If the Sole/1st Applicant is a minor (i.e. below 18 years of age as on the date of this application, please provide below details) :

Guardian's Name

PAN of Guardian Aadhaar Card No. of Guardian

(Mandatory to comply with applicable KYC requirements)

Guardian's Relationship with Applicant (✓)	Proof of Date of Birth of Applicant (✓)	Proof of Relationship of Guardian with Applicant (✓)
<input type="checkbox"/> Father	<input type="checkbox"/> Birth Certificate Copy	<input type="checkbox"/> Birth Certificate Copy
<input type="checkbox"/> Mother	<input type="checkbox"/> Passport Copy	<input type="checkbox"/> Passport Copy
<input type="checkbox"/> Court Appointed Guardian	<input type="checkbox"/> Aadhaar Card Copy	<input type="checkbox"/> Court Appointment Order
	<input type="checkbox"/> Others <input type="text"/> (please specify)	<input type="checkbox"/> Others <input type="text"/> (please specify)

B) 2ND APPLICANT (Please note that where the sole/1st applicant is a minor, no joint holders are allowed)

Name

Mobile No. +91- E-mail Id* Date of Birth

(Mandatory if first applicant is a minor)

PAN Aadhaar Card No.

Occupation (✓)	Gross Annual Income (Rs.) (✓)
<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Business <input type="checkbox"/> Student <input type="checkbox"/> Agriculturist	<input type="checkbox"/> <= 1 Lac <input type="checkbox"/> 1-5 Lacs <input type="checkbox"/> 5-10 Lacs
<input type="checkbox"/> Public Sector Service <input type="checkbox"/> Retired <input type="checkbox"/> Forex Dealer <input type="checkbox"/> Others <input type="text"/> (please specify)	<input type="checkbox"/> 10-25 Lacs <input type="checkbox"/> 25 Lacs to 1 Crore <input type="checkbox"/> > 1 Crore
<input type="checkbox"/> Government Service <input type="checkbox"/> Professional <input type="checkbox"/> Housewife	Net Worth of 2nd Applicant as on <input type="text"/>
	Rs. <input type="text"/>

Country of Birth (✓)	If you are a politically exposed person or related to a politically exposed person please (✓).	Country of Tax Residence (✓)
<input type="checkbox"/> India	<input type="checkbox"/> I am a politically exposed person.	<input type="checkbox"/> India
<input type="checkbox"/> U.S.A.	<input type="checkbox"/> I am related to a politically exposed person.	<input type="checkbox"/> U.S.A.
<input type="checkbox"/> Others <input type="text"/> (please specify)		<input type="checkbox"/> Others <input type="text"/> (please specify)
		Tax ID <input type="text"/>

Additional Information for Investments through Attorney

If your investment is being made by a Constituted Attorney on your behalf, please furnish the below details and enclose a **notarised copy** of the Power of Attorney for registering the same :

POA Holder's Name

PAN of POA Holder for 2nd Applicant Aadhaar Card No. of POA Holder for 2nd Applicant

(POA Holder needs to comply with applicable KYC requirements)

Subject to realisation of cheque and furnishing of mandatory information/documents. Please retain this slip till you receive your Account Statement.

call 1800 2000 400 or 1800 4190 200

email investor.line@Intmf.co.in

www.Intmf.com

Please note our lines are open from 9 am to 6 pm, Monday to Friday.

5. DEMAT ACCOUNT INFORMATION (Mandatory for crediting units in demat account)

If you wish to hold your investment in dematerialised mode please furnish the below details and **enclose a copy of the Client Master** that you may have received from your Depository Participant.

Depository: NSDL OR CDSL Please (✓)

Depository Participant Name

Depository Participant (DP) ID

Beneficiary Account Number

6. INVESTMENT & PAYMENT INFORMATION (Please ensure that the cheque complies to the CTS 2010 standards)

Investment Type (✓)

Lumpsum SIP (Also fill & attach SIP Investment Form) Multi-Scheme SIP (Please fill Multi-Scheme SIP Investment Form)

For Lumpsum & SIP Investment (Please issue cheque favouring scheme name)

Scheme Name	L&T	Scheme Name		
Options (✓)	<input type="checkbox"/> Growth [^]	<input type="checkbox"/> Dividend Payout	Dividend Frequency	
		<input type="checkbox"/> Dividend Reinvestment		
Investment Amount		Instrument/ UTR No.	Instrument dated	<input type="text"/>
DD charges (if applicable)		Drawn on Bank		
Net Amount		Bank Branch	City	<input type="text"/>

For Multi-Scheme SIP (Please issue cheque favouring L&T MF Multi-Scheme SIP)

Scheme 1	L&T	Scheme Name	Amount	<input type="text"/>
Options (✓)	<input type="checkbox"/> Growth [^]	<input type="checkbox"/> Dividend Payout	Dividend Frequency	
		<input type="checkbox"/> Dividend Reinvestment		
Scheme 2	L&T	Scheme Name	Amount	<input type="text"/>
Options (✓)	<input type="checkbox"/> Growth [^]	<input type="checkbox"/> Dividend Payout	Dividend Frequency	
		<input type="checkbox"/> Dividend Reinvestment		
Scheme 3	L&T	Scheme Name	Amount	<input type="text"/>
Options (✓)	<input type="checkbox"/> Growth [^]	<input type="checkbox"/> Dividend Payout	Dividend Frequency	
		<input type="checkbox"/> Dividend Reinvestment		
Investment Amount		Instrument/ UTR No.	Instrument dated	<input type="text"/>
DD charges(if applicable)		Drawn on Bank		
Net Amount		Bank Branch	City	<input type="text"/>

[^] Default option if not selected

7. DECLARATION & SIGNATURES

I/We have read and understood the contents of the Scheme Information Document, Statement of Additional Information and Key Information Memorandum of the above Scheme of L&T Mutual Fund including the sections on "Who cannot invest" and "Important Note on Anti Money Laundering, Know-Your-Customer and Investor Protection". I/We hereby apply for allotment/purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. I/We hereby declare that I/We am/are authorised 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, Rules, Regulations, Notifications or Directions issued by any regulatory authority in India. I/We hereby authorise L&T Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/ L&T Mutual Fund's bank(s) and/or Distributor/Broker/Investment Adviser. The ARN holder has disclosed to me/us all the commissions (in the form of trail 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. 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. I/We accept and agree to abide by the terms and conditions (as mentioned on www.lntmf.com) with respect to my/our dealings with L&T Mutual Fund/its Investment Manager through various channels.

APPLICABLE FOR NON-ADVISORY TRANSACTIONS ONLY:

I/We, hereby acknowledge and confirm that the above transaction is "Execution Only" as explained vide SEBI Circular No. CIR/IMD/DF/13/2011 dated 22 August 2011. This investment is being made notwithstanding the advice of the appropriateness/inappropriateness of the same. On such transaction(s), I am not being charged any kind of transaction fee(s) by the AMFI registered distributor. On this transaction, the distributor would be compensated by the Mutual Fund House/Asset Management Company concerned in lines with the commission rate(s)disclosed by the distributor.

***APPLICABLE FOR NRIs/PIOs/FIIs/FPIs INVESTING ON REPATRIATION BASIS ONLY:** I/We confirm that I am/we are Non-Resident(s) of Indian Nationality/Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/our NRE/FCNR Account.

Date:

Sole/FirstApplicant/Guardian



Second Applicant

Third Applicant