COMMON APPLICATION FORM
(For Lumpsum, SIP & Multi-Scheme SIP Investments)

L&T Mutual Fund

App. No. Time Stamp

Distributor Code	Sub-Distributor Code	Branch Code	Relationship Manager's Details	
ARN-97821			EUIN	Name
			E113814	Mobile No. +91-
				E-Mail ID

Initial Commission will be paid by the investor directly to the distributor, based on assessment of various factors including the service rendered by the Distributor.

Transaction Charges	Investor's Declaration where EUIN is not furnished
SEBI (Mutual Funds) Regulations, 1996 allow deduction of transaction charges of Rs. 100/- from your investment for payment to your distributor if your distributor has opted to receive transaction charges for investments sourced by him. The transaction charges deductible are Rs. 150/- if you are investing in Mutual Funds for the first time. If you are making a SIP Investment, the transaction charges would be deducted over 3-4 instalments. No transaction charges would be levied if you are not investing through a Distributor or your investment amount is less than Rs. 10,000/-.	I/We confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor and/ or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of distributor and the distributor has not charged any advisory fees on this transaction.
If this is the first time, you are investing in any mutual fund, please tick here ☐	Sole/1st Applicant 2nd Applicant 3rd Applicant

EXISTING UNIT HOLDER'S INFORMATION (Section 1)

If you hold a Folio with L&T Mutual Fund, please furnish the below information and move to Investment & Payment details Section

Folio No. PAN of Sole/1st Unit Holder

Name of Sole/1st Unit Holder

NEW SOLE/FIRST APPLICANT'S PERSONAL INFORMATION (Section 2)

1st Applicant's Name

Date of Birth D D M M Y Y Y Y Mobile No. +91- E-mail Id*
(Mandatory if first applicant is a minor)

*Investors providing e-mail id will receive account Statements, Annual Report & other communication vide e-mail in lieu of physical copy. If you wish to receive physical copies, please tick here ☐

If the Sole/First Applicant is a minor (i.e. below 18 years of age as on the date of this application, please provide below details) :

Guardian's Name

Proof of Date of Birth of Applicant (✓)	Guardian's Relationship with Applicant (✓)	Proof of Relationship of Guardian with Applicant (✓)
☐ Birth Certificate Copy	☐ Father	☐ Birth Certificate Copy
☐ Passport Copy	☐ Mother	☐ Passport Copy
☐ Aadhaar Card Copy	☐ Court Appointed Guardian	☐ Court Appointment Order
☐ Others (please specify)		☐ Others (please specify)

PAN of Sole/First Applicant Aadhar Card No. of 1st Applicant/Guardian

Tax Status (✓)

☐ Resident Indian Individual	☐ Non-Resident Indian Individual (NRI)	☐ Company/Body Corporate	☐ Limited Liability Partnership (LLP)	☐ Society
☐ Partnership Firm	☐ Foreign Institutional Investor (FII)	☐ Trust	☐ Defence Establishment	☐ Mutual Fund
☐ Foreign Portfolio Investor (FPI)	☐ Financial Institution	☐ Association of Persons (AOP)/ Body of Individuals (BOI)	☐ Bank	☐ Others (please specify)
☐ Non-Govt. Organisation(NGO)	☐ Government Body	☐ Hindu Undivided Family (HUF)	☐ Person of Indian Origin (PIO)	

FOR INDIVIDUALS ONLY - Sole/First Applicant (Additional mandatory details to be filled in) (Section 3)

Country of Birth (✓)
☐ India ☐ U.S.A. ☐ Others (please specify)

Country of Tax Residence (✓)
☐ India ☐ U.S.A. ☐ Others (please specify)

Tax ID

Occupation (✓)

☐ Private Sector Service	☐ Business	☐ Student
☐ Public Sector Service	☐ Housewife	☐ Forex Dealer
☐ Government Service	☐ Retired	☐ Agriculturist
☐ Professional	☐ Others (please specify)	

Gross Annual Income (Rs.) (✓)
☐ <= 1 Lac ☐ 1 - 5 Lacs ☐ 5 - 10 Lacs ☐ 10 - 25 Lacs ☐ 25 Lacs to 1 Crore ☐ > 1 Crore

Net Worth of Sole/1st Applicant Rs. as on D D M M Y Y Y Y

If you are a politically exposed person or related to a politically exposed person please (✓) appropriate option.
☐ I am a politically exposed person. ☐ I am related to a politically exposed person.

ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant) ARN-97821

L&T Mutual Fund

Received from an application for
investment in Scheme Option
Investment Type (✓) ☐ Lumpsum ☐ SIP ☐ Multi-SIP
Investment Cheque Details : Cheque No. Rs. Dated D D M M Y Y Y Y
Drawn on Bank Branch City

App. No.

For Office Use Only
Acknowledgement Stamp & Date

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FOR NON-INDIVIDUALS ONLY (Additional mandatory details to be filled in) (Section 4)

Gross Annual Income (Rs.) (✓)

☐ <= 1 Lac ☐ 1 - 5 Lacs ☐ 5 - 10 Lacs ☐ 10 - 25 Lacs
☐ 25 Lacs to 1 Crore ☐ > 1 Crore

Net Worth (Mandatory) Rs. Networth should not be older than one year

as on D D M M Y Y Y Y

Is the Entity involved/providing any of the following services :

- Gaming/Gambling/Lottery/Casino Services ☐ YES ☐ NO
- Foreign Exchange/Money Changer Services ☐ YES ☐ NO
- Money Lending/Pawning ☐ YES ☐ NO

If you are a U.S. Person, please tick (✓) if you qualify under any of the below heads of classification under Foreign Account Tax Compliance Act (FATCA) and associated regulations ***(Refer Note Y)***

☐ Specified US Person	☐ Active Non-Financial Foreign Entity	☐ Exempt Beneficial Owner
☐ Other Partner Jurisdiction Financial Institution	☐ FATCA Partner Financial Institution	☐ Passive Non-Financial Foreign Entity
☐ Deemed Compliant Foreign Financial Institution	☐ Participating Foreign Financial Institution	

Is the company a Listed Company or Subsidary of Listed Company or Controlled by a Listed Company ☐ YES ☐ NO

***Ultimate Beneficiary Owner Details (✓)**

☐ I/We are the Ultimate Beneficiary Owner(s) of this investment

☐ I/We are not the Ultimate Beneficiary Owner(s) of this investment(Please submit the declaration for 'Ultimate Beneficial Ownership' along with this form

**Where no box is ticked, the first statement will be taken as default meaning that the applicant/investor is the beneficial owner*

ADDRESS DETAILS (Address as per KRA records will be over written if you are KYC compliant) (Section 5)

Correspondence Address	Overseas Address (Mandatory for NRIs/PIOs)
, ,	
City/Town	City/Town
State Pin	State Pin
Tel (R) Tel (O)	Tel (R) Tel (O)

BANK DETAILS (For receiving Redemption/Dividend payments) (Section 6)

Bank Name

Branch City

IFSC

(The 11 character code on a cheque. If you do not find it, please ask your bank branch for it)

Account Number

Account Type ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ Others

MICR *(9-digit number next to your cheque no.)*

Mandatory to enclose original cancelled cheque leaf of the above bank account if your investment instrument is from a different bank account

Additional Details for Investments through Attorney

If your investment is being made by a Constituted Attorney on your behalf, please furnish the below details and enclose a notarised copy of the Power of Attorney for registering the same :

POA Holder's Name

PAN of POA Holder for 1st Applicant

Aadhaar Card No. of POA Holder for 1st Applicant

(POA Holder needs to comply with applicable KYC requirements)

SECOND APPLICANT'S PERSONAL INFORMATION (Please note that where the sole/first applicant is a minor, no joint holders are allowed) (Section 7)

2nd Applicant's Name

PAN of 2nd Applicant
(Mandatory to comply with applicable KYC requirements)

Aadhaar Card No. of 2nd Applicant

Country of Birth (✓)

☐ India
☐ U.S.A.
☐ Others
(please specify)

Country of Tax Residence (✓)

☐ India
☐ U.S.A.
☐ Others
(please specify)

Tax ID

Occupation (✓)

☐ Private Sector Service	☐ Business	☐ Student
☐ Public Sector Service	☐ Housewife	☐ Forex Dealer
☐ Government Service	☐ Retired	☐ Agriculturist
☐ Professional	☐ Others (please specify)	

Subject to realisation of cheque and furnishing of mandatory information/documents. Please retain this slip till you receive your Account Statement.

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Gross Annual Income (Rs.) (✓)

☐ <= 1 Lac ☐ 1 - 5 Lacs ☐ 5 - 10 Lacs ☐ 10 - 25 Lacs ☐ 25 Lacs to 1 Crore ☐ > 1 Crore

Net Worth (Mandatory) Rs. Networth should not be older than one year **as on** D D M M Y Y Y Y

If you are a **politically exposed person** or **related to a politically exposed person** please (✓) appropriate option.

☐ I am a politically exposed person. ☐ I am related to a politically exposed person.

Additional Details for Investments through Attorney

If your investment is being made by a Constituted Attorney on your behalf, please furnish the below details and enclose a **notarised copy** of the Power of Attorney for registering the same :

POA Holder's Name

PAN of POA Holder for 2nd Applicant

Aadhaar Card No. of POA Holder for 2nd Applicant

(POA Holder needs to comply with applicable KYC requirements)

THIRD APPLICANT'S PERSONAL INFORMATION (Please note that where the sole/first applicant is a minor, no joint holders are allowed) (Section 8)

3rd Applicant's Name

PAN of 3rd Applicant
(Mandatory to comply with applicable KYC requirements)

Aadhaar Card No. of 3rd Applicant

Country of Birth (✓)

☐ India
☐ U.S.A.
☐ Others
(please specify)

Country of Tax Residence (✓)

☐ India
☐ U.S.A.
☐ Others
(please specify)

Tax ID

Occupation (✓)

☐ Private Sector Service	☐ Business	☐ Student
☐ Public Sector Service	☐ Housewife	☐ Forex Dealer
☐ Government Service	☐ Retired	☐ Agriculturist
☐ Professional	☐ Others (please specify)	

Gross Annual Income (Rs.) (✓)

☐ <= 1 Lac ☐ 1 - 5 Lacs ☐ 5 - 10 Lacs ☐ 10 - 25 Lacs ☐ 25 Lacs to 1 Crore ☐ > 1 Crore

Net Worth of Sole/1st Applicant Rs. **as on** D D M M Y Y Y Y

If you are a **politically exposed person** or **related to a politically exposed person** please (✓) appropriate option.

☐ I am a politically exposed person. ☐ I am related to a politically exposed person.

Additional Details for Investments through Attorney

If your investment is being made by a Constituted Attorney on your behalf, please furnish the below details and enclose a **notarised copy** of the Power of Attorney for registering the same :

POA Holder's Name

PAN of POA Holder for 3rd Applicant

Aadhaar Card No. of POA Holder for 3rd Applicant

(POA Holder needs to comply with applicable KYC requirements)

Mode of Operation (✓)

☐ **Sole/First Holder only** ☐ **Either or Survivor** ☐ **Joint**

(If the mode of operation is not specified above, for folios opened with more than one applicant, the mode of operation would be taken as "JOINT")

NOMINATION DETAILS (Section 9)

➢ Mandatory for new folios/accounts. ➢ Every new nomination shall overwrite the existing nomination in the folio/account

I/We, (First Applicant) (Second Applicant)* and (Third Applicant)* do hereby nominate the following persons(s) more particularly described hereunder/and*/cancel the nomination made by me/us on the day of in respect of the Units under Folio No (*strike out which is not applicable)

	Name and Address of Nominees(s)	Date of Birth (In case nominee is a Minor)	Name & Address of Guardian (to be furnished in case the Nominee is a Minor)	Signnature of Guardian (In case nominee is a Minor)	Proposition(%) by which the units will be shared by each Nominee(Should aggregate to 100%)
Nominee 1		DD/MM/YYYY			
Nominee 2		DD/MM/YYYY			
Nominee 3		DD/MM/YYYY			

Signature of Nominee 1 Signature of Nominee 2 Signature of Nominee 3

If the investor/Unit holders, do not wish to nominate (✓) ☐ I/We do not intend to appoint a nominee in respect of our investments

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INVESTMENT & PAYMENT DETAILS (Section 10)

Investment Type (✓)

☐ **Lumpsum** ☐ **SIP (Also fill & attach SIP Investment Form)** ☐ **Multi-Scheme SIP (Please fill Multi-Scheme SIP investment section below)**

For Lumpsum & SIP Investment

Scheme Details

Scheme Name L&T _____ Plan _____

Options ☐ Growth^ ☐ Bonus* ☐ Dividend payout ☐ Dividend Reinvestment Dividend Frequency _____

Payment/Cheque Details (Please issue cheque favouring the Scheme Name)

Cheque/demand draft should conform to the CTS 2010standards

Investment Amount _____ DD Charges (If applicable) _____ Net Amount _____

Instrument No _____ Instrument Dated _____

Drawn on Bank _____ Branch _____ City _____

^ Default option if not selected * Available in select schemes only. Please refer KIM for details.

For Multi-Scheme SIP Investment (Also fill & attach Multi-SIP Investment form)

Scheme 1 **L&T** _____ _____

Options ☐ Growth^ ☐ Bonus* ☐ Dividend payout ☐ Dividend Reinvestment Dividend Frequency

Scheme 2 **L&T** _____ _____

Options ☐ Growth^ ☐ Bonus* ☐ Dividend payout ☐ Dividend Reinvestment Dividend Frequency

Scheme 3 **L&T** _____ _____

Options ☐ Growth^ ☐ Bonus* ☐ Dividend payout ☐ Dividend Reinvestment Dividend Frequency

Payment/Initial Cheque details (Please issue cheque favouring L&T MF Multi-Scheme SIP)

Cheque/demand draft should conform to the CTS 2010standards

Investment Amount _____ DD Charges (If applicable) _____ Net Amount _____

Instrument No _____ Instrument Dated _____

Drawn on Bank _____ Branch _____ City _____

^ Default option if not selected * Available in select schemes only

DEMAT ACCOUNT DETAILS (MANDATORY FOR CREDITING UNITS IN DEMAT ACCOUNT) (Section 11)

NSDL ☐ *OR* CDSL ☐ (Please ✓ any one)

Depository Participant Name _____

Depository Participant (DP) ID _____ Beneficiary Account Number _____

DECLARATION & SIGNATURES (Section 12)

I/We have read and understood the contents of the Scheme Information Document, Statement of Additional Information and Key Information Memorandum of the above Scheme of L&T Mutual Fund including the sections on "Who cannot invest" and "Important Note on Anti Money Laundering, Know-Your-Customer and Investor Protection". I/We hereby apply for allotment/purchase of Units in the Scheme and agree to abide by the terms and conditions applicable thereto. I/We hereby declare that I/We am/are authorised to make this investment and that the amount invested in the Scheme 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 issued by any regulatory authority in India. I/We hereby authorise L&T Mutual Fund, its Investment Manager and its agents to disclose details of my investment to my bank(s)/L&T Mutual Fund's bank(s) and/or Distributor/Broker/Investment Adviser. 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 have neither received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We declare that the information given in this application form is correct, complete and truly stated.

I/We, the undersigned, hereby acknowledge and confirm that:

The above transaction is "Execution Only" as explained vide SEBI Circular No. CIR/IMD/DF/13/2011 dated 22 August 2011. This investment is being made notwithstanding the advice of the appropriateness/inappropriateness of the same. On such transaction(s), I am not being charged any kind of transaction fee(s) by the AMFI registered distributor. On this transaction, the distributor would be compensated by the Mutual Fund House/Asset Management Company concerned in lines with the commission rate(s)disclosed by the distributor. Please note this is applicable for "Execution Only" transaction.

I/We accept and agree to abide by the terms and conditions (as mentioned on www.lntmf.com) with respect to my/our dealings with L&T Mutual Fund/its Investment Manager through various channels.

*APPLICABLE FOR NRIs: I/We confirm that I am/we are Non-Resident(s) of Indian Nationality/Origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our NRE/FCNR Account. I/We undertake that all additional purchases made under this folio will also be from funds received from abroad through approved banking channels or from funds in my/our NRE/FCNR Account.

Date: D D M M Y Y Y Y

Sole/FirstApplicant/Guardian

Second Applicant *(Not applicable if first applicant is minor)*

Third Applicant *(Not applicable if first applicant is minor)*