



**To be submitted along with the Application Form:** 1. Your **FATCA Details** (Foreign Account Tax Compliance Act) & **KYC Additional Details** (if not already submitted), and 2. **Ultimate Beneficial Owner(s) (UBO)** information (for non individuals only). Please quote the Central KYC (CKYC) number in the boxes provided above or submit your filled-in **CKYC Form** in case of new investor and additional CKYC form in case of existing investors irrespective of the investment amount. The forms are available on our website.

|                          |                         |                            |   |   |
|--------------------------|-------------------------|----------------------------|---|---|
| Distributor's ARN & Name | Sub-broker's ARN (Code) | Sub-broker Code (internal) | <b>EUIN*</b><br>(Employee Unique Identification Number) | Registered Investment Adviser (RIA)<br>Code |
|--------------------------|-------------------------|----------------------------|---|---|

\* **Declaration for "Execution only" transaction (only where EUIN box is left blank)**  I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of inappropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

|                                   |                     |                    |
|-----------------------------------|---------------------|--------------------|
| First/Sole Applicant/<br>Guardian | Second<br>Applicant | Third<br>Applicant |
|-----------------------------------|---------------------|--------------------|

Folio No.

Name of First/Sole Applicant (Please use capital Letters)

Name of Guardian in case First / Sole Applicant is a Minor (capital Letters)

Permanent Account Number (PAN)  Central KYC Number  CKYC Proof attached (Mandatory)

First/Sole Applicant/Guardian  **Mandatory**

Second Applicant

Third Applicant

**Switch**

|   |   |
|---|---|
| From Scheme: .....  | To: <b>Sundaram Income Plus</b>                       |
| <b>Plans:</b> <input type="checkbox"/> Regular <input type="checkbox"/> Direct  | <b>Plans:</b> <input type="checkbox"/> Regular-Growth |
| <b>Options:</b> <input type="checkbox"/> Growth <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Re-investment <input type="checkbox"/> Dividend Sweep# | <input type="checkbox"/> Direct-Growth                |

|                                       |  |                            |
|---------------------------------------|--|----------------------------|
| Amount (figures) <input type="text"/> | Amount (in words) <input type="text"/> | Units <input type="text"/> |
|---------------------------------------|--|----------------------------|

**Switch into NFO - Sundaram Long Term Tax Advantage Fund Series VI**  
Switches will happen on the Closing day of NFO i.e 15/03/2019

|  |   |
|--|---|
| From: <b>Sundaram Income Plus</b>  | To: <b>Sundaram Long Term Tax Advantage Fund Series VI</b>  |
| <b>Plans:</b> <input type="checkbox"/> Regular-Growth <input type="checkbox"/> Direct-Growth | <b>Plans:</b> <input type="checkbox"/> Regular <input type="checkbox"/> Direct  |
|  | <b>Options:</b> <input type="checkbox"/> Growth <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Sweep# |

#Dividend Sweep Option (Target Fund) .....  Regular Growth  Direct Growth

I hereby request you to switch all units allotted in Sundaram Income Plus to the extent of amount invested through this switch transaction slip to Sundaram Long Term Tax Advantage Fund Series VI subject to the terms and conditions of the Target Scheme. Since the allotment has to be done in multiples of ₹500, any residual amount which is lesser than Rs.500/- would remain in the source scheme (Sundaram Income Plus) at the time of the switch.

**Turn overleaf for Declaration & Signature (Mandatory) → → →**

|   |  |   |                 |
|---|--|---|-----------------|
| <b>Acknowledgement for Combo Switch</b>   | Folio No <input type="text"/>  | <b>Request Date:</b> <input type="text"/> | Time Stamp/Seal |
| From Scheme: .....  | <b>To: Sundaram Income Plus</b>  |   |                 |
| <b>Plans:</b> <input type="checkbox"/> Regular <input type="checkbox"/> Direct  | <b>Plans:</b> <input type="checkbox"/> Regular-Growth <input type="checkbox"/> Direct-Growth |   |                 |
| <b>Options:</b> <input type="checkbox"/> Growth <input type="checkbox"/> Dividend Payout <input type="checkbox"/> Dividend Re-investment <input type="checkbox"/> Dividend Sweep# |  |   |                 |
| Amount (figures) <input type="text"/>   | Amount (in words) <input type="text"/>   | Units <input type="text"/>                |                 |

Contact No.: 1860 425 7237 (India) **E-mail:** customerservices@sundarammutual.com  
+91 40 2345 2215 (NRI) **SMS SFUND to 56767** (NRI): nriservices@sundarammutual.com

## Combo Switch Transaction Slip

**Declaration:** I/We have read and understood the terms and conditions applicable to the switch on maturity facility and am/are fully aware of the risk associated with such event. I/We have read and understood the Scheme Information Document (SID)/ Statement of Additional Information (SAI) and Key Information Memorandum (KIM) of the Target Scheme and have understood the investment objectives, investment pattern and risk factors applicable to the Target Scheme. I/We have not received nor been induced by any rebate or gifts, directly or indirectly, in opting the switch on maturity facility.

I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form / transaction slip • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN exempt category of investors). 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 Scheme is being recommended to me/us.

**Applicable to NRIs only:** Please   I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account on a  Repatriation Basis  Non-Repatriation Basis.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

### Signature

|                                   |                  |                 |
|-----------------------------------|------------------|-----------------|
| First / Sole Applicant / Guardian | Second Applicant | Third Applicant |
|-----------------------------------|------------------|-----------------|

|              |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|
| Request Date | D | D | M | M | Y | Y | Y | Y |
|--------------|---|---|---|---|---|---|---|---|

