

TRANSACTION REQUEST FOR

TIMESTAMP (FOR OFFICE USE ONLY)

	ransaction slip for each schails, please submit a separa	neme.		
olio Number :	Scheme / Plan (Switch-out sch for switch requ	neme		
irst Unit Holder: ————————————————————————————————————	·	·	Plan / Option is not indicated	
EY PARTNER / AGENT INFORMATION (Investors applying under Direct P				
ARN/RIA Code ARN/RIA Name	Sub Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Unique Identification Number (EUIN)
ARN - 98471	ARN -			E115901
ote: Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI re prortant: Please strike off any unused portion of this sheet.	gistered Distributor) based on the	e investors' assessment of vari	ous factors including the serv	ice rendered by the ARN Holder.
MANDATORY FOR OTM	k Mandate)	que	Funds Transfer nount (Rs.) :	
investors desiring to get allotment of units in dematerialized mode instead NSDL	ad of physical mode should	provide the details in tr	CDSL	w:
DP Name DP ID Beneficiary Account No. Please attach a copy of the DP statement / Client Master Form to enable us to verify to IMPORTANT: Names, mode of holding, PAN details, etc. of the Investor will be verification.		. The units will be credit	ed to the beneficiary (de	emat) account only after
successful verification with the depository records and realization of payr				
SWITCH REQUEST (Please tick any one only) All Free Units	No. of units :	Ar	mount (in Rs.) :	
To Scheme / Plan / Option :	of sult Dian / Ontion in torms of K	TM will apply if the sheise of DI	an / Ontion is not indicated	
_			an / Option is not indicated.	
REDEMPTION - Subject to Lock-in Period, if any (Please tick Redeem All Free Units No. of Units Amount		•	,	
Redeem An Free Units 140. 01 Units 150 Annual Control of Control o	IFSC Code :			r for electronic naument)
Note: If a redemption request is submitted alongwith a request for changing the bank account the request for changing the bank account details will not be processed. For investors who have registered for Multiple Bank Accounts facility* in the The redemption should be processed into the following bank account as per the payon Name of the Bank:	ne above folio: Dut mechanism indicated by me	e/us (This bank account has a Branch:	lready been registered in the	folio):
Account No.: Account Type: * Important Note: If the bank account mentioned above is different from those alread the "Default" bank account registered for the aforesaid folio. HDFC Mutual Fund or HD redemption proceeds into any of the bank accounts registered with us for the aforesaid you to send the entire such (lesser) balance to me/us.	dy registered in your folio OR if th DFC Asset Management Compai	ny Ltd. will not be liable for an	ot filled above, the redemption y loss arising to the unithold	n will be processed into er(s) due to the credit of request, I/we authorise
ECLARATION: I/We am/are not prohibited from accessing capital markets under a ompliance with applicable Indian and foreign laws. I/We hereby confirm and do I/We have read, understood and hereby agree to comply with the terms and conditions of the scheme the load structure.	eclare as under:-			
The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of) I/We hereby confirm that, the details provided in/with this form are true and correct and undertake to may be required and further undertake that I/We shall be liable, in the event the details and/or any pa) I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above details and/or and/or third party service providers, SEBI registered intermediaries for single updation/submission,	o inform the AMC/Fund/Registrars and rt thereof is found to be false/untrue/r or any part of it including the changes,	d Transfer Agent ('RTA') in writing a misleading. /updates that may be provided by r	about any change in the said deta me/us to the Fund, its Sponsor/s,	ils and to furnish additional details as Frustees, AMC, its employees, agents
India (FIU-IND) etc. without any intimation/advice to me/us. J I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediaries in case of any dispute regar The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the for which the Scheme is being recommended to me/us. I/WE HEREBY CONFIRM THAT I/WE HAVE NOT BEEN OFFERED/ COMMUNICATED ANY: I/DPIICADIE to Foreign Nationals Resident in India only: I/We will redeem my/	rding the eligibility, validity and authori m of trail commission or any other m	ization of my/our transactions. ode), payable to him/them for the	different competing Schemes of THE FUND/AMC/ITS DISTRI	various Mutual Funds from amongst
ncluding taxation) arising out of the failure to redeem on account of change in residential pplicable to NRIs/PIO/OCIs only: I/We confirm that my application is in complease (//) Yes No If Yes, (//)	al status. opliance with applicable Indian	and foreign laws.		ian, nasie ioi an consequences
reclaration for Purchase/Switch transaction where EUIN box is left blar We hereby confirm that the EUIN box has been intentionally left blank by hanager/sales person of the above distributor/sub broker or notwithstanding the distributor/sub broker. Sole/ First Unit holder/ Guardian/ POA	me/us as this transaction ig the advice of in-appropria		y the employee/relation	ship manager/sales person
Sole, This offictional, Sauratary 1671	▲ Second Unit holde			hird Unit holder
	the point of service of any KY	C Registration Agency	ed "KYC Change Request Fo	orm"
FATCA & CRS - SELF C	ERTIFICATION FOR	INDIVIDUALS		



KNOW YOUR CLIENT (KYC), FATCA & CRS - SELF CERTIFICATION FORM needs to be submitted)

Name: _

If yes, then please submit a Supplementary Know Your Client (KYC), FATCA and CRS – Self certification form attached along-with this transaction.

Declaration: I have read and understood the information requirements and the Terms and Conditions mentioned in the SUPPLEMENTARY KNOW YOUR CLIENT (KYC), FATCA & CRS - SELF CERTIFICATION FORM and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I hereby agree and confirm to inform HDFC Asset Management Company Limited/HDFC Mutual Fund/ Trustees for any modification to this information promptly. I further agree to abide by the provisions of the Scheme related documents inter alia provisions on 'Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standards (CRS) on Automatic Exchange of Information (AEOI). I 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 to the Mutual 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.