

Application Form STP / SWP



Transaction Charges for Applications through Distributors only (Please section Instruction VII)

<input type="checkbox"/> I confirm that I am First time investor across Mutual Funds. (Rs.150 deductible as Transaction Charge and payable to the Distributor)	<input type="checkbox"/> I confirm that I am an existing investor across Mutual Funds. (Rs. 100 deductible as Transaction Charge and payable to the Distributor)
In case the subscription amount is ₹ 10,000/- or more and your Distributor has opted to receive Transaction Charges, the same are deductible as applicable from the purchase / Subscription amount and payable to the distributor. Units will issued against the balance amount invested.	

Please read the instructions before filling the Application Form

DISTRIBUTOR INFORMATION (Only empanelled Distributors / Brokers will be permitted to distribute Units of Baroda Mutual Fund)

Distributor / Broker ARN	ARN-4464	Sub-Broker Code		Employee Code	E032737
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Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investor's assessment of various factors including the service rendered by the distributor.

(Please note that the applicant details and mode of holding are as per the existing Folio Number)

Common Account No.

Name of Sole / First Unit Holder

SYSTEMATIC TRANSFER PLAN (STP)

No. of units Dividend Capital Appreciation Fixed Amount (Please one ✓ option only).

Folio No. _____ PAN _____ Enclosed (please ✓) PAN copy KYC

Mobile No. _____ Email _____

Amount ₹ (in figures) _____ ₹ (in words) _____ **OR**

Units _____ **OR Dividend** _____

STP Frequency: Monthly Quarterly STP Period: Start From End On STP Date: 1st 10th 15th 25th

FROM Scheme _____ Plan _____ Option _____

TO Scheme _____ Plan _____ Option _____

SYSTEMATIC WITHDRAWAL PLAN (SWP)

Fixed Amount Capital Appreciation (Please ✓ one option only).

Folio No. _____ PAN _____ Enclosed (please ✓) PAN copy KYC

Mobile No. _____ Email _____

Amount ₹ (in figures) _____ ₹ (in words) _____ **OR**

Units _____ **OR Dividend** _____

SWP Frequency: Monthly Quarterly SWP Period: Start From End On STP Date: 1st 10th 15th 25th

FROM Scheme _____ Plan _____ Option _____

DECLARATION AND SIGNATURES

I/We have read and understood the contents of the offer document/s to the Scheme/s including the sections on "Prevention of Money Laundering and Know Your Customers". I/We hereby apply to the Trustee of the Baroda Mutual Fund for units of the Scheme as indicated above ["the Scheme"] and agree to abide by the terms and conditions, of the Scheme/s and such other schemes into which my/our investment may be moved pursuant to any instalments received from me/us to sweep/switch the units as applicable to my/our investment including any further transaction under the Scheme. I/We have not received nor have been induced by any rebate or gifts, directly or indirectly, in making this investment. I/We further declare that the amount invested by me/us in the Scheme/s is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules and regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time.

I/We further confirm that I/We have the express authority from the relevant constitution to invest in the units of the Scheme and the Baroda Mutual Fund, its Trustee and the Mutual Fund would not be responsible if the investment is ultra vires the relevant constitution.

I/We authorize AMC to reject the application, reverse the units, credited, restrain me/us from making any further investment in any of the Scheme/s of Baroda Mutual Fund, recover / debit my / our folio(s) with the penal interest and take any appropriate action against me / us in case the cheque(s) / payment instrument is / are returned unpaid by my / our bank for any reason whatsoever.

I/We hereby further agree that AMC can directly credit all the dividend pay outs and redemption amount to my / our bank details given herein, where AMC has such arrangement with my / our Bank.

* STP / SWP - Payment should reach to ISC before 7 working days from the start of first STP / SWP.

* Loads applicable as per scheme.

* For SWP - in case the payout date is not mentioned, the payroll will continue till the balance units reduced to zero.

For SIP - in case STP Period or end date is not given, STP units / amount will get switched out till it meets the minimum investment amount in switched in scheme.

* In case the from date is not mentioned, it is treated as 1st day of the following month.

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 :

I/We Confirm that I am / we are Non - Residents of Indian Nationality / Origin and I / We hereby confirm that the funds for subscription have been remitted from abroad through approved banking channels or from funds in my / our Non-Residents External / Ordinary Account / FCNR Account.

Signature / Thumb Impression of Sole / 1st Applicant / POA Holder	Signature / Thumb Impression of 2nd Applicant / POA Holder	Signature / Thumb Impression of 3rd Applicant / POA Holder
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ACKNOWLEDGMENT SLIP (To be filled in by the Applicant)

Investor Name _____

Folio No. _____ Dated:

STP / SWP

Scheme / Plan / Option / Sub-Option _____ To (STP Only) _____

Amount ₹ _____

Signature, Stamp & Date