

TRANSACTION REQUEST FOR

PURCHASE / SWITCH / REDEMPTION TIMESTAMP (FOR OFFICE USE ONLY)

ame of Unit Holder :		Folio Number	:	
st Joint Unit Holder :		Scheme / Plan / Option* (Switch-out scheme	:	
nd Joint Unit Holder :		for switch request)		
vestors applying under Direct Plan must	mention "Direct" against the Scheme name. Defa	ault Plan / Option in terms of KIM will apply i	f the choice of Plan / Option is not indica	ated.
Y PARTNER / DISTRIBUTOR IN	FORMATION (Investors applying under D	irect Plan must mention "Direct" in the	ARN column below.)	
ARN	ARN Name	ARN Sub Distributor's ARN/Bank Branch Code	Internal Code for Sub-Distributor/ Employee	Employee Unique Identification Number (EUIN)
RN - SGSSL - 54854				E026651
We hereby confirm that the EUI nployee / relationship manage elationship manager / sales perso o	urchase/Switch transaction (only whe IN box has been intentionally left blan r/ sales person of the above distribut on of the distributor and the distributor	k by me/us as this is an "execution or or notwithstanding the advice has not charged any advisory fees o **TO BE SIGNED BY ALL UNIT HOLDERS	of in-appropriateness, if any, point this transaction. IF MODE OF HOLDING IS JOINT. ALTERATIONS	rovided by the employee
	•	Second Unit holder	•	▲ Third Unit holder
portant: Please strike off any unus	ed portion of this sheet.			
	(Please write your folio number and name		,	
Amount (in Rs.) :	Drawn on:BANK I	NAME Ch	eque/DD/Payment Instrument no	.:
	tick any one only) All Free Units			
vestors applying under Direct Plan must mer	ntion "Direct" against the Scheme name. Default Plan	/ Option in terms of KIM will apply if the choice	e of Plan / Option is not indicated.	
REDEMPTION - Subject t	o Lock-in Period, if any (Please tick	only one of the below options.)		
	of Units Amount		(in words)	
		IFSC Code :		
he redemption should be processed in	I for Multiple Bank Accounts facility ^a in th nto the following bank account as per the payo	out mechanism indicated by me/us (This b		
Account No. :	Account Type :		_ Bank City :	
the "Default" bank account registered	mentioned above is different from those alread for the aforesaid folio. HDFC Mutual Fund or HD ank accounts registered with us for the aforesai lance to me/us.	FC Asset Management Company Ltd. will r	not be liable for any loss arising to the u	initholder(s) due to the credit of
case the Additional Purchase amount is its will be issued against the balance an luding load structure(s) of the respecti neme(s) of HDFC Mutual Fund, as indic ectly or indirectly, in making this investn memes of various Mutual Funds from am licative yield by HDFC Mutual Fund / HDF eclaration for Foreign National Resi We confirm that I am / We are foreign In	ctly by the investor to the ARN Holder (AMFI regis Rs. 10,000 or more and your Distributor has opt nount invested. I/We have read and understood we Scheme(s) and Statement of Additional Infoated and agree to abide by the terms, condition lent. The ARN Holder has disclosed to me/us all iongst which the Scheme is being recommender CAsset Management Company Limited / its dist dent in India only: atlional(s) presently resident in India. I/We undid the fully liable for all consequences (including ta	ed in to receive Transaction Charges, Rs.10(the terms and contents of the Scheme Infe rmation of HDFC Mutual Fund.I/We hereb s, rules and regulations of the relevant Sch the commissions (in the form of trail commis d to me/us. I/We hereby confirm that I/we I ributor for this investment. I/We am/are aut ertake to redeem my/our entire investment	0/- will be deducted from the purchase a ormation Document(s) including adden y apply to the Trustee of HDFC Mutual leme(s). I/We have not received nor be ssion or any other mode), payable to hir have not been offered / communicated horised to undertake this transaction. / encash all other proceeds including di encash on account of change in residenti	amount and paid to the Distribute da, Key Information Memoranda Fund for allotment of Units of the en induced by any rebate or gift n/them for the different competir any indicative portfolio and/or ar vidend due to me / us before I/V al status.
Sole/ First Unit holder	/Guardian	▲ Second Unit holder		Third Unit holder
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IHDFC UTUAL FUND www.hdfcfund.com		WLEDGEMENT in by the Unit holder)	TIMESTAMP (FOR C	OFFICE USE ONLY)
io No. :	Sole/First Unit Holder:			
	CH-OUT SCHEME FOR SWITCH REQUI			
ADDITIONAL PURCHASE				
	Drawn on:BA	NK NAME C	heque/DD/Payment Instrument no	o. :
	tick any one only) \square All Free Units \square	No. of units :		
· · · ·	Free Units		in Rs.) :	

Our Contact Numbers: 1800 3010 6767 / 6000 6767 (Do not prefix with any STD Code) email: cliser@hdfcfund.com Website: www.hdfcfund.com