Canara Robeco Mutual Fund
Investment Manager : Canara Robeco Asset Management Co. Ltd. CIN No : U65990MH1993PLC071003
Construction House, 4th Floor, 5, Walchand Hirachand Marg, Ballard Estate, Mumbai 400 001.
Tel.: 6658 5000, Fax: 6658 5012 / 13, www.canararobeco.com

CANARA ROBECO Mutual Fund

Application No.

SYSTEMATIC TRANSFER PLAN (STP) ENROLMENT FORM

TO BE FILLED IN CAPITAL LETTERS. PLEASE (✓) WHEREVER APPLICABLE

1. DISTRIBUTOR / BROKER INFORMATION

Name & Broker Code / ARN	Sub Broker / Sub Agent ARN Code	*Employee Unique Identification Number	Sub Broker / Sub Agent Code	RIA Code++
ARN-169080		E334451		

*Please sign below in case the EUIN is left blank/not provided. I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.
++ I/We, have invested in the Scheme(s) of your Mutual Fund under Direct Plan. I/We hereby give you my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes Managed by you, to the above mentioned Mutual Fund Distributor / SEBI-Registered Investment Adviser:

⊗ Signature of 1st Applicant / Guardian	⊗ Signature of 2nd Applicant	⊗ Signature of 3rd Applicant

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

2. EXISTING UNIT HOLDER INFORMATION [Please fill in your Folio Number]

Folio No. | | | | | | | | | | | |

APPLICANT DETAILS

Name of Sole / First Holder	PAN No / PEKRN.	☐ KYC
Name of Second Holder	PAN No / PEKRN.	☐ KYC
Name of Third Holder	PAN No / PEKRN.	☐ KYC

4. SYSTEMATIC TRANSFER PLAN (STP) SCHEME DETAILS
(If the investor wishes to invest in Direct Plan please (✓))

Name of 'Transferor' Scheme _____ **Plan** : ☐ Regular: ☐ Direct: **Option:** _____

Name of 'Transferee' Scheme _____ **Plan :** ☐ Regular: ☐ Direct: **Option:** _____

5. STP DETAILS (Refer Instruction No.5,6,9 & 10)

☐ **Fixed Amount OR** ☐ **Capital Appreciation (Refer Instruction No. 5)**

STP Frequency (Please ✓any one)

☐ Daily (Minimum One Month)	☐ Weekly	☐ Monthly (Default)	☐ Quarterly
First execution date will be on or after 7 calendar days from the date of submission of the form (excluding date of submission)	Weekly Transfers will happen only on Mondays by default. Incase Monday is a non business day, next business day will be considered for Transfer	☐ 1st ☐ 5th ☐ 15th (Default) ☐ 20th ☐ 25th	☐ 1st ☐ 5th ☐ 15th (Default) ☐ 20th ☐ 25th
		*Incase the Investor has not specified any date then the default date would be 15th	

Amount of Transfer per Instalment ₹ _____

Enrolment Period (Please ✓any one)

☐ **REGULAR** From : | | | | To : | | | | ☐ **PERPETUAL** (Deafult) From : | | | |

Only for Daily STP Enrolment Period

From : D D / M M / Y Y Y Y To : D D / M M / Y Y Y Y

6. DECLARATION & SIGNATURE/S

To the trustees Canara Robeco Mutual Fund. I / We have read and understood the contents of the SAI, SID and Key Information Memorandum of the Scheme. I/We hereby apply to the Trustees of Canara Robeco Mutual Fund for allotment of units of the Scheme, as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I/We hereby declare that I/ We are authorised to make this investment in the above mentioned Scheme (s) and that the amount invested in the scheme (s) is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of Income Tax Act, Anti Money Laundering Act, Anti Corruption Act or any other applicable laws enacted by the government of India from time to time and we undertake to provide all necessary proof / documentation, if any, required to substantiate the facts of this undertaking. I have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment. I / We authorize the Fund to disclose details of my/our account and all my/our transactions to the intermediately whose stamp appears on the application form. I also authorize the Fund to disclose details as necessary, to the Registrar & Transfer agent(s), call centers, banks, custodians, depositories and/or authorised external third parties who are involved in transaction processing, despatches, etc. for the purpose of effecting payments to me/us. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.
I/We hereby declare that currently there is no subsisting order/ruling/judgment etc., in force which has been passed by of any court, tribunal, statutory authority or regulator, including SEBI prohibiting or restraining me/us from dealing in securities.
That in the event, the above information and/or any part of it is/are found to be false/untrue/misleading. I/We will be liable for the consequences arising therefrom. I/We will indemnify the fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regarding the eligibility, validity, and authorization of my/our transaction.I / We hereby provide my / our consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (ii) updating my/our Aadhaar number(s) in accordance with the Aadhaar Act, 2016 (and regulations made there under) and PMLA. I / We hereby provide my / our consent for sharing / disclose of the Aadhaar number(s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my / our folios with my / our PAN.
Applicable to NRIs only : I/We confirm that I am/we are Non Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from funds in my/our Non Resident External / Ordinary Account / FCNR / NRSR Account. Investment in the scheme is made by me / us on:☐ Repatriation basis ☐ Non Repatriation basis.
I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same.

4. SIGNATURE

⊗ Signature of 1st Applicant / Guardian	⊗ Signature of 2nd Applicant	⊗ Signature of 3rd Applicant

6. DECLARATION & SIGNATURE/S

ACKNOWLEDGMENT RECEIPT OF STP APPLICATION FORM (TO BE FILLED IN BY THE UNIT HOLDER)

Folio No. | | | | | | | | | | | |

APP No.:

Received from Mr. / Ms. /M/s. _____ STP application

Amount of Transfer per Instalment ₹ _____

From Scheme / Plan / Option _____

to Scheme / Plan / Option _____

Mode & Frequency of STP _____

Stamp of receiving branch

& Signature