Enrolment Form for Multiple Scheme SIP/ Micro SIP [For Investments through ECS (Debit 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

		olment Form no.					
KEY PARTNER / AGENT INFORMAT					FOR OF	FICE USE ONI	LY (TIME STAMP)
ARN		ub-Agent's ARN/ ank Branch Code	Internal Code for Sub-Agent/	Employee Unique Identification Numbe (EUIN)	r		
0.40.40			Employee	025124			
34348 EUIN Declaration (only where EUIN	hav is left blank) (Defor Itam	No 2o\		023124			
I/We hereby confirm that the El employee/relationship manager/s employee/relationship manager/sa	JIN box has been intention ales person of the above	ıally left blank l distributor/sub b	by me/us as th broker or notwi	is transaction is hstanding the a	executed w dvice of in-a	ithout any int ppropriatenes	teraction or advice by th ss, if any, provided by th
Sign Here	Sign Here			Sign Here			
First/ Sole Applicant/ Guardian		Second Applicant			Third Applicant		
	efer Item No. 17 and please tick (🗸) any one)			Date: D D M M Y Y Y			
☐ I confirm that I am a First t	ime investor across Mutual Funds	i.		I confirm that I a	m an existing in	vestor in Mutual	Funds.
If the total commitment of investment to Charges, the same are deductible as ap issued against the balance of the install Upfront commission shall be paid direct the ARN Holder.	nent amounts invested. Ily by the investor to the ARN Hold	installment X no. count and payable to		ounts to Rs.10,000 such cases Transact	or more and yo ion Charge will	our Distributor h be recoverable	
I/We hereby confirm and declare as under: I/We have read, understood and agree to c and of ECS (Debit Clearing) / Direct Debit / S The ARN holder has disclosed to me/us al amongst which the Scheme is being recor Please (\checkmark) any one. In the absence of indi	omply with the terms and condition tanding Instruction facilities. I the commissions (in the form of nmended to me/us.	trail commission or					
■ NEW REGISTRATION	☐ CANCELLA	TION	(Refe	r Item No. 11)			
INVESTOR DETAILS							
Application No. (For new investor)/ Folio	No. (For existing Unitholder)						
						SIGNATU	RE (Refer Item No. 3(c))
Sole/1st applicant							
PAN# Or PEKRN#		KYC# (N [Please	Mandatory) tick (√)]	■ Proof Attac	ched		
Name of Guardian							
In case Applicant is minor)							
PAN# or PEKRN#		KYC# (N [Please	Лandatory) tick (√)]	☐ Proof Attac	ched		
Second Applicant							
PAN# or PEKRN#		KYC# (N [Please	Mandatory) tick (√)]	☐ Proof Attac	ched		
Third Applicant							
PAN#		KYC# (N	Mandatory) tick (√)]	☐ Proof Attac	ched		
PEKRN# # Please attach Proof. If PAN/PEKRN/KYC	is already validated please don't	attach any proof. Re	efer Item No. 15 and	116			
INVESTMENT DETAILS [Ple	· ·						
INVESTIMENT DETAILS [1 IC	Scheme 1			Scheme 2			Scheme 3
Name of the Cahama/ Dlan	ocheme i			OUTGING 2			ocheme o
Name of the Scheme/ Plan							
Option/ Sub-option							
Instalment Amount (Rs. In figures) Total of SIP/ Micro SIP Amount		(A)			(B)		(C)
(A) + (B) + (C) (Rs. In figures)							
	ACKNOWLE	DGEMENT SLI	P (To be filled i	n by the Unit hol	der)		
			MUTUAL FUND		<u></u>		
Date: He Application/ Folio No.	ead Office : HUL House, 2nd Floor				ngate, Mumbai ·	- 400 020.	ICC Ctamp & Cignatura
Received from Mr./Ms./M/s.				'Multiple SIP/ I	Aicro SIP' and	olication for	ISC Stamp & Signature
Scheme / Plan / Option		Sch	eme 1		оп чр	220 701	
Sche	me 2	3311		Scheme 3			
Total Instalment Amount (Rs.)			Please Note: All r	urchases are subjec	t to realisation o	of cheques	