Please Read All Instructions as given in KIM, to help you complete the Application Form Correctly.

Application Form: Systematic Transfer Plan (STP), Systematic Withdrawal Plan (SWP)

Investor must read the instructions section before completing this form. First time investors need to submit this form along with the main application form



		Sub Broker / Agent ARN Code	Sub Agent Code	EUIN*		Date Time Stamp Reference No.	
ARN-105519							
ransacti	ion for "Execution Only" Transaction (where EU on is executed without any interaction or advic e/relationship manager/sales person of the dist	e by the employee/relationship man					
	Signature of 1st Applicant / Guardian Authorised Signatory /PoA/Karta	/ Si	Signature of 2nd Applicant / Guardian / Authorised Signatory /PoA			Signature of 3rd Applicant / Guardian / Authorised Signatory /PoA	
1. E	XISTING UNIT HOLDER INFORMATI	ON (The details in our record			this application.)		
olio N			CKYC Identification No.	(KIN)			
	of 1st Unit Holder:						
	AAR No.:	\/F==:==	for the next next)		Aadha	ar Copy (Please ✓) ○ Enclosed	
	YSTEMATIC TRANSFER PLAN (STP Scheme) (FOR Instructions please re) Regular Plan	_	v. Payout . Reinvestment	○ Div frequency*	
o Sc	heme		Regular Plan Growth (Default) Div. Pa	yout investment (Default	Div frequency*	
Divide	and frequency is applicable only for Mira	ae Asset Cash Management F	und & Mirae Asset Savings Fur	nd.		•	
_	y (Monday to Friday)	w options (Transactions will Weekly (Every Wednesday)		the date of submission) O Mont	hly Quarterly	
or Dai	ly, Weekly, Fortnightly, Monthly & Quarter	dy option minimum 5 transfers o	f ₹ 1000 each.				
lease	e (✓) STP date:	○ 1 st	10 th (Default)	○ 15 th	○ 21°	○ 28 th	
	nt per transfer (₹ In Figures):			Start Date from:	DMMYYYY	To: DDMMYYYY	
3. Scher	YSTEMATIC WITHDRAWAL PLAN (S	SWP) (For instructions pleas) Regular Plan		/. Payout . Reinvestment	Oiv frequency*	
Divide	nd frequency is applicable only for Mira	ae Asset Cash Management F	und & Mirae Asset Savings Fur	nd.			
Please (✓) SWP Frequency from the below options (Transactions will be triggered after 5 days from the date of submission) ○ Monthly ○ Quarterly							
Idease (✓) OF ixed (Min. 12 Months / 4 Quarters of ₹ 1000 and above) Or (Min. 12 Months / 4 Quarters of ₹ 1000 and above) Appreciation withdrawal (1st of each Month / Quarter) (Min. 12 Months / 4 Quarters of ₹ 1000 and above) Amount Per (Min. 12 Months / 4 Quarters of ₹ 1000 and above)							
	rawal Date: Please (√)	○ 10 th (Default) ○ 15 th		P Start Date from:	DMMYYYY	To: DDMMYYYY	
o The Trie schen aws or a ith this a ransfer A TA and only other dicative valing training training training training and Na Applicer the sa the AMC, and usage accluding	rustees, Mirae Asset Mutual Fund (The Fund) - (A) in.e. (B) I/We hereby declare that the amount invested in yolden properties of the prope	Having read and understood the contents of the scheme(s) is through legitimate sour findia from time to time. (C) Signature of to to furnish additional information sought to the the AMC/Fund shall have the right to she eligibility, validity and authorization of my Schemes of various Mutual Funds from (JAMC/fits distributor for this investment all be bound by the terms & conditions of dis for subscription and for all additional confirm that I/We satisfy the Residency tequations, (J) I / We confirm that I am / We mm y / our investments in the Scheme(sadhaar number(s) in accordance with the companies of SEBI registered mutual fund a	of the SID of the Scheme(s), IWe hereby ag ces only and does not involve and is not des the nominee acknowledging receipts of my/c by Mirae Asset Global investments (India) I are my information and other details with the y/our transactions. (E) I/We further declare the mamongst which the Scheme is being in t. IWe have not received nor have been in the PN agreement available on the AMC we purchases have been remitted from abroas st as prescribed under FEMA provisions. IW e are not United States person(s) under the (s), (K) Aadhaar: I/We hereby provide my/or Aadhaar Act, 2016 (and regulations made the ind their Registrar and Transfer Agent (RTA)	ply for units of the scheme(s) and gined for the purpose of the contruct credit will constitute full dischartimated (AMC). Fund and undertail regulatory and government authrate "The ARN holder has disclosommended to mefus. (F) IMMe duced by any rebate or gifts, direction of the commended of mefus. (F) IMMe duced by any rebate or gifts, direction of the commended of the commende	agree to abide by the terms avention of any provisions of ge of liabilities of Mirae Asse ke to update the information or the same of the committee of the committee of the committee of the third or indirectly in making the policiable for NRIs only: "Wels or from funds in mylour "Person Resident in India" elent(s) of Canada. In case of hear Act, 2016 and regulation y provide mylour consent for me in mylour folios.	conditions, rules and regulations governing the Income Tax Act, Anti Money Laundering It Mutual Fund. (D) The information given in details with the AMC / FundRegistrars and IfWe will indemnify the Fund, AMC, Trustee sisions (in the form of trail commission or aven not been offered communicated any is investment. (G) Applicable to Investority confirm that I am/We are Non-Resident or Non-Resident to Non-Resident to Non-Resident to the Scheme as of change to this status, I / We shall notify is the shange to this status, I / We shall notify is sharing disclosing of my Aadhaar number (s	
	Signature of 1st Applicant / Guardian		ignature of 2nd Applicant / Guardia			Applicant / Guardian /	
	Authorised Signatory /PoA/Karta	, SI	Authorised Signatory /PoA	,	Authorised Signatory /PoA		
	ARN-105519						
I SLIP	Received Application from	Folio No.:			as per details below:		
EMEN	Scheme Name and P	lan	Details		Date & Stamp of	Collection Centre / ISC	
OWLEDGEMENT SLIP		○ SWP	Amount (₹)				
OW		OSTP	Amount (₹)				