

**Application Form (Except for ETFs, HDFC Retirement Savings Fund and HDFC Children's Gift Fund)**

Investors must read the Key Information Memorandum, the instructions and Product Labeling on page 127 & 129 before completing this Form. The Application Form should be completed in English and in **BLOCK LETTERS** only.

KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.) (Refer Instruction 1)						FOR OFFICE USE ONLY (TIME STAMP)	CAMS bar code
ARN/RIA Code/Stock Broker/Portfolio Manager Registration Number (PMRN)	ARN/RIA/Portfolio Managers/ Stock Broker's Name	Sub Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/Employee	Employee Unique Identification Number (EUIN)		
ARN-83784					E069303		

**EUIN Declaration (only where EUIN box is left blank) (Refer Instruction 1)**  
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.

**SIGN**

First/ Sole Applicant/ Guardian/ PoA Holder	Second Applicant	Third Applicant
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**TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS ONLY (Refer Instruction 2)**

I confirm that I am a first time investor across Mutual Funds. **OR**  I confirm that I am an existing investor across Mutual Funds.  
In case the purchase/ subscription amount is Rs. 10,000 or more and your Distributor has opted in to receive Transaction Charges, the same are deductible as applicable from the purchase/ subscription amount and payable to the Distributor. Units will be issued against the balance amount invested.

**1. EXISTING UNIT HOLDER INFORMATION (IF YOU HAVE EXISTING FOLIO, PLEASE FILL IN SECTIONS viz. 1, 6, 7, 9 AND 13 ONLY. Refer instruction 3).**

Folio No. \_\_\_\_\_ The details in our records under the folio number mentioned alongside will apply for this application.

**2. MODE OF HOLDING [Please tick (✓)]**  Single  Joint  Anyone or Survivor

**3. UNIT HOLDER INFORMATION (Refer instruction 4)** **DATE OF BIRTH@** [D][D][M][M][Y][Y][Y][Y] **Proof of date of birth@** **Please (✓)**  Attached

**NAME OF FIRST / SOLE APPLICANT (In case of Minor, there shall be no joint holders)**  
Mr. Ms. M/s. \_\_\_\_\_  
Nationality \_\_\_\_\_ PAN#/ PEKRN# \_\_\_\_\_  
KYC Number \_\_\_\_\_ KYC # [Please tick (✓)] (Mandatory)  Proof Attached

**NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON – DESIGNATION (in case of non-individual Investors)**  
Mr. Ms. \_\_\_\_\_  
Nationality \_\_\_\_\_ Designation \_\_\_\_\_ Contact No. \_\_\_\_\_  
PAN#/ PEKRN# \_\_\_\_\_ KYC # [Please tick (✓)] (Mandatory)  Proof Attached  
Relationship with Minor@ Please (✓)  Father  Mother  Court appointed Legal Guardian  Proof of relationship with minor@ Please (✓)  Attached @ Mandatory  
# Please attach Proof. Refer instruction No 16 for PAN/PEKRN and No 18a for KYC (KRA). Refer instruction No 18b for KYC Identification Number issued by CKYCR.

**MAILING ADDRESS OF FIRST / SOLE APPLICANT (Mandatory) (Refer Instruction 4a)**

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PIN CODE \_\_\_\_\_  
COUNTRY \_\_\_\_\_

**CONTACT DETAILS OF FIRST / SOLE APPLICANT** Country Code - Mobile \_\_\_\_\_ STD Code \_\_\_\_\_  
Telephone : Off. \_\_\_\_\_ Res. \_\_\_\_\_ Country Code - Landline No. \_\_\_\_\_  
eAlerts Mobile \_\_\_\_\_ eDocs Email of First / Sole holder ^ \_\_\_\_\_ **IN CAPITALS**

This email id belongs to (Mandatory Please ✓):  Self  Spouse  Dependent Children  Dependent Siblings  Dependent Parents  Guardian  POA  Custodian (for FPIs only)  PMS  
This mobile number belongs to (Mandatory Please ✓):  Self  Spouse  Dependent Children  Dependent Siblings  Dependent Parents  Guardian  POA  Custodian (for FPIs only)  PMS  
 I hereby declare that I shall immediately notify any change to the mobile number/ email id. (Refer instruction 10)  
 I/ We would like to register for online access to transact on HDFCFMOnline Investors as per the terms & conditions displayed on website: www.hdfcfund.com (Email id mandatory) (only for non individuals and individuals with mode of holding as 'Joint'). Refer Instruction 12.  
^ On providing email-id investors shall receive the scheme wise annual report or an abridged summary thereof/ account statements/ statutory and other documents by email. However, if the investors wish to receive physical copy of the scheme wise annual report or an abridged summary thereof [Please tick (✓)] Opt-in  (Refer Instruction 10 & 12)

**KYC Details**

**Status of First/ Sole Applicant [Please tick (✓)]**  Individual  Non - Individual\* [Please attach FATCA, CRS & Ultimate Beneficial Ownership (UBO) Self Certification Form] (Mandatory) (Refer Instruction 4 & 19)

Resident Individual  Partnership  Trust  HUF  AOP  PIO  Pvt. Ltd. Company  Public Ltd. Company  Minor through guardian  BOI  OCI  Body Corporate  LLP  
 Society/Club  NRI-Repatriation  NRI-Non Repatriation  Foreign National Resident in India  FPI  Sole Proprietorship  Non Profit Organisation  Others (please specify) \_\_\_\_\_

**LEI No.** \_\_\_\_\_ **Expiry Date:** [DD][MM][YYYY]

(Mandatory for Non - Individuals transacting / proposing to transact for an amount of Rs. 50 crores or more)  
\* Trust/Societies/Section 8 companies to give below declaration  
We are a "Non-Profit Organization" [NPO] which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).  YES  NO  
If yes, please quote Registration No. of Darpan portal of Niti Aayog.  
(If not registered already, please register immediately and confirm with the above information)

**Occupation Details [Please tick (✓)]**  Private Sector Service  Public Sector Service  Government Service  Business  Professional  Agriculturist  Retired  Housewife  
 Student  Proprietorship  Others (Please specify) \_\_\_\_\_

**Gross Annual Income in Rs. [Please tick (✓)]**  Below 1 lac  1-5 lac  5-10 lac  10-25 lac  25 lac- 1 cr  > 1 cr  
OR **Net Worth in Rs. (Mandatory for Non Individual)** \_\_\_\_\_ as on [D][D][M][M][Y][Y][Y][Y] (not older than 1 year)

**For Individual [Please tick (✓)]**  I am Politically Exposed Person  I am Related to Politically Exposed Person  Not Applicable  
# Please attach Proof. Refer instruction No 16 for PAN/PEKRN and No 18a for KYC (KRA). Refer instruction No 18b for KYC Identification Number issued by CKYCR.

**ACKNOWLEDGEMENT SLIP (To be filed in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]**

**HDFC MUTUAL FUND** Date : \_\_\_\_\_  
Head Office : HDFC House, 2nd Floor, H.T. Parekh Marg,  
165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.

Received from Mr. / Ms. / M/s. \_\_\_\_\_  
an application for Purchase of Units of the Scheme(s) alongwith Cheque / DD / Payment Instrument as detailed overleaf.

ISC Stamp & Signature

**4. JOINT APPLICANT DETAILS, If any (Refer instruction 4) (In case of Minor, there shall be no joint holders)**

**1. NAME OF SECOND APPLICANT**

Mr. Ms. M/s. \_\_\_\_\_  
 Nationality \_\_\_\_\_ PAN#/ PEKRN# \_\_\_\_\_  
 KYC Number \_\_\_\_\_ KYC # [Please tick (✓)] (Mandatory)  Proof Attached

Occupation Details [Please tick (✓)]  Private Sector Service  Public Sector Service  Government Service  Business  Professional  Agriculturist  Retired  Housewife  
 Student  Proprietorship  Others (Please specify) \_\_\_\_\_

Gross Annual Income in Rs. [Please tick (✓)]  Below 1 lac  1-5 lac  5-10 lac  10-25 lac  25 lac- 1 cr  > 1 cr

For Individual [Please tick (✓)]  I am Politically Exposed Person  I am Related to Politically Exposed Person  Not Applicable

**2. NAME OF THIRD APPLICANT**

Mr. Ms. M/s. \_\_\_\_\_  
 Nationality \_\_\_\_\_ PAN#/ PEKRN# \_\_\_\_\_  
 KYC Number \_\_\_\_\_ KYC # [Please tick (✓)] (Mandatory)  Proof Attached

Occupation Details [Please tick (✓)]  Private Sector Service  Public Sector Service  Government Service  Business  Professional  Agriculturist  Retired  Housewife  
 Student  Proprietorship  Others (Please specify) \_\_\_\_\_

Gross Annual Income in Rs. [Please tick (✓)]  Below 1 lac  1-5 lac  5-10 lac  10-25 lac  25 lac- 1 cr  > 1 cr

For Individual [Please tick (✓)]  I am Politically Exposed Person  I am Related to Politically Exposed Person  Not Applicable

# Please attach Proof. Refer instruction No 16 for PAN/PEKRN and No 18a for KYC (KRA). Refer instruction No 18b for KYC Identification Number issued by CKYCR.

**CONTACT DETAILS OF SECOND APPLICANT**

eAlerts Mobile \_\_\_\_\_ eDocs Email of First / Sole holder ^ \_\_\_\_\_ IN CAPITALS

**CONTACT DETAILS OF THIRD APPLICANT**

eAlerts Mobile \_\_\_\_\_ eDocs Email of First / Sole holder ^ \_\_\_\_\_ IN CAPITALS

This email id belongs to (Mandatory Please ✓):  Self  Spouse  Dependent Children  Dependent Siblings  Dependent Parents  Guardian  POA  Custodian (for FPIs only)  PMS  
 This mobile number belongs to (Mandatory Please ✓):  Self  Spouse  Dependent Children  Dependent Siblings  Dependent Parents  Guardian  POA  Custodian (for FPIs only)  PMS

**5. POWER OF ATTORNEY (PoA) HOLDER DETAILS**

Name of PoA Mr. Ms. M/s. \_\_\_\_\_  
 PAN#/ PEKRN# \_\_\_\_\_  
 KYC Number \_\_\_\_\_ KYC # [Please tick (✓)] (Mandatory)  Proof Attached

# Please attach Proof. Refer instruction No 16 for PAN/PEKRN and No 18a for KYC (KRA). Refer instruction No 18b for KYC Identification Number issued by CKYCR.

**6. FATCA AND CRS INFORMATION (for Individual including Sole Proprietor) (Self Certification) (Refer instruction 4)**

The below information is required for all applicant(s)/ guardian

Address Type:  Residential or Business  Residential  Business  Registered Office (for address mentioned in form/existing address appearing in Folio)

Category	First Applicant/Guardian in case of Minor	Second Applicant/ Guardian	Third Applicant
Place/ City of Birth			
Country of Birth			
Country of Tax Residency#			
Is the applicant(s)/guardian's Country of Birth/Citizenship/ Nationality/Tax Residency other than India? Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below*.	First Applicant/Guardian in case of Minor	Second Applicant/ Guardian	Third Applicant
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If Yes, please provide the following information [mandatory]

Category	First Applicant/Guardian in case of Minor	Second Applicant/ Guardian	Third Applicant
Tax Payer Ref. ID No ^			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 3			
Tax Payer Ref. ID No. 3			
Identification Type [TIN or other, please specify]			

#To also include USA, where the individual is a citizen/ green card holder of USA. ^ In case Tax Identification Number is not available, kindly provide its functional equivalent.

**7. MODE OF PAYMENT OF REDEMPTION / IDCW PROCEEDS (refer instruction 11) The redemption / IDCW proceeds will be directly credited to the investor's bank account.**

**8. UNIT HOLDING OPTION  DEMAT MODE\*  PHYSICAL MODE (Default) (refer instruction 13)**

\*Demat Account details are mandatory for (i) FPIs and (ii) investors who wish to hold the units in Demat Mode (Account statement (CAS) for units held in demat mode will be issued only by NSDL/CDSL)

NSDL	DP Name _____	DP ID	I N _____	Beneficiary Account No.	_____
CDSL	DP Name _____	Beneficiary Account No.	_____		

\*Investor opting to hold units in demat form, may provide a copy of the DP statement for us to match the demat details as stated in the application form.

**Particulars**

Scheme Name / Plan / Option / Sub-option / Payout Option	Cheque / DD / Payment Instrument / UTR No. / Date	Drawn on (Name of Bank and Branch)	Amount in figures (Rs.)

Please Note: All Purchases are subject to realisation of cheques / demand drafts / Payment Instrument.

October 2023

Mandatory

**9. INVESTMENTS & PAYMENT DETAILS** [Please (✓)] (refer instruction 6 & 7 for Scheme details and instruction 8 & 9 for Payment Details) The name of the first/ sole applicant must be pre-printed on the cheque.

Scheme Name - 1		Plan/ Option/ Sub-Option/ Frequency			
Mode of Payment	<input type="checkbox"/> Cheque	<input type="checkbox"/> Demand Draft	<input type="checkbox"/> NEFT/ RTGS/ Fund Transfer	<input type="checkbox"/> One Time Mandate (OTM)*	
Drawn on Bank / Branch					
Pay-In Bank Account No. (For Cheque Only)			Cheque/ DD/ Payment Instrument/ UTR No.		
Cheque/ DD/ Payment Instrument/ UTR Date		Amount of Cheque / DD / Payment Instrument / RTGS/ NEFT in figures (Rs.)			
DD Charges, if any		Net Cheque/ DD Amount			
Cheque/ DD Amount (in words):					

Scheme Name - 2		Plan/ Option/ Sub-Option/ Frequency			
Mode of Payment	<input type="checkbox"/> Cheque	<input type="checkbox"/> Demand Draft	<input type="checkbox"/> NEFT/ RTGS/ Fund Transfer	<input type="checkbox"/> One Time Mandate (OTM)*	
Drawn on Bank / Branch					
Pay-In Bank Account No. (For Cheque Only)			Cheque/ DD/ Payment Instrument/ UTR No.		
Cheque/ DD/ Payment Instrument/ UTR Date		Amount of Cheque / DD / Payment Instrument / RTGS/ NEFT in figures (Rs.)			
DD Charges, if any		Net Cheque/ DD Amount			
Cheque/ DD Amount (in words):					

Scheme Name - 3		Plan/ Option/ Sub-Option/ Frequency			
Mode of Payment	<input type="checkbox"/> Cheque	<input type="checkbox"/> Demand Draft	<input type="checkbox"/> NEFT/ RTGS/ Fund Transfer	<input type="checkbox"/> One Time Mandate (OTM)*	
Drawn on Bank / Branch					
Pay-In Bank Account No. (For Cheque Only)			Cheque/ DD/ Payment Instrument/ UTR No.		
Cheque/ DD/ Payment Instrument/ UTR Date		Amount of Cheque / DD / Payment Instrument / RTGS/ NEFT in figures (Rs.)			
DD Charges, if any		Net Cheque/ DD Amount			
Cheque/ DD Amount (in words):					

\*Please note that OTM can be selected as mode of payment provided OTM is already registered. In case OTM is not registered please fill in the attached OTM Debit Mandate to make future transactions via OTM

**10. BANK ACCOUNT DETAILS OF THE FIRST / SOLE APPLICANT (For redemption/ IDCW Payments if any) (refer instruction 5) (Mandatory to attach proof, in case the pay-out bank account is different from the bank account mentioned under Section 10 below.)**

For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

Bank Name										
Branch Name	Bank City									
Account Number	Account Type (Please ✓) <input type="checkbox"/> Savings <input type="checkbox"/> Current <input type="checkbox"/> NRO <input type="checkbox"/> NRE <input type="checkbox"/> FCNR <input type="checkbox"/> Others (please specify)									
IFSC Code***	*** Refer Instruction 5C (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)									

**11. NOMINATION FOR UNITS IN NON-DEMAT MODE (Mandatory for new folios. For existing folios, mandatory to follow instruction no. 15)**

I/We wish to nominate as under: **OR**  I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the implications / issues involved in non-appointment of any nominee(s) and am/ are further aware that in case of my demise / death of all the unit holders in the folio, my / our legal heir(s) would need to submit all the requisite documents issued by the Court or such other competent authority, as may be required by the Mutual Fund / AMC for settlement of death claim / transmission of units in favour of the legal heir(s), based on the value of the units held in the mutual fund folio/s.

Name and Address of Nominee(s) (IN CAPITALS) (Mandatory)	PAN	Nominee Relationship (Mandatory)* (Proof to be attached)	Date of Birth	Name of the Guardian (Mandatory) PAN and Address of Guardian (Optional)	Signature of Nominee (Optional)/ Guardian of Nominee (Mandatory)	Proportion (%) in which the units will be shared by each Nominee (should aggregate to 100%) (Mandatory)
Nominee 1				PAN: _____		
Nominee 2				PAN: _____		
Nominee 3				PAN: _____		

\*Guardian's Relationship with Nominee (Mandatory):  Mother  Father  Legal Guardian  
 Proof of Relationship of Guardian with Minor:  Birth Certificate  School Leaving Certificate  Passport  Others \_\_\_\_\_  
 I/We have read and understood the instructions on nomination and I/We hereby undertake to abide by the same. The instructions contained herein supercedes all previous nominations made by me/us in respect of the folio(s) mentioned above.  
 To be signed by ALL holders, irrespective of Mode of Holding or Mode of Operation

POA holder cannot nominate.	_____	_____	_____
	First / Sole Applicant	Second Applicant	Third Applicant

**12. RESOLUTION OF DISPUTES (For Institutional or corporate clients) (Refer instruction 20)**

Smart ODR **OR**  by harnessing any independent institutional mediation, conciliation and/or online arbitration institution in India

**13. DECLARATION & SIGNATURE/S (refer instruction 14)**

I/We have read, understood the terms and conditions of the scheme related documents and the addendum issued therein till date. Key Information Memorandum of the Schemes as well as the rules and regulations of SEBI, AMFI, Prevention of Money Laundering Act, 2002 and such other regulations as may be applicable to me/us from time to time and agree to comply with the same as a Unitholder. I/We hereby apply to the Trustees for allotment of Units of the Scheme(s) of HDFC Mutual Fund ("Fund") and confirm and declare as under:

(a) I/We am/are eligible Investor(s) as per the scheme related documents and not prohibited from accessing capital markets by any order/ruling / judgment etc. passed by SEBI/ Statutory Authority or Courts in India and Foreign laws. I am/We are authorised to make this investment as per the Constitutive documents/ authorization(s). The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India.

(b) I/We will be bound by the Fund's terms and conditions as amended from time to time.

(c) The information given by me /us in or along with this application form is true and correct and I/we shall furnish such other further/additional information as may be required by the HDFC Asset Management Company Limited (AMC)/ Fund. I/We undertake to promptly inform the AMC/ Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished by me/us from time to time.

(d) I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasi-judicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us.

(e) I/We hereby consent for providing transactions data feed, portfolio holdings, NAV etc. in respect of my/our transactions under Direct Plan to the RIA/Portfolio Managers/ Stock Broker registered in the concerned folio, if applicable.

(f) I/We shall be liable and responsible for any loss, claims suffered, directly or indirectly by AMC/ Fund/ RTA/ SEBI Intermediaries, arising out of any false, misleading, inaccurate and incomplete information furnished by me/us at the time of investing/redeeming the units. I/We hereby unconditionally and irrevocably indemnify and at all time keep indemnified, save and harmless AMC/Fund/Trustee and their officers, directors and employees against all actions, proceedings, claims, losses, damages, charges and expenses incurred or suffered /paid by AMC/Fund in this regard and in case of any dispute regarding the eligibility, validity and authorization of my/our transactions.

(g) The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

**(h) I/WE HEREBY CONFIRM THAT I/WE HAVE NOT BEEN OFFERED/ COMMUNICATED ANY INDICATIVE PORTFOLIO AND/ OR ANY INDICATIVE YIELD BY THE FUND/AMC/ITS DISTRIBUTOR FOR THIS INVESTMENT.**

**Consent for Telemarketing (Refer Instruction 19):**

I/We hereby accord my/our consent to HDFC AMC for receiving the promotional information/ material via email, SMS, telemarketing calls etc. on the mobile number and email provided by me/us in this Application Form.

**Consent for disclosure of Personal Information in terms of Privacy Policy**

I/We hereby confirm to have read, understood and agree to the terms of Privacy Policy (available on <https://www.hdfcfund.com>) ("Policy") of HDFC AMC/ Fund.

I/We hereby accord my/our consent to HDFC AMC/Fund for collecting, receiving, possessing, storing, dealing, handling or disclosure of my/ our Personal Data and hereby authorize to disclose it to the third party or another body corporate or any person acting under a lawful contract with HDFC AMC, in accordance with the Privacy Policy.

**For Foreign Nationals Resident in India only:**

I/We will redeem my/our entire investment/s before I/We change my/our Indian residency status. I/We shall be fully liable for all consequences (including taxation) arising out of the failure to redeem on account of change in residential status.

**For NRIs/ PIO/ OCIs/ FPIs only:**

I/We confirm that my application is in compliance with applicable Indian and foreign laws.

For NRIs/ PIO/OCIs Please  Repatriation basis  Non-repatriation basis

**SIGN HERE**

(Please write Application Form No. / Folio No. on the reverse of the Cheque / Demand Draft / Payment Instrument.)

First/ Sole Applicant/ Guardian/ PoA Holder

Second Applicant

Third Applicant

**CHECKLIST**

☞ Please ensure that your Application Form is complete in all respect and signed by all applicants:

- Name, Address and Contact Details are mentioned in full. • Status of First/Sole Applicant is correctly indicated. • Bank Account Details are entered completely and correctly.
- Permanent Account Number (PAN) of all Applicants is mentioned irrespective of the amount of purchase and proof attached (if not already validated) OR PAN Exempt KYC Reference Number (PEKRN) in case of PAN exempt investment.
- Please attach proof of KYC Compliance status if not already validated. • Appropriate Plan / Option is selected.
- If units are applied by more than one applicant, Mode of Operation of account is indicated.

☞ Your investment Cheque / DD is drawn in favour of 'the Specific Scheme A/c PAN' or 'the Specific Scheme A/c Investor Name' dated, signed and crossed 'A/c Payee only'. Application Number / Folio No. is mentioned on the reverse of the Cheque/DD.

☞ Documents as listed below are submitted along with the Application Form (as applicable to your specific case).

	Documents	Individuals/ HUF/ Sole Proprietary Firms	Companies/ Trusts/ Societies/ Partnership Firms/ LLP	FPI <sup>®</sup>	NRI/ OCI/ PIO	Minor	Investments through Constituted Attorney
1.	Board/ Committee Resolution/ Authority Letter		✓				
2.	List of Authorised Signatories with Specimen Signature(s) @		✓	✓			✓
3.	Notarised Power of Attorney						✓
4.	Account Debit Certificate in case payment is made by DD from NRE / FCNR A/c. where applicable				✓		
5.	PAN Proof	✓	✓	✓	✓	✓ <sup>#</sup>	✓
6.	KYC Acknowledgement Letter / Print out of KYC Compliance Status downloaded from CDSL Ventures Ltd. website ( <a href="http://www.cvindia.com">www.cvindia.com</a> )	✓	✓	✓	✓	✓ <sup>#</sup>	✓
7.	Proof of Date of Birth					✓	
8.	Proof of Relationship with Guardian (where Minor is Investor or Nominee)					✓	
9.	PIO / OCI Card (as applicable)				✓		
10.	Certificate of registration granted by Designated Depository Participant on behalf of SEBI			✓			
11.	Ultimate Beneficial Owner		✓	✓			✓
12.	FATCA & CRS	✓	✓	✓	✓	✓	✓

@ Should be original or true copy certified by the Director / Trustee / Company Secretary / Authorised Signatory / Notary Public, as applicable.

® As per prevailing SEBI (FPI) Regulations, 2019, FPIs can invest in Indian Securities only through Stock Broker and in demat mode only. # If PAN/PEKRN/KYC proof of Minor is not available, PAN/PEKRN/KYC proof of Guardian should be provided.

October 2023

# Application Form for Equity and Debt Systematic Investment Plan (SIP)

## [For Investments through NACH/ Direct Clearing/ Direct Debit Facility/ Standing Instruction]



**Important:** Please strike out the Section(s) that is/are not used by you to avoid any unauthorised use

KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.)						FOR OFFICE USE ONLY (TIME STAMP)
ARN/RIA Code/Stock Broker/ Portfolio Manager Registration Number (PMRN)	ARN/RIA /Stock Broker/ Portfolio Manager's Name	Sub-Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Unique Identification Number (EJIN)	
ARN-83784					E069303	

**EJIN Declaration (only where EJIN box is left blank)**  
I/We hereby confirm that the EJIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/ relationship manager/ 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.

Sign Here  
First/ Sole Applicant/ Guardian/ PoA Holder

Sign Here  
Second Applicant

Sign Here  
Third Applicant

**Transaction Charges for Applications through Distributors only** Date: D D M M Y Y Y Y

I confirm that I am a first time investor across Mutual Funds. **OR**  I confirm that I am an existing investor across Mutual Funds.  
If the total commitment of investment through SIP (i.e. amount per SIP installment X no. of installments) amounts to Rs.10,000 or more and your Distributor has opted to receive transaction Charges, the same are deductible as applicable from the installment amount and payable to the Distributor. In such cases Transaction Charge will be recoverable in 3-4 installments. Units will be issued against the balance of the installment amounts invested.

Please () any one. In the absence of indication of the option the form is liable to be rejected.  NEW REGISTRATION  CANCELLATION

Please () as applicable:  
 OTM Debit Mandate is already registered in the folio. [No need to submit again]. SIP Auto debit can start in 10 Days i.e. for debit date 15th, form can be submitted till 4th of the month.  
 OTM Debit Mandate is attached and to be registered in the folio. SIP Auto debit will start after mandate registration which takes 10 to 30 days depending on NACH modalities.

**1) INVESTOR DETAILS** Application No. (For new investor)/ Folio No. (For existing Unitholder)

Applicant	Name	PAN/ PEKRN* (Mandatory)
Sole / First Applicant		
Second Applicant		
Third Applicant		
Guardian/POA Holder		

# Please attach Proof. If PAN/PEKRN/KYC is already validated please don't attach any proof. PEKRN mandatory for Micro SIP.

**I/WE WOULD LIKE TO INVEST TO MEET MY/OUR FINANCIAL GOALS (choose anyone )**

Purchase of Residence  Children's Education  Children's Marriage  Retirement  Others         Please Specify          
Target Amount \_\_\_\_\_

**2) INVESTMENT DETAILS FOR SIP [Please tick ()]**

Scheme Name	HDFC	HDFC	HDFC
<b>Plan</b>	<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Regular <input type="checkbox"/> Direct	<input type="checkbox"/> Regular <input type="checkbox"/> Direct
<b>Option / Facility</b>	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW   <input type="checkbox"/> Reinvest <input type="checkbox"/> Payout	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW   <input type="checkbox"/> Reinvest <input type="checkbox"/> Payout	<input type="checkbox"/> Growth <input type="checkbox"/> IDCW   <input type="checkbox"/> Reinvest <input type="checkbox"/> Payout
<b>Frequency</b>	<input type="checkbox"/> Daily** <input type="checkbox"/> Weekly** <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Yearly	<input type="checkbox"/> Daily** <input type="checkbox"/> Weekly** <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Yearly	<input type="checkbox"/> Daily** <input type="checkbox"/> Weekly** <input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Yearly
<b>SIP Date* or Weekly SIP Day* (Not for daily frequency)</b>	DD DD DD DD or _____	DD DD DD DD or _____	DD DD DD DD or _____
<b>Enrolment Period** (MM/YY)</b>	From MM YY To MM YY	From MM YY To MM YY	From MM YY To MM YY
<b>SIP Amount</b>	_____	_____	_____
<b>SIP TOP-UP <input checked="" type="checkbox"/> Not available for Daily and Weekly SIP</b>			
<b>Frequency</b>	<input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly*	<input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly*	<input type="checkbox"/> Half Yearly <input type="checkbox"/> Yearly*
<b>Amount</b>	_____	_____	_____
<b>Percentage<sup>5</sup> (%) &amp; Frequency</b>	_____ Yearly	_____ Yearly	_____ Yearly
<b>SIP Top-Up Cap Amount or CAP Month-Year<sup>#</sup>:</b>	MM YY	MM YY	MM YY

\* Default, if not selected. \*\* Triggered and processed only on all Business Days and SIP TOP up facility shall not be available. \*\*\* Triggered and processed on the day opted by the investor. If the day opted falls on non-business day, it will be triggered and processed on the next business day and SIP TOP up facility shall not be available. • In case of Quarterly SIP only the Yearly option is available as SIP Top-Up frequency. • ^ TOP UP amount has to be in multiples of Rs.100 only. • \$The minimum TOP UP Percentage has to be 10% and in multiples of 1% thereafter, of the existing SIP installment. Investors/unit holders subscribing for this facility are required to submit the request at least 30 days prior to the SIP date. Top-up will be applicable from next effective SIP installment. • \*TOP-UP CAP amount • \*\*SIP tenure can be registered upto a maximum of 30 years • # TOP-UP CAP Month-Year

### ACKNOWLEDGEMENT SLIP FOR SIP (To be filled in by the Investor)

**HDFC MUTUAL FUND:** Head Office : HDFC House, 2nd Floor, H.T. Parekh Marg, 165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.

DATE: D D M M Y Y Y Y      FOLIO NO. \_\_\_\_\_

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

[For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]

e-mail us at: [hello@hdfcfund.com](mailto:hello@hdfcfund.com) or visit our website: [www.hdfcfund.com](http://www.hdfcfund.com) Missed Call Number - +91 85069 36767

ISC Stamp & Signature

## 2) INVESTMENT DETAILS FOR SIP [Please tick (✓)]

Maximum amount of debit (SIP+ Top-up) under direct debit facility for investors with bank accounts with State Bank of India shall not exceed Rs. 5,00,000/- per installment.

First SIP Transaction via Cheque No.  Cheque Dated         Amount@ (Rs.)

Mandatory Enclosure (if 1st Installment is not by cheque)  Blank cancelled cheque  Copy of cheque  @The first cheque amount should be same as each/total SIP Amount.

The name of the first/ sole applicant must be pre-printed on the cheque.

## 3) BANK DETAILS

OTM Bank Details to be debited for the SIP (OTM already Registered)

Bank Name:  Account Number:

## 4) UNIT HOLDING OPTION DEMAT MODE\* PHYSICAL MODE (Default)

\*Demat Account details are mandatory for (i) Foreign Portfolio Investors and (ii) investors who wish to hold the units in Demat Mode (Account statement (CAS) for units held in demat mode will be issued only by NSDL/CDSL)

NSDL	Depository Participant (DP) Name <input type="text"/>	DP ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Beneficiary Account No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CDSL	Depository Participant (DP) Name <input type="text"/>	Beneficiary Account No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Investor opting to hold units in demat form, may provide a copy of the DP statement for us to match the demat details as stated in the application form.

## 5) DECLARATION AND SIGNATURE(S)

I/We hereby confirm and declare as under:-

I/We have read, understood and agree to comply with the terms and conditions of the scheme related documents of the Scheme and the terms & conditions of enrolment for Systematic Investment Plan (SIP) and of NACH/Debit Clearing/Direct Debit/ Standing Instruction facilities. I/We hereby apply to the Trustees for enrolment under the SIP.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various mutual Funds from amongst which the Scheme is being recommended to me/us.

SIGNATURE (S)

First/ Sole Unit holder/ Guardian/ POA Holder

Second Unit holder

Third Unit holder

Please note: Signature(s) should be as it appears in the folio/ on the Application Form and in the same order.  
In case the mode of holding is joint, all Unit holders are required to sign.

## Terms and Conditions and Instructions

For detailed terms and conditions on SIP, including for OTM facility, please visit our website [www.hdfcfund.com](http://www.hdfcfund.com) and also refer to scheme related documents.

- Where a onetime mandate is already registered in a folio for a bank account, the Unit Holder(s) will have to fill only the SIP Registration Form and there is no need of a separate cheque to be given along with the SIP Registration Form.
  - The total of all installments in a day should be less than or equal to the amount as mentioned in One Time Mandate already registered or submitted, if not registered.
  - Where the mandate form and the SIP registration form are submitted together, debits for the SIP may happen only on successful registration of the mandate by the Unit holder(s) bank. The Fund / AMC would present the SIP transactions without waiting for the confirmation of the successful registration from the Unit holder(s)' bank.
  - In case the onetime mandate is successfully registered, new SIP registration will take upto five days. The first debit may happen any time thereafter, based on the dates opted by the Unit holder(s).
  - While the Fund and RTA reserve the right to enhance the SIP period to ensure minimum installments as per respective scheme offer documents, even if the investor has submitted the form late or requested for a period less than minimum installments, they may reject the applications for less than minimum installments.
  - If start date for SIP period is not specified, SIP will be registered to start anytime from a period after five days from the date of receipt of application based on the SIP date available / mentioned, subject to mandate being registered.
  - If any time during the SIP period, the onetime mandate is to be modified to reduce the validity period which is more than SIP end period registered through OTM, investor should first cancel the SIP and thereafter modify the OTM end period.
  - In case of Micro SIP application without PAN, the investor/s hereby declare that they do not have any existing Micro SIPs with HDFC Mutual Fund which together with the current application will result in aggregate investments exceeding Rs. 50,000 in a year.
  - In case the selected date falls on a Non-Business Day or on a date which is not available in a particular month, the SIP will be processed on the immediate next business day/date.
  - For SIPs through OTM, the maximum per installment amount after Top-Up shall not exceed Rs. 5 lakhs or the maximum amount mentioned in OTM form, whichever is less.
  - The Top-up details cannot be modified once enrolled. In order to make any changes, the investor needs to cancel the existing SIP and enroll for a fresh SIP with Top-up option.
  - HDFC Mutual Fund or the AMC, its registrars and other service providers are not responsible if the registration and subsequent transaction are delayed or not effected or the investor's bank account is debited in advance or after the specific SIP date due to local holidays or any other reason.
  - Investors are deemed to have read and understood the terms and conditions of OTM Facility and SIP facility in the Scheme Information Document, Statement of Additional Information, Key Information Memorandum, Instructions and Addenda issued from time to time of the respective Scheme(s) of HDFC Mutual Fund.
  - The Enrolment Form should be submitted atleast 30 days before the first date ^ for NACH/ Direct Clearing/ Direct Debit/ Standing Instruction.
- If the start period is not mentioned, the chosen/Default date falling 15 days from submission date will be considered as the start date and will be registered from that date (eg. If the application is submitted on June 1 without indicating the start period then the SIP start date would be July 1).
- In cases where D-SIP/W-SIP application is accompanied with fresh OTM mandates, the start date/day for D-SIP/W-SIP shall be 10 days after receipt of confirmation for registration of OTM from destination banks.
- Investors enrolling for D-SIP/W-SIP should select "As & when presented" as payment frequency in the OTM.
- In case the D-SIP/W-SIP instalment is not debited on a particular day on account of system constraints, technical/operational issues/actions of other parties or any other circumstances beyond the control of HDFC AMC/Fund, such missed debits will not be re-initiated.
- ^ In case the auto debit start date/day as mentioned in the form does not satisfy this condition, the first date/day shall be rolled over to begin from the immediately following month (provided the roll over date/day does not exceed the maximum time gap of 90 days between the SIP submission date and first installment of SIP through NACH/Direct Clearing or Direct Debit/ Standing Instruction) and the end date/day shall accordingly get extended.
- The SIP registrations will be discontinued in cases where six (6) consecutive installments are not honored.

## ACKNOWLEDGEMENT SLIP FOR SIP (To be filled in by the Investor)

Scheme / Plan / Option	<input type="text"/>	Scheme 1
	<input type="text"/>	Scheme 2
	<input type="text"/>	Scheme 3

[For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]

e-mail us at: [hello@hdfcfund.com](mailto:hello@hdfcfund.com) or visit our website: [www.hdfcfund.com](http://www.hdfcfund.com) Missed Call Number - +91 85069 36767

# Application Form for Equity and Debt Flex Systematic Investment Plan (Flex SIP) [For Investments through NACH/ Direct Clearing/ Direct Debit Facility/ Standing Instruction]

Important: Please strike out the Section(s) that is/are not used by you to avoid any unauthorised use



MUTUAL FUND

BHAROSA APNO KA

October 2023

Enrolment Form no.

## KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.)

ARN/RIA Code/Stock Broker/ Portfolio Manager Registration Number (PMRN)	ARN/RIA/Stock Broker/ Portfolio Manager's Name	Sub-Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Unique Identification Number (EUIIN)
ARN- ARN-83784					E069303

### EUIIN Declaration (only where EUIIN box is left blank)

I/We hereby confirm that the EUIIN 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.

Sign Here	Sign Here	Sign Here
First/ Sole Applicant/ Guardian/ PoA Holder	Second Applicant	Third Applicant

### Transaction Charges for Applications through Distributors only

Date: D D M M Y Y Y Y

I confirm that I am a first time investor across Mutual Funds.

OR

I confirm that I am an existing investor across Mutual Funds.

If the total commitment of investment through SIP (i.e. amount per SIP installment X no. of installments) amounts to Rs.10,000 or more and your Distributor has opted to receive transaction Charges, the same are deductible as applicable from the installment amount and payable to the Distributor. In such cases Transaction Charge will be recoverable in 3-4 installments. Units will be issued against the balance of the installment amounts invested.

Please (✓) any one. In the absence of indication of the option the form is liable to be rejected.

NEW REGISTRATION

CANCELLATION

## 1) INVESTOR DETAILS

Application No. (For new investor)/ Folio No. (For existing Unitholder)

Applicant	Name	PAN/ PEKRN* (Mandatory)
Sole / First Applicant		
Second Applicant		
Third Applicant		
Guardian/POA Holder		

# Please attach Proof. If PAN/PEKRN/KYC is already validated please don't attach any proof. PEKRN mandatory for Micro SIP.

## I/WE WOULD LIKE TO INVEST TO MEET MY/OUR FINANCIAL GOALS (choose anyone (✓))

Purchase of Residence  Children's Education  Children's Marriage  Retirement  Others *Please Specify*

Target Amount

## 2) INVESTMENT DETAILS FOR SIP [Please tick (✓)]

Scheme Name	1.	2.	3.
Plan / Option			
Frequency	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly	<input type="checkbox"/> Monthly* <input type="checkbox"/> Quarterly
Start Month/Year	M M Y Y Y Y	M M Y Y Y Y	M M Y Y Y Y
Tenure of Flex SIP	<input type="checkbox"/> 3 Years <input type="checkbox"/> 5 Years* <input type="checkbox"/> 10 Years <input type="checkbox"/> 15 Years <input type="checkbox"/> 20 Years	<input type="checkbox"/> 3 Years <input type="checkbox"/> 5 Years* <input type="checkbox"/> 10 Years <input type="checkbox"/> 15 Years <input type="checkbox"/> 20 Years	<input type="checkbox"/> 3 Years <input type="checkbox"/> 5 Years* <input type="checkbox"/> 10 Years <input type="checkbox"/> 15 Years <input type="checkbox"/> 20 Years
First SIP Transaction via Cheque No.			
Cheque Dated	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
Amount			

\*Default, if not selected. • Investors/unit holders subscribing for this facility are required to submit the request at least 30 days prior to the SIP date.

**Mandatory Enclosure** (if 1st Installment is not by cheque)  Blank cancelled cheque  Copy of cheque

The name of the first/ sole applicant must be pre-printed on the cheque.

## 3) BANK DETAILS

OTM Bank Details to be debited for the SIP (OTM already Registered)

Bank Name: Account Number:

NOTE: In case the OTM is not registered, please fill in the attached OTM Debit Mandate.

## ACKNOWLEDGEMENT SLIP FOR Flex SIP (To be filled in by the Investor)

HDFC MUTUAL FUND: Head Office : HDFC House, 2nd Floor, H.T. Parekh Marg, 165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.

DATE D D M M Y Y Y Y FOLIO NO.

Received from Mr. / Ms.

ISC Stamp & Signature

[For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]

e-mail us at: [hello@hdfcfund.com](mailto:hello@hdfcfund.com) or visit our website: [www.hdfcfund.com](http://www.hdfcfund.com) Missed Call Number - +91 85069 36767

**4) UNIT HOLDING OPTION**  **DEMAT MODE\***  **PHYSICAL MODE (Default)** (refer instruction 6)

\*Demat Account details are mandatory for (i) Foreign Portfolio Investors and (ii) investors who wish to hold the units in Demat Mode (Account statement (CAS) for units held in demat mode will be issued only by NSDL/CDSL)

NSDL	Depository Participant (DP) Name _____	DP ID	I	N								Beneficiary Account No.							
CDSL	Depository Participant (DP) Name _____	Beneficiary Account No.																	

\*Investor opting to hold units in demat form, may provide a copy of the DP statement for us to match the demat details as stated in the application form.

**5) DECLARATION AND SIGNATURE(S)**

I/We hereby confirm and declare as under:-

I/We have read, understood and agree to comply with the terms and conditions of the scheme related documents of the Scheme and the terms & conditions of enrolment for Flex Systematic Investment Plan (Flex SIP) and of NACH/ Debit Clearing / Direct Debit / Standing Instruction facilities. I/We hereby apply to the Trustees for enrolment under the Flex SIP.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various mutual Funds from amongst which the Scheme is being recommended to me/us.

**SIGNATURE (S)**

First/ Sole Unit holder/ Guardian/ POA Holder

Second Unit holder

Third Unit holder

**Please note: Signature(s) should be as it appears in the folio/ on the Application Form and in the same order. In case the mode of holding is joint, all Unit holders are required to sign.**

**Terms and Conditions and Instructions**

For detailed terms and conditions on Flex SIP, including for OTM facility, please visit our website [www.hdfcfund.com](http://www.hdfcfund.com) and also refer to scheme related documents.

HDFC Flex Systematic Investment Plan ("Flex SIP"), a facility whereby investors can invest at predetermined intervals in the eligible schemes of the Fund, higher amount(s) determined by a formula linked to value of investments, to take advantage of market movements.

A. Flex SIP facility is currently available under growth option of open ended equity schemes and open ended hybrid schemes of the Fund (eligible schemes). The eligible schemes for Flex SIP investments are subject to change from time to time. Investors are requested to email us at [hello@hdfcfund.com](mailto:hello@hdfcfund.com) or visit our website [www.hdfcfund.com](http://www.hdfcfund.com) or contact nearest Investor Service Centre (ISC) of the Fund for the updated list of eligible schemes.

B. a. The first Flex SIP installment will be processed for the fixed amount specified by the Unitholder in the enrolment form. The installment amount mentioned shall not exceed Rs. 1 Lakh. From the second installment onwards, the investment amount shall be computed as per the formula stated below:

- b. For installments under Flex SIP, the amount to be invested in the Scheme as on the date of SIP shall be higher of:
  - o Fixed amount to be invested per installment; or
  - o The amount determined by the formula: (fixed amount to be invested per installment X number of installments including the current installment) – market value of the investments through Flex SIP 2 business days prior to the SIP date.

c. At any given point in time, the subsequent Flex SIP installment amount determined by the above formula shall be capped at 2 times the first Flex SIP installment amount or Rs.1,99,999/- whichever is lower. The installment amount shall be rounded off to nearest multiple of Re. 1/-.

d. The total amount invested during the tenure of the Flex SIP shall not exceed the total enrolment amount i.e. fixed amount per installment X total number of installments under the Flex SIP registration. Thus, the last installment will be adjusted accordingly.

C. **Illustration 1:** How would the Flex SIP installment be calculated?

Flex SIP Enrolment Details:

Scheme Name	: HDFC Top 100 Fund - Growth Option ("the Scheme")
Installment Date & Frequency of Flex SIP	: 15th of every month (T)
Fixed Installment Amount	: Rs. 5000/-
Number of Installments	: 36
Total Enrolment Amount	: Rs 5000 X 36 = Rs 1,80,000
Period	: January 2018 to December 2020

Calculation of Flex SIP installment amount for instance on the date of the fourth installment i.e. April 15, 2018 (T):

- Total units allotted upto the date of previous installment i.e. March 15, 2018 is assumed as 685.50;
- The NAV of the Scheme on April 13, 2018 (T-2) is assumed as Rs. 18/- per unit;
- Hence the market value of the investment in the Scheme on April 13, 2018 is Rs. 12,339 [685.50 X 18].

The installment amount will be calculated as follows:

Fixed amount specified at the time of enrolment	: Rs. 5,000/-
	or
As determined by the formula	: [(5,000 X 4) – 12,339.00] = Rs. 7,661.00
whichever is higher	

Hence, the installment amount on April 15, 2018 will be Rs. 7,661.00

**Illustration 2:** How would maximum Flex SIP installment be calculated?

Calculation of Flex SIP installment amount for instance on the date of the seventh installment i.e. July 15, 2018 (T):

- Total units allotted upto the date of previous installment i.e. June 15, 2018 is assumed as 1,558.675;
- NAV of the Scheme on July 13, 2018 (T-2) is assumed as Rs. 14/- per unit;
- Hence the market value of the investment as on July 13, 2018 is Rs. 21,821 [1558.675 X 14].

The installment amount will be calculated as follows:

Fixed amount specified at the time of enrolment	: Rs. 5,000/-
	or
As determined by the formula	: [(5,000 X 7) – 21,821.00] = Rs. 13,179.00
whichever is higher; subject to 2 times the initial installment amount	

Hence, the installment amount on July 15, 2018 amount will be Rs. 10,000/-

Thus this Flex SIP facility helps to buy more units when the NAVs are lower. HDFC Flex SIP in any manner whatsoever is not an assurance or promise or guarantee on part of HDFC Mutual Fund/ HDFC Asset Management Company Limited to the Unit holders in terms of returns or capital appreciation or minimization of loss of capital or otherwise.

**Illustration 3:** How would the total enrolment amount under Flex SIP be calculated?

As per the details of Flex SIP provided in the above illustration, the total enrolment amount for Flex SIP will be equal to Rs 1,80,000 (5000 X 36 months).

If the total amount invested in Flex SIP till the 34th month is Rs 1,77,000, then the 35th installment will be Rs. 3000 (Rs. 1,80,000 – Rs. 1,77,000) and the Flex SIP will cease.

**Note: The dates in the illustrations above are assumed to be Business Days. The above illustrations are for understanding purpose only. The amount for subsequent installments (i.e. installments after the 1st installment) will be calculated based on the market value of the investment 2 days before the Installment date (T). However, the installment will be processed on SIP debit date subject to applicable NAV as per cut-off timing guidelines.**

D. An investor has an option to choose from 5 Flex SIP tenures viz. 3 years, 5 years, 10 years, 15 years and 20 years. If a tenure is not chosen, 5 years shall be the default Flex SIP tenure.

E. The facility offers Monthly Flex Systematic Investment Plan (MFLEX) and Quarterly Flex Systematic Investment Plan (QFLEX) frequencies. In case the frequency is not indicated, Monthly frequency shall be treated as the Default Frequency.

	Schemes other than HDFC ELSS Tax saver*	HDFC ELSS Tax saver*
i) Minimum Amount per Installments		
MFLEX	Rs. 500/- and in multiples of Rs. 100/-	Rs. 500/- and in multiples of Rs. 500/-
QFLEX	Rs. 1,500/- and in multiples of Rs. 100/-	Rs. 1,500/- and in multiples of Rs. 500/-

\*open-ended equity linked savings scheme with a lock-in period of 3 years.

F. SIP Top-Up is not available under Flex SIP.

G. Mode of Payment: Flex SIP shall be processed only through NACH mode.

Unitholders are requested to ensure that the amount mentioned in the OTM mandate shall be atleast 2 times the amount of fixed installment to be invested per installment.

H. In case, there is a reversal of any SIP installment due to insufficient balance or technical reasons, the balance installments under Flex SIP will be processed for the fixed installment amount specified by the unitholder at the time of enrolment.

I. In case there is a redemption/ switch-out of any units allotted under Flex SIP, the balance installments under Flex SIP will be processed for the fixed installment amount specified by the unitholder at the time of enrolment. However, in case of any errors in processing, particularly redemptions, by the Registrar and Transfer Agent, the same may be rectified and Flex-SIP may continue.

**ACKNOWLEDGEMENT SLIP FOR SIP (To be filled in by the Investor)**

Scheme / Plan / Option	_____	Scheme 1
	_____	Scheme 2
	_____	Scheme 3

[For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]

e-mail us at: [hello@hdfcfund.com](mailto:hello@hdfcfund.com) or visit our website: [www.hdfcfund.com](http://www.hdfcfund.com) Missed Call Number - +91 85069 36767



# OTM Debit Mandate Form NACH/DIRECT DEBIT/SI

[Applicable for Lumpsum Additional Purchases as well as SIP Registrations received through various modes]



UMRN           OFFICE USE ONLY         Date

Utility Code           OFFICE USE ONLY             Create  Modify  Cancel

Sponsor Bank Code  OFFICE USE ONLY I/We authorize

To debit (tick✓)  Bank A/c number

With Bank  IFSC/MICR

an amount of Rupees  ₹

**Debit Type**  Fixed Amount  Maximum Amount **Frequency**  Monthly  Quarterly  Half Yearly  Yearly  As & when presented

PAN/PEKRN  Reference 2

1. 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. 2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorising the user entity/Corporate to debit my account, based on the instructions as agreed and signed by me. 3. I have understood that I am authorised to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the user entity/ corporate or the bank where I have authorized the debit.

From

To         Signature of Primary Account Holder Signature of Account Holder Signature of Account Holder

Phone No.  1. Name as in Bank Records 2. Name as in Bank Records 3. Name as in Bank Records



S	SYSTEMATIC
W	WITHDRAWAL
A	ADVANTAGE
P	PLAN



## Enrolment Form

(Please refer Product labeling available on page 127 & 129 and terms and conditions overleaf)

Date : 

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I/ We hereby declare and confirm that I/we have read and agree to abide by the terms and conditions of the scheme related documents and the terms and conditions mentioned overleaf of Systematic Withdrawal Advantage Pan (SWAP) and of the relevant Scheme(s) and hereby apply to the Trustees for enrolment under the SWAP of the following Scheme(s)/ Plan(s)/ Options(s). **The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.**

Please (✓) any one. In the absence of indication of the option the form is liable to be rejected.

<input type="checkbox"/> <b>New Registration:</b> For enrolment under SWAP facility	<input type="checkbox"/> <b>Change in withdrawal amount:</b> For Change in withdrawal amount under SWAP facility	<input type="checkbox"/> <b>Cancellation:</b> For cancellation of SWAP facility
--	---	--

FOLIO NO. OF EXISTING UNIT HOLDER / APPLICATION NO. (New Investor)	
--	--

### 1) UNIT HOLDER INFORMATION

<b>First / Sole Unit holder</b>	PAN# or PEKRN# <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table> KYC Number <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>
<b>Guardian</b> (in case of First / Sole Unit holder is a minor)	PAN# or PEKRN# <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table> KYC Number <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>

### 2) SCHEME DETAILS (If the SWAP is to be registered from Direct Plan of the Scheme, please mention so clearly.)

SCHEME NAME #	
PLAN	
OPTION	

# Please note that one SWAP Form must be used for one Scheme / Plan / Option only. Unit holder(s) need to fill in Separate SWAP Form for each Scheme / Plan / Option.

### 3) WITHDRAWAL DETAILS (Please ✓ choice of Plan)

<input type="checkbox"/> <b>Fixed Plan</b> (Refer item 8(ii) & (iii) overleaf) <input type="radio"/> MONTHLY@ <input type="radio"/> QUARTERLY <input type="radio"/> HALF-YEARLY <input type="radio"/> YEARLY    (@ Default Frequency)	<input type="checkbox"/> <b>Variable Plan</b> (Capital Appreciation, if any) (Refer item 9(ii) overleaf) <input type="radio"/> QUARTERLY® <input type="radio"/> HALF-YEARLY <input type="radio"/> YEARLY    (@ Default Frequency)
Rs. (in figures) <table border="1" style="width: 100%; height: 20px;"></table>	
Rs. (in words) <table border="1" style="width: 100%; height: 20px;"></table>	

### 4) ENROLMENT DETAILS (refer item 7, 8, 9 & 10 overleaf)

Commencement Date : <table border="1" style="display: inline-table; width: 100px; height: 20px;"></table> (Refer Item 8(v), 9(iii) & 10 overleaf)	Withdrawal Date <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/> 5th <input type="checkbox"/> 6th <input type="checkbox"/> 7th <input type="checkbox"/> 8th <input type="checkbox"/> 9th <input type="checkbox"/> 10th <input type="checkbox"/> 11th <input type="checkbox"/> 12th <input type="checkbox"/> 13th <input type="checkbox"/> 14th <input type="checkbox"/> 15th <input type="checkbox"/> 16th <input type="checkbox"/> 17th <input type="checkbox"/> 18th <input type="checkbox"/> 19th <input type="checkbox"/> 20th <input type="checkbox"/> 21st <input type="checkbox"/> 22nd <input type="checkbox"/> 23rd <input type="checkbox"/> 24th <input type="checkbox"/> 25th® <input type="checkbox"/> 26th <input type="checkbox"/> 27th <input type="checkbox"/> 28th <input type="checkbox"/> 29th <input type="checkbox"/> 30th <input type="checkbox"/> 31st   (@ Default Date)
Last Withdrawal Date : <table border="1" style="display: inline-table; width: 100px; height: 20px;"></table>	

### 5) PAYMENT OF SWAP PROCEEDS (refer item 14)

**Redemption proceeds through SWAP will be credited to the default bank account registered in the Folio. If you wish to receive the redemption proceeds into any other bank account registered in the Folio, please mention the Bank Account No. and Name below:**

ACCOUNT NO. <table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>
BANK NAME <table border="1" style="display: inline-table; width: 700px; height: 20px;"></table>

(If the above mentioned bank details do not match with the registered bank account in your the Folio, proceeds will be credited to the default bank account registered in the Folio.)

### 6) SIGNATURES ^

First / Sole Unit holder / Guardian	Second Unit holder	Third Unit holder

^ *Please note: Signature(s) should be as it appears in the Folio/ on the Application Form and in the same order.*

**In case the mode of holding is joint, all Unit holders are required to sign.**

#### ACKNOWLEDGEMENT SLIP (To be filled in by the Unit holder)

Date :	<p style="text-align: center;">HDFC MUTUAL FUND</p> <p style="text-align: center;">Head Office : HDFC House, 2nd Floor, H.T. Parekh Marg, 165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.</p>	ISC Stamp & Signature <div style="border: 1px solid black; width: 100%; height: 50px;"></div>
Received from Mr. / Ms. / M/s. _____		
a 'SWAP' application for redemption of Units of Scheme / Plan / Option _____		

# Enrolment Form

(Please refer Product labeling available on page 57 & 58 and terms and conditions / Instructions overleaf)

Enrolment Form No. \_\_\_\_\_

KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.)						FOR OFFICE USE ONLY (TIME STAMP)
ARN/RIA Code/Stock Broker/Portfolio Manager Registration Number (PMRN)	ARN/RIA/Stock Broker/Portfolio Manager's Name	Sub Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/Employee	Employee Unique Identification Number (EJIN)	
ARN-						

**EUIN Declaration (only where EUIN box is left blank) (Refer Instruction No. 19)**

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.

Sign Here _____ First / Sole Unit Holder / Guardian	Sign Here _____ Second Unit Holder	Sign Here _____ Third Unit Holder
---	--	---

I/ We hereby declare and confirm that I/we have read and agree to abide by the terms and conditions of the scheme related documents and the terms & conditions mentioned overleaf of Systematic Transfer Plan (STP) and the relevant Scheme(s) and hereby apply to the Trustees for enrolment under the STP in the following Scheme(s)/Plan(s)/Options(s). **The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.**

Please (✓) any one.

NEW REGISTRATION

CANCELLATION

Date: 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Folio No. of 'Transferor' Scheme (for existing Unit holder) / Application No. (for new investor) \_\_\_\_\_

Name of the Applicant		KYC is mandatory# Please (✓)
Name of First/Sole Applicant	PAN# or PEKRN# _____ KYC Number _____	Proof Attached <input type="checkbox"/>
Name of Guardian in case First/Sole Applicant is a minor	PAN# or PEKRN# _____ KYC Number _____	Proof Attached <input type="checkbox"/>
Name of Second Applicant	PAN# or PEKRN# _____ KYC Number _____	Proof Attached <input type="checkbox"/>
Name of Third Applicant	PAN# or PEKRN# _____ KYC Number _____	Proof Attached <input type="checkbox"/>

# Please attach Proof. If PAN/PEKRN/KYC is already validated, please don't attach any proof. Refer Instruction No. 16 and 17

Name of 'Transferor' Scheme/Plan/Option	(Investors applying under Direct Plan must mention "Direct" against the Scheme name).																
Name of 'Transferee' Scheme/Plan/Option	(Investors applying under Direct Plan must mention "Direct" against the Scheme name).																
For Fixed Systematic Transfer Plan (FSIP) (for T&C of STP registered during NFO, Refer Instruction No. 8) (Please ✓ any one) (Refer Instruction No. 7)	Amount of Transfer per Installment: Rs. _____																
	<input type="radio"/> Daily#	No. of Installments:* _____															
	<input type="radio"/> Weekly\$ [Day of Transfer (Please ✓ any one)] <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <sup>+</sup>	No. of Installments:* _____															
	<input type="radio"/> Monthly <sup>+</sup> <input type="radio"/> Quarterly Date of Transfer (Mention any date of the month) <table border="1"><tr><td>D</td><td>D</td></tr></table>	D	D	Enrolment Period*: From: <table border="1"><tr><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> To: <table border="1"><tr><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>		M	M	Y	Y	Y	Y	M	M	Y	Y	Y	Y
D	D																
M	M	Y	Y	Y	Y												
M	M	Y	Y	Y	Y												
For Capital Appreciation Systematic Transfer Plan (CASTP) (Not available during the NFO period) (Please ✓ any one) (Refer Instruction No. 9)	<input type="radio"/> Monthly <sup>+</sup> <input type="radio"/> Quarterly																
	Date of Transfer (Mention any date of the month) <table border="1"><tr><td>D</td><td>D</td></tr></table>	D	D	Enrolment Period*: From: <table border="1"><tr><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table> To: <table border="1"><tr><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>		M	M	Y	Y	Y	Y	M	M	Y	Y	Y	Y
	D	D															
M	M	Y	Y	Y	Y												
M	M	Y	Y	Y	Y												

In case of multiple registrations, please fill up separate Enrolment Forms. #Refer Instruction No. 7 (a) \$Refer Instruction No. 7 (b) \*Refer Instruction No. 10

<sup>+</sup>Default Frequency/Date/Day [Refer Instruction 10(a)(v)&(vi)]

SIGNATURE(S)

\_\_\_\_\_  
First / Sole Unit Holder / Guardian

\_\_\_\_\_  
Second Unit Holder

\_\_\_\_\_  
Third Unit Holder

**Please note : Signature(s) should be as it appears in the folio/ on the Application Form and in the same order.  
In case the mode of holding is joint, all Unit holders are required to sign.**

**ACKNOWLEDGEMENT SLIP (To be filled in by the Unit holder)**

Date:	Head Office : HDFC House, 2nd Floor, H.T. Parekh Marg, 165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.	Enrolment Form No./Folio No.
Received from Mr./Ms./M/s. _____ from Scheme / Plan / Option _____ to Scheme / Plan / Option _____	'STP' application for transfer of Units;	ISC Stamp & Signature   

## TERMS & CONDITIONS / INSTRUCTIONS FOR STP

1. STP is a facility wherein unit holder(s) of designated open-ended scheme(s) of HDFC Mutual Fund (Transferor Scheme) can opt to transfer a fixed amount or capital appreciation amount at regular intervals to designated open-ended schemes) of HDFC Mutual Fund (Transferee Scheme). The STP Facility is available only for units held / to be held in Non-demut Mode in the Transferor and the Transferee Scheme. Currently all open ended schemes (including Direct Plan thereunder) except ETFs are eligible Transferor/ Transferee Schemes for this facility.  
**The above Scheme(s) are subject to change from time to time. Please contact the nearest Investor Service Centre (ISC) of HDFC Mutual Fund for updated list.**
2. The STP Enrolment Form should be completed in English and in Block Letters only. Please tick (✓) in the appropriate box (□), where boxes have been provided. The STP Enrolment Form complete in all respects, should be submitted at any of the Official Points of Acceptance of HDFC Mutual Fund.
3. One STP Enrolment Form can be filled for one Scheme/Plan/Option only.
4. Investors are advised to read the Key Information Memorandum(s) (KIMs) and Scheme Information Document(s) (SIDs) of the Transferee Scheme(s) and Statement of Additional Information (SAI) carefully before investing. The SIDs / KIMs of the respective Scheme(s) and SAI are available with the ISCs of HDFC Mutual Fund, brokers/distributors and also displayed at the HDFC Mutual Fund website i.e. www.hdfcfund.com
5. Unit holders should note that unit holders' details and mode of holding (single, joint, anyone or survivor) in the Transferee Scheme will be as per the existing folio number of the Transferor Scheme. Units will be allotted under the same folio number. Unitholders' names should match with the details in the existing folio number, failing which, the application is liable to be rejected.
6. STP offers unit holders the following two Plans:
  - i. Fixed Systematic Transfer Plan (FSTP)
  - ii. Capital Appreciation Systematic Transfer Plan (CASTP)
 FSTP offers transfer facility at daily, weekly, monthly and quarterly intervals and CASTP offers transfer facility at monthly and quarterly intervals. Unit holder is free to opt for any of the Plans and also choose the frequency of such transfers. If no frequency is chosen, Monthly frequency shall be treated as the Default Frequency.
7.
  - a. Under the FSTP -Daily Interval, unit holders will be eligible to transfer a fixed amount (minimum Rs. 500 and in multiples of Rs. 100 thereafter for schemes other than HDFC ELSS Tax saver\* and minimum Rs. 500 and in multiples of Rs. 500 thereafter for HDFC ELSS Tax saver\*) on every Business Day.
  - b. Under the FSTP - Weekly Interval, unit holders will be eligible to transfer a fixed amount (minimum Rs. 500 and any amount thereafter for schemes other than HDFC ELSS Tax saver\* and minimum Rs. 500 and in multiples of Rs. 500 thereafter for HDFC ELSS Tax saver\*) on any Business Day of the week i.e. Monday, Tuesday, Wednesday, Thursday or Friday.
  - c. Under the FSTP - Monthly Interval, unit holders will be eligible to transfer a fixed amount (minimum Rs. 1,000 and in multiples of Rs. 100 thereafter for schemes other than HDFC ELSS Tax saver\* and minimum Rs. 500 and in multiples of Rs. 500 thereafter for HDFC ELSS Tax saver\*) on any date of each month.
  - d. Under the FSTP - Quarterly Interval, unit holders will be eligible to transfer a fixed amount (minimum Rs. 3,000 and in multiples of Rs. 100 thereafter for schemes other than HDFC ELSS Tax saver\* and minimum Rs. 500 and in multiples of Rs. 500 thereafter for HDFC ELSS Tax saver\*) on any day of the first month of each quarter. The beginning of the quarter could be of any month e.g. April, August, October, November, etc.

\*an open-ended equity linked savings scheme with a lock-in period of 3 years.

In case there is no minimum amount (as specified above under each Option) available in the unit holder's account, the residual amount will be transferred to the Transferee Scheme and account will be closed.

If STP date/day is a non-Business Day, then the next Business Day shall be the STP Date/ Day and the same will be considered for the purpose of determining the applicability of NAV.

Unit holders should be aware that if they decide to take up this facility, there is possibility of erosion of capital e.g. If the unit holder decides to transfer Rs. 3,000 every quarter and the appreciation is Rs. 2,500, then such transfer proceeds will comprise of Rs. 2,500 from the capital appreciation and Rs. 500 from the unit holder's capital amount.
8. **STP during NFO-**
  - i. STP during NFO would be available only under FSTP option. The first installment for STP application received for monthly / quarterly frequency would be processed on the allotment date irrespective of the transfer date opted by the investor. However, subsequent transfers would be processed on the date opted by the investor. In respect of STP instalments for daily and weekly frequencies falling upto the NFO allotment date, STP-out will be processed as per the Applicable NAV of Transferor Scheme on the relevant instalment dates. However, STP-into the new scheme will be processed on the NFO allotment date. The STP instalments under Daily and Weekly frequencies falling between the NFO allotment date and scheme re-opening date, will be processed on the scheme re-opening date at applicable NAVs of Transferor and Transferee Scheme.
  - ii. Applications received under FSTP during NFO would be accepted only upto 1 day prior to NFO closure date. For applications submitted on the last day of the NFO, the STP would commence post reopening of scheme, on the installment date chosen by the investor.
  - iii. HDFC Mutual Fund/ AMC may from time to time add/ alter/ amend the rules for processing STP applications during NFO. HDFC Mutual Fund/ AMC has the right to process applications received during the NFO in a manner it may deem fit and has the right to reject any application.
9. Under the CASTP- Monthly Interval, unit holders will be eligible to transfer the entire capital appreciation amount (minimum Rs. 300) by way of capital appreciation on any date of each month. Under the CASTP-Quarterly Interval, unit holders will be eligible to transfer the entire capital appreciation amount (minimum Rs. 1,000) by way of capital appreciation on any date of the first month of each quarter. The beginning of the quarter could be of any month e.g. April, August, October, November, etc. Please note that no transfers will take place if there is no minimum capital appreciation amount (except for last transfer leading to closure of account). The capital appreciation, if any, will be calculated from the enrolment date of the CASTP under the folio, till the first transfer date. Subsequent capital appreciation, if any, will be the capital appreciation between the previous CASTP date (where CASTP has been processed and paid) and the next CASTP date e.g. if the appreciation is Rs. 3,500 in the first quarter and Rs. 3,000 in the second quarter, the unit holder will receive only the appreciation i.e. Rs. 3,500 in the first quarter and Rs. 3,000 in the second quarter.
10.
  - a.
    - (i) The minimum number of installments under Daily FSTP and Weekly FSTP is as follows:
      - For schemes other than HDFC ELSS Tax saver\*:
        - where installment amount is less than Rs. 1,000/- : 12
        - where installment amount is equal to or greater than Rs. 1,000/- : 6
      - For HDFC ELSS Tax saver\*: 6

\* an open-ended equity linked savings scheme with a lock-in period of 3 years.
    - (ii) There should be a minimum of 6 Installments for enrolment under Monthly FSTP and CASTP and 2 installments for Quarterly FSTP and CASTP.
    - (iii) Also, the minimum unit holder's account balance or a minimum amount of application at the time of STP enrolment in the Transferor Scheme should be Rs. 12,000.
    - (iv) In case of FSTP Daily / Weekly Interval and Monthly/ Quarterly Interval, Unitholders are required to fill in the number of installments and the enrolment period respectively in the Enrolment Form, failing which the Form is liable to be rejected.
    - (v) In case Day of Transfer has not been indicated under FSTP - Weekly frequency, Friday shall be treated as Default day of transfer.
    - (vi) In case, the Enrolment Period has been filled, but the STP Date and/or Frequency (Monthly/ Quarterly) has not been indicated, Monthly frequency shall be treated as Default frequency and 10th shall be treated as Default Date.
  - b. In case of FSTP - Daily and Weekly Interval, the commencement date shall be within 15 days from the date of receipt of a valid request.
  - c. The application for enrolment for FSTP - Monthly & Quarterly Interval and CASTP - Monthly & Quarterly Interval should be submitted at least 10 Days and not more than 90 days before the desired commencement date. In case the Start Date is mentioned but End Date is not mentioned, the application will be registered for the minimum number of installments. In case the End Date is mentioned but Start Date is not mentioned, the application will be registered after expiry of 10 days from submission of the application from the default date i.e. 10th of each month / quarter (or the immediately succeeding Business Day), provided the minimum number of installments are met.
  - d. There will be no maximum duration for STP enrolment. However, STPs will be registered in a folio held by a minor, only till the date of the minor attaining majority, even though the instructions may be for a period beyond that date. The STP facility will automatically stand terminated upon the Unit Holder attaining 18 years of age.
11. **In respect of STP enrollments made in the above-mentioned Scheme(s), the Load Structure of respective Transferor and Transferee Schemes prevalent at the time of enrollment shall govern the investors during the tenure of the STP.**  
**For Scheme load structure, please refer to Key Information Memorandum or contact the nearest Investor Service Centre (ISC) of HDFC Mutual Fund or visit our website www.hdfcfund.com**
12. STP will be automatically terminated if all units are liquidated or withdrawn from the Transferor Scheme or pledged or upon receipt of intimation of death of the unit holder.
13. The provision of 'Minimum Redemption Amount' as specified in the Scheme Information Document(s) of the respective designated Transferor Schemes and 'Minimum Application Amount' specified in the Scheme Information Document(s) of the respective designated Transferee Schemes will not be applicable for STP except for HDFC ELSS Tax saver.
14. Unit holders will have the right to discontinue the STP facility at any time by sending a written request to the ISC. Notice of such discontinuance should be received at least 10 days prior to the due date of the next transfer date. On receipt of such request, the STP facility will be terminated.
15. Units of HDFC ELSS Tax saver (open-ended equity linked savings schemes with a lock-in period of 3 years) cannot be assigned/ transferred / pledged/ redeemed / switched - out until completion of 3 years from the date of allotment of the respective units.
16. **Permanent Account Number**  
 SEBI has made it mandatory for all applicants (in the case of application in joint names, each of the applicants) to mention his/her permanent account number (PAN) {Except as mentioned below} irrespective of the amount of investment. Where the applicant is a minor, and does not possess his / her own PAN, he / she shall quote the PAN of his / her father or mother or the guardian, as the case may be. Applications not complying with the above requirement may not be accepted/ processed. PAN card copy is not required separately if KYC acknowledgement letter is made available with PAN Number.  
**Redemption and related transaction(s) will not be allowed if PAN is not updated in the folios.**  
 For further details, please refer Section 'Permanent Account Number' under Statement of Additional Information available on our website www.hdfcfund.com
- PAN Exempt Investments**  
 PAN Exempt KYC Reference Number (PEKRN) holders may enroll for this facility. For further details on PAN exempt Investments, refer Instructions of Scheme Application Form or Statement of Additional Information. However, if the amount per installment is Rs.50,000 or more, in accordance with the extant Income Tax rules, investors will be required to furnish a copy of PAN to the Mutual Fund.
17. **Know Your Customer (KYC) Compliance:** Investors should note that it is mandatory for all registrations for Systematic Transfer Plan (STP) to quote the KYC Compliance Status/ KYC Number, as applicable for each applicant (guardian in case of minor) in the application and attach proof of KYC Compliance viz. KYC Acknowledgement Letter. For more details, please refer to the Statement of Additional Information available on our website www.hdfcfund.com
18. Investors with existing STP enrolment, who wish to invest under the Direct Plan of the Transferee Scheme must cancel their existing enrolment and register afresh for the facility.
19. **Investments through distributors**  
 As per directions of Securities and Exchange Board of India (SEBI), Investors can route their application forms directly and /or through the distributors / employees of the distributor who hold a valid certification from the National Institute of Securities Markets (NISM) and ARN provided by Association of Mutual Funds in India (AMFI). Further, no agents / distributors are entitled to sell units of mutual funds unless the intermediary is registered with AMFI.  
**Employee Unique Identification Number (EUIIN)**  
 Every employee/ relationship manager/ sales person of the distributor of mutual fund products to quote the EUIIN obtained by him/her from AMFI in the Application Form. Investors are requested to verify the AMFI registration details from their Distributor. However, in case of any exceptional cases, where there is no interaction by the employee/ sales person/relationship manager of the distributor/sub broker with respect to the transaction and EUIIN box is left blank, you are required to provide the duly signed declaration to the effect as given in the form.
- New cadre distributors**  
 Postal agents, retired government and semi-government officials (class III and above or equivalent), retired teachers and retired bank officers (all such retired persons with at least 10 years of service) and other similar persons (such as Bank correspondents) as may be notified by AMFI/ the AMC from time to time as new cadre distributors are permitted to sell eligible schemes of the Fund (details of eligible scheme is available on www.hdfcfund.com). They also hold an EUIIN which must be quoted in the application form. In case your application for subscription through such distributor is not for an eligible scheme, it is liable to be rejected. These requirements do not apply to Overseas Distributors.
- Overseas Distributors**  
 For, overseas Distributors, the ARN Code provided by AMFI is required to be incorporated in the space provided. Overseas Distributors are required to comply with the laws, rules and regulations of jurisdictions where they carry out their operations in the capacity of distributors.
20. HDFC Mutual Fund / HDFC Asset Management Company Limited reserves the right to change/modify the terms and conditions of the STP. For the updated terms and conditions of STP, contact the nearest ISC or visit our website www.hdfcfund.com