## **Request for Duplicate TDS Certificate**



Please complete all sections in English. For legibility, please	use BLOCK LETTERS in black or dark ink			
&T Mutual Fund			D   D   M   M   Y   Y   Y   Y	
ıb: Request to issue duplicate TDS Certificate				
PERSONAL DETAILS				
ame of Sole/1st Unit Holder First Name	Middle Name	Last Name	Folio No.	
AN/PEKRN**   First Unit Holder	\$ecorld Unlit Holder		Third Unit Holder	
N*             Fir\$t Uhit Hold\( \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Third Unit Holder	
ate of Birth* (1st Unit Holder)	Date of Birth* (2nd Unit Holder)	Y   Y   Date of Birth* (3rd	Unit Holder)	
lobile No. +91-	E-mail ID			
YC is mandatory. Please enclose copies of KYC acknowledgement 14 digit KYC Identification Number (KIN) and Date of Birth is man				
ear Sir/Madam,				
/e wish to inform you that the TDS certificate for Rs.	of L&T Mutual Fund has not been received by m		ion on my/our redemption/switch fro	
nemeason)	_ of Lat Mutual Fullulias not been received by in	erus as it has been lostrillisi	ald/destroyed. (Flease • tile applicat	
herefore request you to issue me a duplicate TDS certificat	e, and in lieu thereof and in consideration of doing	so, I/We hereby agree to h	old the AMC, L&T Mutual Fund Truste	
mited, their successors, assigns, servants, officer, director	rs and agents harmless and indemnified from an	d against all consequences	s, liability, losses, damages, charges of	
xpenses which may arise in connection with L&T Mutual Fu	and issuing me/us a duplicate TDS Certificate for t	he above tax deduction.		
ours Sincerely,				
X Name of the First Unit holder	X Name of the Second Unit Holder	X Nar	X Name of the Third Unit Holder	
X Signature of First Unit Holder	X Signature of Second Unit Holder	X Sign	X Signature of Third Unit Holder	
(To	be signed by all holders if the mode of operation	is "Joint")		
CKNOWLEDGEMENT SLIP (To be filled in by the Application	ant)		L&T Financial Service  Mutual Full	
eceived from	Folio no/ Application no:		For Office Use Onl	
obile No:	PAN:			
lequest submitted			Acknowledgement Stamp & Date	

Subject to further verification and furnishing of mandatory information/ documents. Please retain this slip until processed

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

Please note our lines are open from 9 am to 6 pm, Monday to Friday and 9 am to 1 pm on Saturday.

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

CL01014