

Please fill only in the space provided. Any additional details/notings/instructions or those provided at a non designated area of the form may not be executed. Kindly strike off the unused Sections of the Form to avoid misuse. Please use separate Transaction Form for each Transaction and for each Scheme / Plan and Kindly refer Instructions overleaf.

Distributor Name and ARN	Sub Broker Name and ARN	Branch/RM Internal Code	Employee Unique ID. No. (EUIIN)	For Office use only
ARN-16709			E039709	

I/We confirm that the EUIIN box is intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the distributor personnel concerned.

Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor.

Existing Folio Number	Name of Sole / First Unitholder	(Sole / FirstApplicant's Signature Mandatory)
Scheme Name / Plan* / Option* / Sub Option*	DSP BlackRock	

**ADDITIONAL PURCHASE** (Cheque / DD to be drawn in favour of 'Name of the Scheme')

Payment Mode:  OTM Facility (One Time Mandate)  Cheque  DD  
 Funds trf  RTGS/NEFT

Amount in Words

Amount in Figures (i) Cheque / DD / RTGS / NEFT No.  
 Rs. \_\_\_\_\_

DD Charges (ii) Cheque / Payment Date  
 Rs. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Total Amount (Rs.) (i) + (ii) Payment from Bank A/c No.  
 Rs. \_\_\_\_\_ Pay In A/c No. (Mandatory)

Cheque / DD Drawn on / Payment from Bank & Branch

Account Type  Savings  Current  NRE  NRO  FCNR  Other \_\_\_\_\_

Documents Attached to avoid Third Party Payment Rejection, where applicable :  
 Bank Certificate, for DD  Third Party Declaration

**REDEMPTION** (Write Scheme Name, Plan / Option / Sub Option on top)

Amount in Figures Amount in Words  
 Rs. \_\_\_\_\_

OR (Please note that the Redemption can be done either in Units or in Amount and not in both)  
 Units in Figures Units in Words

**Bank Account for This Redemption Proceeds** (This should NOT be construed as "Change of Bank Mandate" request. Refer Instructions overleaf.)  
 I/We agree that the redemption proceeds should be sent entirely at our risk to the following bank account, if already registered with the fund or to the default bank account if no bank account is mentioned here.

Bank Name \_\_\_\_\_  
 Account No. \_\_\_\_\_

**Important Note:** Unregistered bank account will not be considered, even if mentioned here. To change bank account, investors should avail multiple bank account registration facility and use a specific designated form for this purpose. If unit holder(s) provide a new and unregistered bank mandate with the redemption request (with or without necessary supporting documents) such bank account will not be considered for payment of redemption proceeds and will not be registered.

**SWITCH** (Write switch-out Scheme Name, Plan / Option / Sub Option on top)

Amount in Figures Amount in Words  
 Rs. \_\_\_\_\_

OR (Please note that the Switch can be done either in Units or in Amount and not in both)  
 Units in Figures Units in Words

Switch-in To Scheme / Plan / Option\* / Sub Option\*  
 DSP BlackRock

\* Default Option may be applied in case of no information, ambiguity or discrepancy.

PAN AND KYC UPDATION	KYC LETTER
Sole / First Applicant / Guardian	<input type="checkbox"/> Attached
Second Applicant / Guardian	<input type="checkbox"/> Attached
Third Applicant / Guardian	<input type="checkbox"/> Attached


**PoA (Power of Attorney) REGISTRATION DETAILS** (Refer Instructions overleaf)

Name of the PoA holder \_\_\_\_\_  
 PAN of the PoA holder \_\_\_\_\_ Attached  KYC Letter (Mandatory)  
 Notarized copy of PoA

**DECLARATION & SIGNATURES** (To be signed as per Mode of Holding)

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by DSP BlackRock Mutual Fund, I / We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making this investment. 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. Applicable to NRIs only: I/We confirm that I am/We are Non-Resident(s) of Indian Nationality.

If EUIIN is left blank/not mentioned; I/We hereby 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 or notwithstanding the advice of 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 Unit Holder			
Second Unit Holder	Third Unit Holder	POA Holder, if any	

**ACKNOWLEDGEMENT SLIP** ARN - 16709 E039709 **DSP BLACKROCK MUTUAL FUND**

Acknowledgement is subject to verification. Request may not be processed in case of incomplete / ambiguous / improper / incorrect details in Transaction Form.

Investor Name \_\_\_\_\_

Folio Number \_\_\_\_\_  Additional Purchase or  SIP (PDC)

Scheme DSP BlackRock Total Amount (Rs.) \_\_\_\_\_

Plan / Option / Sub Option \_\_\_\_\_ Total Cheques \_\_\_\_\_  
 Cheques From \_\_\_\_\_  
 No.(s) To \_\_\_\_\_

Redemption or  Switch  
 Amount (Rs.) \_\_\_\_\_  
 OR Units \_\_\_\_\_

PAN and KYC Updation  
 PoA Registration  STP or  SWP or  DTP

ISC Stamp & Signature \_\_\_\_\_