HDFC MUTUAL FUND

| | | PAN | MIN | | |
|---|---|---|---|---|---|
| Name of Unit holder | : | | | Folio Number | : |
| 1st Joint Unit holder | : | | | Date | : |
| 2nd Joint Unit holder | : | | | Scheme | : |
| Name of Nominee | : | | | Plan | : |
| Mode of Holding | : | | | Tax Status | : |

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

I/We have read and understood the terms and contents of the Offer Documents including addenda of the respective Scheme(s) of HDFC Mutual Fund. I/We hereby apply to the Trustee of HDFC Mutual Fund for allotment of Units of the Scheme(s) of HDFC Mutual Fund, as indicated and agree to abide by the terms, conditions, rules and regulations of the relevant Scheme(s). I/We have understood the details of the Scheme(s) and I/we have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment.

TRANSACTION-CUM-SERVICE REQUEST SLIP (for existing Unit holders only)

(Please ✓)
☐ Photocopy of PAN Document submitted herewith for verification
☐ already verified

In lieu of PAN ☐ Form No. 60 ☐ Form No. 61, as applicable to me/us, is enclosed.

**ADDITIONAL PURCHASE REQUEST # †**

Amount (in Rs.) _____
(in words) _____
Drawn on _____
Branch _____
Cheque/DD Number _____
dated _____
Bank Account Type (please ✓) :
☐ Savings ☐ Current ☐ NRE ☐ NRO

**SWITCH REQUEST (INTER AND INTRA SCHEME) † - Subject to Lock-in Period, if any**

Please Switch (please ✓) ☐ All Units ☐ No. of Units _____
Amount (in Rs.) _____
(in words) _____
From Scheme _____
Plan _____ Option _____
To Scheme _____
Plan _____ Option _____

**REDEMPTION REQUEST - Subject to Lock-in Period, if any**

Please redeem (please ✓) ☐ All Units ☐ No. of Units _____
from the above mentioned Folio and Scheme / Plan / Option.
☐ Amount (in Rs.) _____ (in words) _____

(If the balance in my/our account does not cover the amount/units of this request, I/we authorise you to close my/our account and send the entire such (lesser) balance to me/us).

**EMAIL / SMS SERVICES**

Please send my (please ✓) ☐ Account Statement ☐ Newsletters ☐ Annual Report
☐ Other Statutory Information by e-mail **instead of physical documents.**
My/our email ID is _____
My Mobile No. is _____

FOR SUBMISSION AT OFFICIAL POINTS OF ACCEPTANCE ONLY

Signature(s)

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

*(In case of joint-holding, all Unit holders must sign)*

† *PAN / Form No. 60 or Form No. 61 (as applicable) is mandatory for all applicants where investment is Rs.50,000 or more.*

*# Please contact your distributor / our Investor Service Centre for details on compliance with KYC requirements under Prevention of Money Laundering Act, 2002.*

**ARN-3852**

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

Sole / First Unitholder's Name _____

Folio No. | | | | | | | | / | | | Scheme : _____ Plan : _____

TRANSACTION-CUM-SERVICE REQUEST SLIP (for existing Unit holders only)

**CHANGE IN BANK DETAILS** (Attach a photocopy of the cheque)

Bank Name _____
Bank Branch _____
City _____ State _____
Pin _____
Bank Account No. _____
Bank Account Type (please ✓) :
☐ Savings ☐ Current ☐ NRE ☐ NRO

(a) ☐ The above change is permanent for the Folio / Scheme(s) / Plan(s) until further instructions
(b) ☐ The above change is only for the Redemption instruction mentioned overleaf

Important : If not ticked, Option (a) will be deemed as default instruction

**ELECTRONIC CLEARING SERVICE (ECS)**

You may choose to receive dividend, if declared, in your bank account through the Electronic Clearing Service.

☐ I / We authorise HDFC Mutual Fund to credit my / our dividend through ECS. Please (✔)

The 9 digit MICR Code number of my/our Bank & Branch is :

| | | | | | | | | | |

(The 9 digit code appears on your cheque next to the cheque number)

**PLEASE SEND ME/US LITERATURE ABOUT (PLEASE ✓)**

☐ HDFC Children's Gift Fund*‡
☐ Systematic Investment Plan
☐ Nomination
☐ AnyTimeCheques
☐ Tax Savings Scheme‡
☐ Systematic Transfer Plan
☐ Form 60 / 61 (in duplicate)
☐ Application Form for Mutual Fund Identification Number (MIN)

**CHANGE IN CORRESPONDENCE ADDRESS#**

_____
_____
_____
_____
City : _____ Pin : | | | | | |
State : _____
Tel. : (Office) ( ) _____
(Res.) ( ) _____
Facsimile : ( ) _____
Mobile : _____

FOR SUBMISSION AT OFFICIAL POINTS OF ACCEPTANCE ONLY

Signature(s)

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

*(In case of joint-holding, all Unit holders must sign)*

* An open-ended balanced scheme. ‡ Mutual Fund investments are subject to market risks. Please read the Offer Document carefully before investing.
# Please contact your distributor / our Investor Service Centre for details on compliance with KYC requirements under Prevention of Money Laundering Act, 2002.

H.Z. 1208