SPECIAL PRODUCT FORM



Please read instructions before filling this form (all points marked * are mandatory) Sponsor: Edelweiss Financial Services Limited. Trustee Company: Edelweiss Trusteeship Company Limited. Investment Manager: Edelweiss Asset Management Limited. Edelweiss House, Off. C.S.T Road, Kalina, Mumbai - 400098 STP I SWP SIP-PDC **DISTRIBUTOR INFORMATION** FOR OFFICE USE ONLY Sub-Broker Code | Employee Unique Indentification Number (EUIN)* | Sub-Broker Code | E - Code Name & Distributor Code Registrar/Bank Serial No. Date & Time of Receipt *Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor "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 in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker". Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. For Direct investments, please mention 'Direct' in the column 'Name & Distributor Code' All sections to be filled in English and in BLOCK LETTERS. 2 NEW / EXISTING UNIT HOLDER INFORMATION Folio / Application No. Name of the Sole/1st Applicant TRANSACTION CHARGES (Please ✓) (Default option Existing Investor) (Refer Instruction No. XIV) ☐ I am a First Time Investor in Mutual Funds I am an Existing Investor in Mutual Funds In case the subscription amount is ₹10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹150 (for first time mutual fund investor) or ₹100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested. SCHEME DETAILS Scheme/Plan/Option/Facility Edelweiss-(Default Plan/Option/Facility will be applied in case of no information, ambiguity or discrepancy) **Schemes offered by Edelweiss Mutual Fund: Equity Schemes Debt Schemes** Edelweiss Absolute Return Fund **Edelweiss Liquid Fund** Edelweiss Diversified Growth Equity Top 100 (E.D.G.E. Top 100) Fund Edelweiss Ultra Short Term Bond Fund **Edelweiss ELSS Fund Edelweiss Debt and Corporate Opportunities Fund** Edelweiss Select Midcan Fund Edelweiss Short Term Income Fund Edelweiss Equity Enhancer Fund **Edelweiss Gilt Fund** Edelweiss Arbitrage Fund FREQUENCY DETAILS (Please ✓) Monthly (STP/SWP/SIP-PDC) Daily (STP) Weekly (STP) Quarterly (SWP) 7th, 14th, 21st, 28th 7th OR 14th OR All Business Days of any month 21st OR 28th 6 SYSTEMATIC INVESTMENT PLAN (SIP) DETAILS SIP Period: From Date To Date Amount Per Installment: Amount (in words) SIP POST DATED CHEQUE DETAILS Cheque No Cheque Date Amount (Rs.) Cheque No. Cheque Date Amount (Rs.) 8. 2. 9. 3. 4. 10 5. 11 6 12 Cheque drawn on Bank Total No. of Cheques: City Branch Total Amount Rs. 6 SYSTEMATIC TRANSFER PLAN (STP) DETAILS (Not applicable for ELSS Scheme) To Scheme Option Daily To Date Monthly STP Period: From Date Weekly Amount Per Installment: Amount (in words) SYSTEMATIC WITHDRAWAL PLAN (SWP) DETAILS (Not applicable for ELSS Scheme) (Only Monthly and Quarterly options are available) Amount per Withdrawal: Amount (in words) SWP Period: From Date Quarterly To Date **DECLARATION AND SIGNATURES** Having read and understood the contents of Statement of Additional Information (SAI), Scheme Information Document (SID) of the Scheme(s), I/We hereby apply to the Trustees of Edelweiss Mutual Fund for units of Scheme(s) of Edelweiss Mutual Fund as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme(s). I/We hereby declare that the particulars given herein are correct and complete. I/We confirm that I/we have not received and will not receive any commission or brokerage or any other incentive in any form, directly or indirectly, for subscribing to units issued under any of the Scheme(s). I/We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of income Tax Act, 1961, Prevention of Money Laundering Act, 2002, Prevention of Corruption Act, 1988 or any other applicable laws enacted by the Government of India from time to time. For Micro SIP investors- I/we hereby declare that the I/we do not have any existing Micro SIP's which together with current application will result in aggregate investments exceeding 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. For NRIs/Fils only: I/We confirm that I am/we are Non Residents of Indian Nationality/origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our Non-resident External Account/FCNR account/NRO/NRSR Account. (Please) (Including amount of transactions made in future) Repatriation Non Repatriation