Transaction Form For STP & SWP



Please refer to the general instructions for as	sistance and complete all sections	in English. For legibility, pl	ease use BLOCK LETTER	S in black or dark ink.		Time Champ
Distributor/RIA Code	Sub-Distributor ARN		stributor Code	EU	N	Branch Code
Initial Commission will be paid by the inv	•			-		
Transaction Charges: SEBI (Mutual Fund) Re investments sourced by him. The transaction No transaction charges would be levied if you	charges deductible are Rs. 150/- if yo	ou are investing in Mutual Fu	nds for the first time. If you	are making a SIP Investme	nt, the transaction charges w	ould be deducted over 3-4 instalments.
Investor's Declaration where EUIN is not furnish person of the above distributor and/or notwithsta	ed: I/We confirm that the EUIN box has	been intentionally left blank b	y me/us as this is an "execu	tion only" transaction witho	ut any interaction or advice by t	he employee/relationship manager/sales
person of the above distributor and/or notwithst		s, in any, provided by the empty	yeenelationship managens		in the distributor has not charg	eu any auvisory lees on this transaction.
Sole/1st Applicant		2nd Applicant		⊯ 3rd	Applicant	
1. APPLICANT INFORMAT	ION					
Name of Sole/1st Unit Holder	First Name	Middl	e Name	Last Nar	ne Folio N	lo.
PAN/PEKRN**	rst Unit Holder		Secord Unit Holde	r	[Third] L	Jnit Holder
Aadhaar No.	First Unit Holder		Sedond Unit	Holder		Thild Uhit Holder
KIN* First Uhi	t Holder		Se¢on¢ Ur∣it HþIder		Third	Unit Holder
Date of Birth* (1st Unit Holder)	MMYYYYY Dat	e of Birth* (2nd Unit Ho	lder) D D M M	Y Y Y Y Date	of Birth* (3rd Unit Holder)	
Mobile No. +91-		E-ma				
KYC is mandatory. Please enclose copie ^ 14 digit KYC Identification Number (K						
2. SYSTEMATIC WITHDRAW	AL PLAN (SWP) - Pleas	e note that the value	e of the unit baland	ce in the source sc	heme should be at le	ast Rs. 25,000
Scheme Name L&T			Option	(✔) 🗌 Growth ◯ Div	idend Payout 🔘 Divide	end Reinvestment \bigcirc Bonus^
Dividend Frequency (✓ wherever	applicable) O Daily	Weekly O Mon	thly* O Quarter	ly O Annual^ C	Semi-Annual [^]	
Withdrawal preference (✓) ◯Am	nount (₹)	OR	⊖ Capital	Appreciation (Avail	able for GROWTH plan	only)
Withdrawal frequency (\checkmark) \bigcirc Mo	onthly* Quarterly	⊖ Semi-Anni	ual O Annua	al		
Withdrawal date (\checkmark) \bigcirc 1st \bigcirc 5th	○ 10th* ○ 15th ○ 20th ○	25th () 28th Withd	rawal period From			$Y Y$ OR \bigcirc Till balance
Available in select schemes on						
3. SYSTEMATIC TRANSFER	PLAN (STP) - Please no	ote that the value of	the unit balance in	the source schem	e should be at least F	Rs. 25.000
Scheme Name L&T	(-)					lend Reinvestment O Bonus^
Dividend Frequency (✓ wherever	applicable) O Daily O \	Weekly O Monthly*		,	ni-Annual [^]	
To Scheme L&T			Option (✓) ○ Growth ○ Di	vidend Payout 〇 Divid	lend Reinvestment O Bonus^
Dividend Frequency (✓ wherever	applicable) O Daily O \	Veekly O Monthly*	O Quarterly	⊃ Annual^ ○ Sen	ni-Annual^	
				Imeme	viviviv _ mimi	Y Y Y Y OR ○ Till balance
Transfer preference (✓) ○ Amount		Capital Appreciation (Av	ailable for GROWIH pl	an only) From		
Transfer frequency \bigcirc Daily(Please (\checkmark) anyone) \bigcirc Wee		◯ Tue	◯ Wed	◯ Thu	Fri	
⊖ Forti		○ 15th*	⊖ wed			
⊖ Mon	thly* O 1st	\odot 5th	○ 10th*	○ 15th ○ 2	20th O 25th	○ 28th
⊖ Qua	•	◯ 5th	○ 10th*	○ 15th ○ 2	20th O 25th	○ 28th
*Default option if not selected	^Available in selec					
4. DECLARATION & SIGNAT I/We have read and understood the re induced by any rebate or gifts, directly based on my/our assessment of var commission or any other), payable to I Applicable for AADHAAR SUBMISSI accounts maintained with CAMS service	spective Scheme Information or indirectly in making this to ious factors including the se him for different schemes of n ON : I/We hereby give you m	Document, Statement ransaction. I/We unders rvice rendered by the nutual funds from amon y/our consent to validate	stand that the upfront distributor. Also, the gst which the scheme e Aadhaar with UIDAI	commission will be p AMFI registered distri is being recommend and for updating/linking	aid directly by me/us to butor has disclosed the ed to me/us. ng my Aadhaar number t	the AMFI registered distributors e commissions to me/us (in trail based on the PAN given in all my
K (Sole/First Unit	Holder)	ية (Sec	cond Unit Holder)		🖋 (Third	Unit Holder)
ACKNOWLEDGEMENT SL	IP (To be filled in by the	Applicant)				L&T Financial Services
	Received from		ne of the Sole/First	Init Holder		Mutual Fund
Scheme/Plan/Option		INdi				For Office Use Only

SWP	Instalment amount	Frequency(✓)	O Monthly	O Quarterly	O Semi Annual	◯ Annual		Acknowledgement Stamp & Date
◯ STP	Instalment amount	Frequency(✓)	\bigcirc Daily	\bigcirc Weekly	○ Fortnightly	\bigcirc Monthly	○ Quarterly	Stamp & Date