Union Mutual Fund

APPLICATION FORM FOR
SYSTEMATIC TRANSFER PLAN (STP) INTELLO
(For Existing Unit Holders only)

Please read the instructions overleaf carefully and complete the relevant sections legibly in black / dark coloured ink and in BLOCK LETTERS.
Please strike off unused section(s) to avoid unauthorised use

Broker Code/ ARN	Sub-Broker ARN/ Branch Code	Internal Sub-Broker Code	EUIN* (Refer Section 'C' of instructions)	RIA Code / PMRN**	Ref. No.

○ *I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

**By mentioning the RIA Code/ PMRN , I/we hereby give my/our consent to share/provide the transactions data feed / unit holdings in respect of my/our investments under Direct Plan in the Scheme(s) of Union Mutual Fund with the SEBI Registered Investment Adviser/ SEBI registered Portfolio Managers.

Signature	Signature	Signature
Sole/ First Applicant/ Guardian/ POA/ Authorised Signatory	Second Applicant / POA / Authorised Signatory	Third Applicant / POA / Authorised Signatory

○ **New Registration**   ○ **Cancellation**   Application No. [_____]   Date [D D M M Y Y Y Y]

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1. **EXISTING UNITHOLDER(S) INFORMATION***

Existing Folio No.	[_____]	*Mandatory	Permanent Account Number (PAN)	[_____]

Name of the Unit Holder [Please Tick (✓)]

○ Mr. ○ Ms. ○ M/s. [_____]

Email Id [_____]

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2. **STP INTELLO DETAILS** (Refer Section 'A' of instructions) [Please Tick (✓)]

	From Scheme	To Scheme
Name of the Scheme		
Plan	○ Direct Plan ○ Regular Plan/ Other than Direct Plan	○ Direct Plan ○ Regular Plan/ Other than Direct Plan
Option	○ Growth ○ Payout of IDCW ○ Transfer of IDCW ○ Reinvestment of IDCW	○ Growth ○ Payout of IDCW ○ Transfer of IDCW ○ Reinvestment of IDCW

Base Instalment Amount ₹ **(Minimum of ₹ 1,000)**		**Frequency**	Monthly

**The Multiplier shall be in the range of 0.40 times to 5.00 times. Therefore, the derived STP instalment amount can go upto 5.00 times of the base instalment amount mentioned here. Please refer example under point 5 in the Terms and Conditions Section overleaf.

From Date	[D D M M Y Y Y Y]	**STP Date***	[D D]	*In case the day/date chosen for STP falls on a Non-Business Day or on a date which is not available in a particular month, the STP will be processed on the immediate next Business Day. (Default Date: 8th)
No. of Instalments **(Minimum 6 Instalments)**		**To Date**	[D D M M Y Y Y Y]	Under STP Intello Default option will get registered till 31- Dec 2099

Note: IDCW stands for "Income Distribution cum Capital Withdrawal"

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3. **DECLARATION & SIGNATURES*** (Refer Section 'B' of instructions)

I/We have read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum, Instructions and addenda issued by Union Mutual Fund, I / We, hereby apply to the Trustee of Union Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme . I / We hereby agree that any transaction processed under the Systematic Transfer Plan (STP) Intello Facility will be binding upon me/us. I /We will not hold the AMC/the Trustee Company/ the Mutual Fund / the Sponsors liable for any transaction processed under the STP Intello Facility. I / We have neither received nor been induced by any rebate or gifts, directly or indirectly in making the investment in the relevant Scheme. I / We declare that the amount invested in the relevant Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority. The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the relevant Scheme is being recommended to me/us. I/ We hereby confirm that Union Mutual Fund/ Union Asset Management Company Private Limited and its empanelled broker(s) has not given any indicative portfolio and indicative yield, in any manner whatsoever. I/ We hereby confirm that at the time of investment, I / We have the express authority to invest in units of the Scheme and the AMC/ Trustee/ Mutual Fund/ Sponsors will not be responsible if such investment is ultravires the relevant constitution.

Signature	Signature	Signature
Sole / First Applicant / Guardian / POA / Authorised Signatory	Second Applicant / POA / Authorised Signatory	Third Applicant / POA / Authorised Signatory

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ACKNOWLEDGEMENT SLIP (To be filled in by the investor)

Ref. No. [_____]

Folio No. [_____]

Received from: Mr./ Ms./ M/s _____   Date: / /

Application for Systematic Transfer Plan Intello Facility

From Scheme/ Plan/ Option - _____   Amount ₹ _____

To Scheme - _____

Frequency	Monthly	Instalment ₹	
No. of Instalments			

Union Mutual Fund

Collection centre's stamp with date and time of receipt