Transaction Form For STP & SWP

O STP Instalment amount



ease refer to the general instructions for assistance and complete all sec						Time Stamp
Distributor/RIA Code	Sub-	Distributor ARN	Sub-Distributor	Code	EUIN	Branch Code
ARN-11825	1					
al Commission will be paid by	the investor directly	to the distributor, bas	ed on assessment of various	factors including the	e service rendered by the Distribu	tor.
estments sourced by him. The tran transaction charges would be levi estor's Declaration where EUIN is no	nsaction charges deductil led if you are not investin ot furnished: I/We confirm t	ble are Rs. 150/- if you are ng through a Distributor o that the EUIN box has been	 investing in Mutual Funds for the fi or your investment amount is less the intentionally left blank by me/us as the 	irst time. If you are maki han Rs.10,000/ If this is his is an "execution only"	ing a SIP Investment, the transaction ch s the first time, you are investing in any n " transaction without any interaction or ad	has opted to receive transaction charg arges would be deducted over 3-4 instaln utual fund, please tick here vice by the employee/relationship manage ot charged any advisory fees on this transa
Sole/1st Applicant		≪ 2nd a	Applicant		∡ 3rd Applicant	
1. APPLICANT INFO	RMATION	Z ZIIU /	тррпоатт		2 ord Applicant	
ame of Sole/1st Unit Hold	er Firs	st Name	Middle Name		Last Name	Folio No.
AN/PEKRN**	First Unit Hold	er	\$econd	Unit Holder		Fhird Unit Holder
N*	rst Unit Holder			Jrlit Hþlder		Third Unit Holder
ate of Birth* (1st Unit Holder)	D D M M Y	Y Y Y Date of	Birth* (2nd Unit Holder)	D M M Y Y	Y Y Date of Birth* (3rd Unit	Holder) D D M M Y Y Y
obile No. +91-			E-mail ID			
-	•	-		•	restments upto Rs. 50,000 in a yea KYC Records Registry (CKYCR).	r.
SYSTEMATIC WITH	DRAWAL PLAN	N (SWP) - Please	note that the value of th	e unit balance ir	the source scheme should	be at least Rs. 25,000
cheme Name L&T				Option (✓) ☐	Growth ○ Dividend Payout ○	Dividend Reinvestment O Bon
vidend Frequency (√whe	erever applicable)	O Daily O W	Veekly O Monthly*	O Quarterly C	Annual [^] O Semi-Annual [^]	
ithdrawal preference (✓)	OAmount (₹)		OR 0	○ Capital Appre	ciation (Available for GROWT	H plan only)
ithdrawal frequency (✓)	O Monthly*	O Quarterly	○ Semi-Annual	O Annual		
/ithdrawal date (✓) ○ 1st		h* ○ 15th ○ 20th ○	○ 25th ○ 28th Withdrawa	I period From	1 M Y Y Y Y To M N	// Y Y Y Y OR ○ Till bala
Available in select schem SYSTEMATIC TRAN	-	STP) - Please not	e that the value of the un	it balance in the	source scheme should be a	nt least Rs. 25,000
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Scheme L&T				Option (✓) ○	Growth O Dividend Payout O	Dividend Reinvestment O Bo
ividend Frequency (✓whe	erever applicable)	O Daily O Wee	kly O Monthly* O G	Quarterly O Ann	ual^ ○ Semi-Annual^	
ansfer preference (✓) ○ A	mount (₹)	OR Capi	ital Appreciation (Available for (GROWTH plan only	From MMYYYYY To	M M Y Y Y Y OR O Till bal
	O Daily					
() , , ,	○ Weekly ○ Fortnightly		○ Tue	○ Thu	○ Fri	
	○ Monthly*		○ 5th ○ 7th	○ 10th*	○ 15th ○ 20th	○ 25th ○ 28th
	○ Quarterly	○ 1st	○ 5th ○ 7th	○ 10th*	○ 15th ○ 20th	○ 25th ○ 28th
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 $\mathsf{Frequency}(\checkmark) \ \bigcirc \ \mathsf{Daily} \qquad \bigcirc \ \mathsf{Weekly} \qquad \bigcirc \ \mathsf{Fortnightly} \qquad \bigcirc \ \mathsf{Monthly} \qquad \bigcirc \ \mathsf{Quarterly}$

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

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

Permanent Account Number (PAN): Furnishing of PAN is mandatory for all applicants except where specific dispensation is provided under law.

2. Systematic Withdrawal Plan (SWP):

- a. The minimum withdrawal size is Rs.500 except for L&T Liquid Fund and L&T Cash Fund. For L&T Liquid Fund and L&T Cash Fund it is Rs. 1000.
- b. SWP will be registered within 7 calendar days from the date of your request.
- c. You can cancel a registered SWP at any time by submitting a written request. The cancellation will be processed within 15 days.
- If your SWP request specifies both amount and units, the SWP will be processed on the basis of amount.
- If the scheme/plan/option is not mentioned and there is only one scheme/plan/ option available in the folio, the same will be processed.

3. Systematic Transfer Plan (STP):

- a. The minimum transfer size is Rs.500 except for L&T Liquid Fund and L&T Cash Fund. For L&T Liquid Fund and L&T Cash Fund it is Rs. 1000.
- b. STP will be registered within 7 calendar days from the date of your request.
- You can cancel a registered STP at any time by submitting a written request. The cancellation will be processed within 15 days.

- d. If the plan/option if the source scheme is not mentioned and there is only one plan/option available in the folio, the STP will be processed.
- e. If the plan/option of the target scheme is not mentioned, the STP will be processed as per the default options mentioned in the Scheme Information Document of the respective scheme.
- f. In case the criterion of the minimum amount for the purpose of transfer of units under the STP facility is not met, the AMC reserves the right to discontinue the STP/cancel the registration for STP..
- g. Daily STP is availble only for fixed amounts.
- h. STP transfers can be made on a daily basis i.e. Monday to Friday subject to such days being business days.
- i. Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.
- 4. Signatures: All signatures should be in English or any other Indian Language. Thumb impressions should be from the left hand in case of males and right hand in case of females. All such thumb impressions need to be attested by a Magistrate, Notary Public or Special Executive Magistrate under his/her official seal.
- 5. Employees Unique Identification Number (EUIN): If you are making this investment based on an investment advise received from your distributor, please quote the Employees Unique Identification Number (EUIN) of your relationship manager in the Application Form.

If your distributor has, however, not given you any advice pertaining to the investment or your investment decision is not withstanding the advice provided by your distributor regarding inappropriateness of the scheme vis-a-vis your investment needs, the EUIN box may be left blank. In this case, please sign in the space provided in Section B to confirm your acceptance to the declaration stated therein.

call 1800 4190 200 or 1800 2000 400

email investor.line@Intmf.co.in

www.ltfs.com

Note: Effective February 1, 2021, units will be allotted only upon receipt of subscription amount by the Fund House for utilisation irrespective of any scheme category/investment amount. Net Asset Value (NAV) will be applied based on realization of funds for all purchases including systematic transactions registered prior or post February 1, 2021.