## UTI-SiP

## **UTI SMaRT Form**™



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भारतीय शादीय भारतान निगम NATIONAL PARMENTS CORPORATION OF NIDIA Utility Code								$\dashv$			$\overline{\mathscr{A}}$	Cre	ate	<u></u>	L 5_#	life		) <del>-C</del>	
Sponsor Bank Code				I/We	authorize				UTI MUTUAL FUND					Modify Cancel					
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understood & made by me/us. I am authorising the user entity / Corporat appropriately communicating the cancellation / amendment request to the	te to debit my o	account,	based on t	the inst	ructions as agr	eed and	signed b												
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Or Until Cancelled _	Signature	Primary	Account	holde	r	Sig	nature o	f Acc	ount	holder				Sign	nature	of Ac	count	holder	r
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This is to confirm that the declaration has been carefully read, understoo																			
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	A certified UTI /	MF regist	ered distrib	utors b	ased on the inv	restors' a	ssessmeni	t of vai	rious	actors in	cludina	the serv	rice re	ndered					Details nfirm that
Upfront commission shall be paid directly by the investor to the AMFI / NISM the EUIN box is intentionally left blank by me/us as this is an "execution-only" such distributor personnel and the distributor has not charged any advisory fees	transaction w for this transac	ithout an ction.	y interactio	n or ac	lvice by the dis	tributors	personne	l conce	erned	or not w	thstand	ling the	advic	e of in	-appro	priater	ess, if	iny, pro	ovided by
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Name of Sole / 1st Holder / Beneficiary Child												_							
Name of Guardian (in case of Minor)	<u>                                     </u>					71	<u> </u>			<u> </u>	<u> </u>								
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1st Unit Holder / Guardian 2nd Unit Holder 3rd Unit Holder 3rd Unit Holder

<b>Unit Holding Option</b>	n : 🔲	Der	nat M	lode		Phy	sica	l M	ode	)															
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