

# NON-FINANCIAL TRANSACTION FORM



Please fill in the information below legibly in English and in CAPITALS.

For Existing Unitholder(s) holding units in physical mode. Please read documentation requirements and Terms and Conditions overleaf.

**IMPORTANT:** Please strike off the section(s) that is (are) not used by you to prevent any unauthorized use.

Folio No.  Name

## 1. UPDATE CONTACT DETAILS/FAMILY FLAG

### Sole / First Applicant

Mobile No.

Mobile Number pertains to  Self  Spouse  Dependent Parents  Dependent children  Dependent Siblings

Email ID

Email ID pertains to  Self  Spouse  Dependent Parents  Dependent children  Dependent Siblings

### Second Applicant

Mobile No.

Mobile Number pertains to  Self  Spouse  Dependent Parents  Dependent children  Dependent Siblings

Email ID

Email ID pertains to  Self  Spouse  Dependent Parents  Dependent children  Dependent Siblings

### Third Applicant

Mobile No.

Mobile Number pertains to  Self  Spouse  Dependent Parents  Dependent children  Dependent Siblings

Email ID

Email ID pertains to  Self  Spouse  Dependent Parents  Dependent children  Dependent Siblings

If the mobile number or the email id provided herein above does not appear to be that of the unit holder's, then the AMC shall send suitable communication in this regard to the unit holder.

## 2. CHANGE OF BANK DETAILS (Fill-up separate form for Multiple Bank mandate registration)

### BANK DETAILS (Please ✓ to Update as Default Bank)

Bank Name:

Bank A/C No.  A/C Type:  Savings  Current  NRE  NRO  FCNR  Others

City  Pin  IFSC Code(11 digit)  MICR

LEI Code:  Valid up:  (Legal Entity Identifier Number is Mandatory for Redemption Transaction value of INR 50 crore and above for Non-Individual investors.)

Enclosed herewith:  Cancelled cheque copy  Bank account statement (last three months)

## 3. CHANGE IN MODE OF HOLDING

Joint  Anyone or Survivor

## 4. CANCELLATION OF SIP/SWP/STP

Type	Scheme Name	Plan	Option	SIP/SWP/STP Date	End Date	Installment Amount
<input type="checkbox"/> SIP		<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW Payout	<input type="text"/>	<input type="text"/>	
<input type="checkbox"/> SWP		<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW Payout	<input type="text"/>	<input type="text"/>	
<input type="checkbox"/> STP		<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW Payout	<input type="text"/>	<input type="text"/>	

## ACKNOWLEDGMENT SLIP (TO BE FILLED IN BY THE INVESTOR)

## NON-FINANCIAL TRANSACTION FORM

Existing Folio No.

Date

Received from Mr./Ms./M/s. \_\_\_\_\_

- Update Contact Details  Change of Bank Details  Change in Mode of Holding  
 Nomination Details  Cancellation of SIP/SWP/STP  Consolidation Of Folios  
 Change Of Tax Status  FATCA and CRS Details  Update PAN  
 Registration (POA)  Revalidation of IDCW Option/Redemption Cheque

Collection Center's Stamp & Receipt Date and Time



