## Systematic Investment Plan (SIP) / Micro SIP Form



| Please refer to the general instructions for assista   | ance and complete all sections in Engli          | sh. For legibility, please use BLOCK LETTER        | RS in black or dark ink.  | Time Stamp   |  |
|--|--|--|---|--|--|
| Distributor/RIA Code   | Sub-Distributor ARN                              | Sub-Distributor Code                               | EUIN  | Branch Code  |  |
| OM FINANCIAL SERVICES  |  |  | E-121369  |  |  |
| ARN- 131906<br>Initial Commission will be paid by the invest   | tor directly to the distributor, based           | on assessment of various factors inclu             | ding the service rendered by the Distrib  | putor.   |  |
| 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   |  |  |   |  |  |
| 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.<br>No transaction charges would be levied if you are not investing through a Distributor or your investment amount is less than Rs.10,000/ If this is the first time, you are investing in any mutual fund, please tick here   |  |  |   |  |  |
| 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 do notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of distributor and do notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of distributor and do 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. |  |  |   |  |  |
|  |  |  |   |  |  |
|  | ⊯ 2nd Ap   | plicant  | Z 3rd Applicant   |  |  |
| 1. APPLICANT INFORMATION   |  |  |   |  |  |
| Name of Sole/1st Unit Holder   | First Name                                       | Middle Name  | Last Name   | Folio No.  |  |
| PAN/PEKRN**  | Unit Holder                                      | Second Unit Holde                                  | r   | Third Unit Holder  |  |
| Aadhaar No.  |  |  |   |  |  |
|  |  |  |   |  |  |
|  |  |  |   |  |  |
| Date of Birth* (1st Unit Holder) D D M M Y Y Y Date of Birth* (2nd Unit Holder) D D M M Y Y Y Date of Birth* (3rd Unit Holder) D D M M Y Y Y Y   |  |  |   |  |  |
| Mobile No. +91         E-mail ID   |  |  |   |  |  |
| 2. SIP & INVESTMENT DETAILS (Ma  |  |  |   |  |  |
| New SIP Registration SIP Renewal Update new OTM debit mandate for already registered SIP (If selected, move to Section 4) OTM Debit Mandate to be registered in the folio. (If selected, Section 4 to be filled in mandatorily)  |  |  |   |  |  |
| $\odot$ OTM Debit Mandate is already reg   | gistered in the folio. Please fill, l            | Unique Mandate Reference Number (UM                | RN)   |  |  |
| Debit Bank Name  |  | Accour   | nt No.  |  |  |
| Scheme Name L&T  |  |  |   |  |  |
| Option (<) O Growth* O Dividend Payout O Dividend Reinvestment O Bonus^ Dividend Frequency   |  |  |   |  |  |
| First Instalment Details: Instrument No.   |  |  |   |  |  |
| Drawn On Bank Name Bank Branch Bank City   |  |  |   |  |  |
| SIP Amount ₹   |  |  |   |  |  |
|  |  |  |   |  |  |
| SIP Debit Date O 1st O 5th O 10th* O 15th O 20th O 25th O All six dates SIP Period From M M Y Y Y Y To M M Y Y Y Y OR O Until Cancelled (Note: Minimum gap of 30 days required between first cheque and subsequent instalment. In case of discrepancy in the SIP Period, the one mentioned in the Debit Mandate will be considered.) (For SIP amount Minimum 500 for   |  |  |   |  |  |
| Equity schemes & 1000 for Non Equity schemes) ^Available in select schemes only  |  |  |   |  |  |
| <b>Reason for your SIP</b> $(\checkmark)$ O Children's   |  | 5  | Retirement O Others   |  |  |
| O SIP Top Up (Optional) - Available only   |  |  |   | Amount in multiples of ₹ 500 only<br>se √any one) ○ Half Yearly ○ <b>Yearly*</b>         |  |
| Top Up to continue till SIP amount reache<br>SIP Top Up will cease once the mention  |  | o continue till <sup>#</sup> D D M M Y Y           |   |  |  |
| <ul> <li>^ SIP Top Up will cease once the mentioned amount is reached. # It is the date from which SIP Top-Up amount will cease. *Default option if not selected</li> <li>3. DECLARATION &amp; SIGNATURES (Mandatory. If left blank, the application is liable to be rejected)</li> </ul>  |  |  |   |  |  |
| 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 hereby declare that 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 commissions (in trail   |  |  |   |  |  |
| referred above through participation in ECS/ACH/Auto Debit<br>their appointed service providers or representatives response  | sible. I/We will also inform L&T Investment Mana | agement Limited about any changes in my/our bank a | We would not hold L&I Mutual Fund, their Investment<br>count. I/We have read and agreed to the terms and co | Manager - L& I Investment Management Limited, or any or<br>onditions mentioned overleaf. |  |
| SIGNATURE/S AS PER L&T MUTUAL  | FUND (To be signed as per Mo                     | ode of Holding)                                    |   |  |  |
|  |  |  |   |  |  |
| Sole/First Applicant/Guardian  | 🗷 Seco   | nd Applicant                                       | S Third Applicant   |  |  |
| 4. OTM DEBIT MANDATE FORM FOR NACH/ECS/AUTO DEBIT  |  |  |   |  |  |
| L&T Mutual Fund UMRN   | Offic  | e use only   | Date D D M M  | Y Y Y Y  |  |
| Tick (✓)   |  |  |   |  |  |
| CREATE Sponsor Bank Code   | CITI00   | OPIGW  | Utility Code C  | ITI0000200000037   |  |
| MODIFY I/We hereby authorize   | L&T Mu   | tual Fund  | to debit ( $\checkmark$ ) $\bigcirc$ SB $\bigcirc$ CA $\bigcirc$ C  | C O SB-NRE O SB-NRO O Other  |  |
| Bank A/c No.   |  |  |   |  |  |
|  |  |  |   |  |  |
| With Bank Bar  | nk 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 All schemes of L&T Mutual Fund Email Id   |  |  |   |  |  |
| Folio No. Mobile No. +91-  |  |  |   |  |  |
| I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.   |  |  |   |  |  |
| Period   |  |  |   |  |  |
| From D D M M Y Y Y   | Y  |  |   |  |  |
| To 3 1 1 2 2 0 9   | 9 🗷 Signature of Firs                            |  | ire of Second Account Holder  |  |  |
| or Until Cancelled   | 1. Name as per Ba                                |  | e as per Bank Records 3.  | Name as per Bank Records   |  |
| This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to the User entity/Corporate or the bank where I have authorized the debit.  |  |  |   |  |  |