

Request for Consolidation of Folios

Please complete all sections in English. For legibility, please use BLOCK LETTERS in black or dark ink

L&T Mutual Fund

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Sub: Consolidation of Folios

PERSONAL DETAILS

Name of Sole/1st Unit Holder First Name Middle Name Last Name Folio No.

PAN/PEKRN** First Unit Holder Second Unit Holder Third Unit Holder

KIN* First Unit Holder Second Unit Holder Third Unit Holder

Date of Birth* (1st Unit Holder) Date of Birth* (2nd Unit Holder) Date of Birth* (3rd Unit Holder)

Mobile No. +91- E-mail ID

KYC is mandatory. Please enclose copies of KYC acknowledgement letters for all applicants. **PEKRN required for Micro investments upto Rs. 50,000 in a year.
^ 14 digit KYC Identification Number (KIN) and Date of Birth is mandatory for Individual(s) who has registered under Central KYC Records Registry (CKYCR).

Dear Sir/Madam,

I/We wish to consolidate my/our following investments into folio no. _____ (target folio)

SR. No.	Folios to be Merged	Name of 1 st Unit Holder	Name of 2 nd Unit Holder	Name of 3 rd Unit Holder

I/We understand that consolidation of folios is permitted only if;

- All unit holders in the source folios are also unit holders in the target folio in the same sequence
- The mode of operation across source folio & target folio are the same
- The bank mandate and postal address across source folio & the target folios are the same
- The nomination details across source folio & target folio are the same
- No lien/pledge is marked in respect of any investment in any of the source/target folio

I/We understand that as a result of consolidation, my/our contact details in target folio would be retained while these details featuring in all other source folios would be discarded.

Yours Sincerely,

X Name of the First Unit Holder

X Name of the Second Unit Holder

X Name of the Third Unit Holder

X Signature of First Unit Holder

X Signature of Second Unit Holder

X Signature of Third Unit Holder

(To be signed by all holders if the mode of operation is "Joint")

ACKNOWLEDGEMENT SLIP (To be filled in by the Applicant)

Received from _____ Folio no/ Application no: _____

Mobile No: _____ PAN: _____

Request submitted _____

Subject to further verification and furnishing of mandatory information/ documents. Please retain this slip until processed

For Office Use Only

Acknowledgement
Stamp & Date

call 1800 4190 200 or 1800 2000 400

email investor.line@Intmf.co.in

www.Intmf.com

Please note our lines are open from 9 am to 6 pm, Monday to Friday and 9 am to 1 pm on Saturday.

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.

CL01013