S	SWING
S	SYSTEMATIC
T	TRANSFER
P	PLAN

HDFC SWING SYSTEMATIC TRANSFER PLAN
Enrolment Form

(Please refer Product labeling available on cover page of the KIM and terms and conditions overleaf)

HDFC MUTUAL FUND
www.hdfcfund.com

Enrolment Form No.

KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.)

ARN	ARN Name	Sub-Agent's ARN/ Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Unique Identification Number (EUIN)
ARN-3852				E029058

Upfront commission shall be paid directly by the investor to the ARN Holder (AMFI registered Distributor) based on the investors' assessment of various factors including the service rendered by the ARN Holder.

FOR OFFICE USE ONLY (TIME STAMP)

Date: D D M M Y Y Y Y

EUIN Declaration (only where EUIN box is left blank) (Refer item no. 2)

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.

Sign Here	Sign Here	Sign Here
First/Sole Unit holder / Guardian	Second Unit holder	Third Unit holder

I / We hereby declare and confirm that I/we have read and agree to abide by the terms and conditions of the scheme related documents and the terms & conditions mentioned overleaf of Swing Systematic Transfer Plan and of the relevant Scheme(s) and hereby apply for enrolment under the Systematic Withdrawal Advantage Plan of the following Scheme(s)/Plan(s)/Options(s). **The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.**

Please (✓) any one ☐ NEW ENROLMENT ☐ CANCELLATION

			KYC is Mandatory # Please (✓)
Name of the First / Sole Applicant		PAN # or PEKRN #	Proof Attached ☐
Name of the Guardian (in case of First / Sole Applicant is a minor)		PAN # or PEKRN #	Proof Attached ☐
Name of the Second Applicant		PAN # or PEKRN #	Proof Attached ☐
Name of the Third Applicant		PAN # or PEKRN #	Proof Attached ☐

Please attach Proof. If PAN/PEKRN/KYC is already validated, please don't attach any proof. Refer item no. 21 and 22.

1. **Folio No. of 'Transferor' Scheme** (for existing Unit holder) / **Application No.** (for new investor)					
2. **Name of 'Transferor' Scheme/Plan/Option**	(Investors applying under Direct Plan must mention "Direct" against the Scheme name).				
3. **Name of 'Transferee' Scheme/Plan**	(Investors applying under Direct Plan must mention "Direct" against the Scheme name). (ONLY GROWTH OPTION)				
4. **Frequency of Swing STP** @ (please ✓ any one Plan/Frequency only)	○ Weekly ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday*		○ Monthly*	○ Quarterly	
5. **No. of Installments (for Weekly interval only)** [please refer item no. 14(b)]	_____				
6. **Date of Transfer for (for Monthly & Quarterly Interval only)** (please ✓ any one only)	☐ 1st	☐ 5th	☐ 10th*	☐ 15th	☐ 20th ☐ 25th
7. **Enrolment Period** [please refer item no. 14(b) & (g)]	From : M M Y Y Y Y	To : M M Y Y Y Y			
	(Not applicable for Weekly Interval) There should be a minimum time gap of 10 days and maximum time gap of 90 days between the date of submission of SWING STP enrolment form and the commencement of the SWING STP facility.				
8. **First Installment Amount** [please refer item no. 14(a)]	Rs.		From the 2nd installment onwards, the transfer amount shall be determined by formula in item no. 9 overleaf.		

* Default Frequency / Date / Day @ Or immediate next Business Day, if the indicated day is a non Business Day.

SIGNATURE (S)

First/Sole Unit holder / Guardian	Second Unit holder	Third Unit holder

Please note: Signature(s) should be as it appears on the Application Form and in the same order. In case the mode of holding is joint, all Unit holders are required to sign.

ACKNOWLEDGEMENT SLIP (To be filled in by the Unit holder)

ARN-3852 E029058

Date :

HDFC MUTUAL FUND
Head Office : HUL House, 2nd Floor, H.T. Parekh Marg,
165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.

Enrolment Form No.

ISC Stamp & Signature

Received from Mr./Ms./M/s _____ 'Swing STP' application for transfer of Units;

From Scheme / Plan / Option _____

To Scheme / Plan / Option _____