

Multi-Scheme SIP Investment Form



Please refer to the General Instructions & Checklist provided overleaf 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- 16709	Sub-Distributor Code	E039709		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. 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.

(Sole/First Applicant/Guardian)

(Second Applicant)

(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. MULTI SIP INVESTMENT DETAILS (Mandatory Section. If Left Blank, the application is liable to be rejected). (Minimum no. of Schemes should be 2)

Scheme 1 Option (✓) Div. Frequency (✓) SIP Amount ₹ _____ L&T <input type="checkbox"/> Growth* <input type="checkbox"/> Div. Reinvestment <input type="checkbox"/> Div. Payout <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Annual*	Total SIP Amount * ₹ _____ (Minimum 500 for Equity schemes & 1000 for Non Equity schemes) SIP Debit Date (✓ any one) <input type="checkbox"/> 1st <input type="checkbox"/> 5th <input type="checkbox"/> 10th* <input type="checkbox"/> 15th <input type="checkbox"/> 25th SIP Period From M M Y Y Y Y To ^^ M M Y Y Y Y
Scheme 2 Option (✓) Div. Frequency (✓) SIP Amount ₹ _____ L&T <input type="checkbox"/> Growth* <input type="checkbox"/> Div. Reinvestment <input type="checkbox"/> Div. Payout <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Annual*	
Scheme 3 Option (✓) Div. Frequency (✓) SIP Amount ₹ _____ L&T <input type="checkbox"/> Growth* <input type="checkbox"/> Div. Reinvestment <input type="checkbox"/> Div. Payout <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Annual*	

* Initial cheque amount should be equal to Total SIP Amount.
In case of discrepancy in the SIP Period, the period mentioned in the Debit Mandate will be considered.

3. FIRST INSTALMENT DETAILS (Mandatory section. If left blank, the application is liable to be rejected. Please issue cheque favouring "L&T MF Multi Scheme SIP")

Instrument No. _____ Instrument Date D| D| M| M| Y| Y| Y| Y|

Account Type (✓) Savings Current NRE NRO Others

Drawn On Bank Name _____ Bank Branch _____ Bank City _____

*Default option if not selected ^Available in select schemes only ^^ Maximum period of 20 years

4. DECLARATION & SIGNATURES (Mandatory section. 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 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 direct debit/participation in ECS. 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)

Sole/First Applicant/Guardian Second Applicant (Not applicable if first applicant is minor) Third Applicant (Not applicable if first applicant is minor)

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

UMRN _____ Office use only _____ Date D| D| M| M| 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 Rs _____ Amount in words _____ ₹ _____

Frequency Monthly Quarterly Half Yearly As & when presented Debit Type Fixed Amount Maximum Amount

Scheme _____ Email Id _____

Folio No. _____ Phone No. _____

Period From D| D| M| M| Y| Y| Y| Y| To D| D| M| M| Y| Y| Y| Y| or Until Cancelled

Signature of First Account Holder Signature of Second Account Holder Signature of Third Account Holder

1. _____ Name & Sign as per Bank Records 2. _____ Name & Sign as per Bank Records 3. _____ Name & Sign as per Bank Records

GENERAL INSTRUCTIONS

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black 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.

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.

2. Contact Details: 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.

3. Investment Details:

a. Please mention the names of the Schemes where you plan to make your investment and your preferred options. If you do not indicate your preferred options, your application would be processed based on the terms & conditions set out in the Scheme Information Document.

b. The SIP frequency for Multi Scheme SIP Investment is Monthly.

c. If you are not investing through a Distributor, please suffix "Direct Plan" after the scheme name.

d. 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.

4. First Installment Details:

a. Your investment cheque should be crossed "Account Payee only" and drawn favoring "L&T Multi Scheme SIP".

b. 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.

5. Declarations & Signatures:

Unit holders need to sign here in accordance to the Mode of Holding provided to us.

6. 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 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.

CHECK LIST FOR MULTI SCHEME 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 amounts <input type="checkbox"/> Total SIP amount <input type="checkbox"/> SIP date <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 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"/>

call 1800 2000 400 or 1800 4190 200

email investor.line@Intmf.co.in

www.Intmf.com

Our lines are open from 9.00 am to 6.00 pm, Monday to Friday

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.