EUIN DECLARATION FORM

_		Date:	
То			
	Mutual Fund		
Dear Sir,			
,			
(Investor needs to	tick on any one of the two options as	applicable for the transaction)	
transaction withou distributor or not	nfirm that the EUIN box has been in the any interaction or advice by the withstanding the advice of in-apposon of the distributor and the distributor.	e employee/relationship managropriateness, if any, provided	ger/sales person of the above by the employee/relationship
☐ Please update the EUIN for transaction reported as per the following details. EUIN to be updated:			
·		•	,
Folio No:, Transaction Date:/ (DD/MM/YYYY) Transaction Type: □ Purchase □ Switch □ SIP □ STP □ Others (Please specify)			
Scheme:			
(For Switch transaction please mention Switch-in Scheme name)			
Plan: Option:			
Units / Amount: (As applicable), Cheque / DD No :			
Regards			
	Sole/First Applicant	Second Applicant	Third Applicant
Investor Name			
Signature			

- This declaration must be submitted within 90 days from the date of transaction.
 Declaration must be signed by all applicants in case of mode holding is joint.
 A separate declaration must be furnished for each transaction.