# Systematic Investment Plan (SIP) / Micro SIP Form



Please refer to the general instructions for assis	stance and complete all sect	ions in English. For legibi	lity, please use BLOCK LET	TERS in black or dar	k ink.	Time Stamp	
Distributor/RIA Code	ode Sub-Distributor ARN		-Distributor Code		EUIN	Branch Code	
ARN-106907	N-106907 mission will be paid by the investor directly to the distributor, based on assessm				E143763		
Initial Commission will be paid by the inve Transaction Charges: SEBI (Mutual Fund) Reg investments sourced by him. The transaction ch No transaction charges would be levied if you al Investor's Declaration where EUIN is not furnished person of the above distributor and/or notwithstan	ulations allow deduction of transpers deductible are Rs. 150/- re not investing through a Dis : I/We confirm that the EUIN box	ransaction charges of Rs. if you are investing in Mutr tributor or your investmen has been intentionally left b	100/- from your investment ual Funds for the first time. If nt amount is less than Rs.10, plank by me/us as this is an "ex	for payment to your you are making a SIP 000/ If this is the first ecution only" transact	distributor if your distributor Investment, the transaction ch time, you are investing in any n tion without any interaction or ad	has opted to receive transaction charges for arges would be deducted over 3-4 instalments. nutual fund, please tick here	
✓ Sole/1st Applicant							
1. APPLICANT INFORMATION (Ma	ındatory. If left blank,	the application is l	liable to be rejected)		_		
Name of Sole/1st Unit Holder						Folio No.	
PAN/PEKRN** First	Unit Holder		Second Unit Hold	er		Third Unit Holder	
KIN*               First Unit H	lolder		Second Unit Hold	der		Third Unit Holder	
Date of Birth* (1st Unit Holder)		Date of Birth* (2nd	d Unit Holder)		Date of Birth* (3rd Un	it Holder)	
Mobile No. +91 E-mail ID							
2. SIP & INVESTMENT DETAILS (N	•		•		1	P. //C	
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)  OTM Debit Mandate is already registered in the folio. Please fill, Unique Mandate Reference Number (UMRN)							
Debit Bank Name			Acco	ount No.			
Scheme Name L&T							
	lend Payout Divide	nd Reinvestment	Bonus^ Dividend	I Frequency			
First Instalment Details: Instrument No. Instrument Date Account Type (*) Savings Current NRE NRO Others							
Drawn On							
SIP Amount ₹			SIP Frequency O M	l <b>onthly*</b> O Quar	terly		
SIP Debit Date ○ 1st ○ 5th ○ 10th	h* ○ 15th ○ 20th ○ 2	5th ○ All six dates	SIP Period From		То	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							
Reason for your SIP (✓) ○ Children's Education ○ Children's Marriage ○ House ○ Car ○ Retirement ○ Others							
O SIP Top Up (Optional) - Available or	-	_			p Up Amount ₹Am	nount in multiples of ₹ 500 only	
Top Up to continue till SIP amount reaches^₹ OR Top Up to continue till # □ □ □ M M Y Y Y Y Y Top Up Frequency (Please ✓any one) ○ Half Yearly ○ Yearly*  ^ 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							
· ·			· ·		Default option if not selec	teu	
3. DECLARATION & SIGNATURES (Mandatory. 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 hereby declare that I/We do not have any existing Micro SIPs which together with the curre 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 melus all the commissions (in transmission or any other), payable to him for the different competing schemes of Mutual Funds from amongst which the Scheme is being recommended to melus. I/We hereby declare that the particulars given here are correct and express mylorur willingness to make paymen referred above through participation in ECS/ACH/Auto Debit. 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 their appointed service providers or representatives responsible. I/We will also inform L&T Investment Management Limited about any changes in mylour 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 Applican			Third Applicant		
4. OTM DEBIT MANDATE FO	ORM FOR NACH/E	CS/AUTO DEBIT		_			
L&T Mutual Funḍ Tick (✓) UMRN		Office use only		Dat	te		
CREATE Sponsor Bank Code		CITI000PIGW		Utility Cod	e CIT	10000200000037	
MODIFY CANCEL  I/We hereby authorize		L&T Mutual Fund		to debit (✓)	○SB ○CA ○CC	○ SB-NRE ○ SB-NRO ○ Other	
Bank A/c No.							
With Bank		IFSC			or MICR		
an amount of Rs Amount in words ₹							
Frequency Monthly Quarterly Half Yearly Z As & when presented Debit Type Sixed Amount Z Maximum Amount							
Scheme				Emai	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	g & Signat	ture of First Account H	older 🗷 Sign	ature of Second	Account Holder	Signature of Third Account Holder	
To 3 1 1 2 2 0 9 or Until Cancelled	1.		2.		3.	5	

#### **GENERAL INSTRUCTIONS**

Please read the below instructions carefully before filling the form. Please fill up the form in English in BLOCK LETTERS with black or dark 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. Please note in case of any error while filling the form all applicants must sign against the corrections.

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.

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.

KYC is mandatory. Please enclose copies of KYC acknowledgement letters for all applicants. \*\*PEKRN required for Micro investments upto Rs. 50,000 in a year.

\* 14 digit KYC Identification Number (KIN) and Date of Birth is mandatory for Individual(s) who has registered under Central KYC Records Registry (CKYCR).

#### 2. SIP & Investment Details:

- a. New Investors who wish to enroll for SIP investment are required to fill (i) OTM Mandate Form (ii) SIP Registration Form and (iii) the respective Scheme Application form (included in the Key Information Memorandum). New Investors can apply for SIP into respective Scheme / Plans / Option without any existing investment /folio. Please mention the name of the Scheme where you plan to make your investment and your preferred option. If you do not indicate your preferred option, your application would be processed based on the terms & conditions set out in the Scheme Information Document. If you are not investing through a Distributor, please suffix "Direct Plan" after the scheme name.
- b. Where a One Time Mandate is already registered in a folio for a bank account, the Unit Holder(s) is not required to fill the OTM debit mandate again. However, please mention the UMRM, debit bank name & account number.
- c. Where the OTM mandate is getting submitted for the first time, please fill the OTM debit mandate form for NACH/ ECS/ Auto debit mandatorily. Enclose cancelled cheque leaf of the bank where OTM is getting registered if the initial purchase cheque is not from the same bank account.
- d. Micro SIP: As per AMFI notification and guidelines issued on July 4, 2009, SIPs or Lumpsum purchases by eligible investors in a rolling 12 month period not exceeding Rs. 50,000 shall be exempt from the requirement of PAN. From January 1, 2012, KYC is mandatory for all holders of Micro investments.
- The exemption of PAN requirement is only available to individuals.
- Eligible investors may invest through SIP or lumpsum purchase without providing PAN subject to the threshold amount as mentioned above.
- Eligible investors should attach a copy of KYC acknowledgment letter quoting PAN exempt KYC Reference No. (PEKRN) along with the application form.
- e. Third Party Payments: Third Party Payments for investments are not accepted except in the below cases

- Payments made by 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 or deductions out of expense re imbursements
- Custodian on behalf of an FPI or Client made by Custodian.
- Payment by an AMC to its empanelled distributor on account of commission/ incentive etc. in the form of Mutual Fund units through SIP or lump sum/one time subscription.
- Payment by a Corporate to its Agent/Dealer/Distributor on account of commission or incentive payable for sale of its goods/services in the form of Mutual Fund units through SIP or lump sum/one time subscription.

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.

- SIP Top-Up Facility: Investors can opt for SIP Top Up facility wherein the amount of SIP can be increased at fixed intervals.
- The minimum amount of increase under SIP Fixed Amount Top-Up facility should be Rs. 500/- and in multiples of Rs.500/- thereof.
- SIP Top-Up frequency in case of investors availing Monthly SIP facility will be half yearly and yearly and for availing Quarterly SIP facility, the frequency will be yearly. In case the SIP Top-Up frequency is not indicated under Monthly SIP, it will be considered as yearly.
- g. Your investment cheque should be crossed "Account Payee only" and drawn favoring the scheme name where the investment is in a specific scheme
- n. 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 cheque, outstation cheques are not accepted.
- j. For detailed terms and conditions on SIP, SIP Top-up, OTM facility, please visit our website www.ltfs.com and also refer to scheme related documents.

## 3. Declarations & Signatures:

Unit holders need to sign here in accordance to the Mode of Holding provided to us and as per the mode of holding in the bank account in the same sequence and manner in the relevant boxes provided in the form.

### 4. Debit Mandate:

- a. Please fill all the required details in the OTM Debit Mandate Form for NACH/ ECS/Auto Debit. The sole/first holder must be one of the holders in the bank account
- 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 code and the 11 digit IFSC are mandatory requirements without which your SIP applications will be rejected. You should find these codes on your cheque leaf.

CHECK LIST FOR SIP INVESTMENT FORM						
Application No./Folio No. quoted on the Form						
Name of the Sole/First Holder furnished in the Form						
SIP details listed below are furnished  SIP installment amount O No. of SIP installments O SIP date O SIP frequency O SIP period O SIP Scheme	0					
Complete Bank details are furnished in the form  O Name of the Sole/1st Holder of the Bank Account  O Bank A/c No  O MICR  O IFSC	0					
All holders have signed in accordance with the Mode of Holding as provided to us at the relevant place						
All Bank Account Holders have signed in the same manner and sequence as their Bank Account in the relevant place						

call 1800 2000 400 or 1800 4190 200

email investor.line@Intmf.co.in

www.ltfs.com

Please note our lines are open from 9 am to 6 pm, Monday to Friday and 9 am to 1 pm on Saturday.