EUIN Declaration/Intimation Form

L&T Mutual Fund

Please use separate form for each transaction

Name of Investor: First name | Middle name | Last name Folio/Application No:

1 (A) - To be filled in by the investor:

TRANSACTION TYPE: ☐ Purchase ☐ Switch ☐ SIP/STP

Scheme Name, Plan & Option

Transaction Date: D D M M Y Y Y Y Amount ₹

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.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant

OR 1 (B) - To be filled in by the Distributor:

BROKER CODE (ARN Code)	SUB-BROKER CODE	EMPLOYEE UNIQUE IDENTIFICATION NO. (EUIN)	SUB-BROKER CODE (As allotted by ARN holder)

Note:
SEBI has made it mandatory to obtain EUIN no. for every employee/relationship manager/sales person of the distributor for selling mutual fund products.

Signature with ARN
Name, Seal & Signature

call 1800 2000 400 or 1800 4190 200 **email** investor.line@lntmf.co.in **www.**lntmf.com

Our lines are open from 9.00 am to 6.00 pm, Monday to Friday

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

CL00630