TATA MUTUAL FUND

Mulla House, Ground Floor, M.G. Road, Fort, Mumbai - 400 001

SYSTEMATIC TRANSFER PLAN FORM (Including Flex STP)

1. ADVISOR DETAILS

Refer Instruction 2.

ARN / RIA ^ Code	Sub-Broker ARN Code	Sub-Broker / Bank Branch Code	EUIN Code
ARN-95070			E-101834

Internal Code

OR ☐ Declaration for "execution-only" transaction – I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/ relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction. ^ By mentioning RIA code, I / we authorize you to share with the SEBI Registered Investment Adviser (RIA) the details of my / our transactions in the schemes(s) of Tata Mutual Fund.

Sole / 1st Applicant Signature / Thumb Impression	2nd Applicant Signature / Thumb Impression	3rd Applicant Signature / Thumb Impression

2. INVESTOR DETAILS

Folio No.

1st Holder Name			PAN
C-KYC	Date of Birth (D D / M M / Y Y Y Y)	Mobile No.	Mobile belongs to ☐ Self ☐ Parent ☐ Spouse ☐ Child
2nd Holder Name			PAN
C-KYC	Date of Birth (D D / M M / Y Y Y Y)	Mobile No.	Mobile belongs to ☐ Self ☐ Parent ☐ Spouse ☐ Child
3rd Holder Name			PAN
C-KYC	Date of Birth (D D / M M / Y Y Y Y)	Mobile No.	Mobile belongs to ☐ Self ☐ Parent ☐ Spouse ☐ Child

3. PURPOSE OF FORM (tick any one)

☐ Fresh Registration ☐ Cancellation

4. SYSTEMATIC TRANSFER DETAILS

Flex STP *Refer Instruction 5*	☐ Yes ☐ No (Default)	Flex STP is available for Monthly and Quarterly frequencies; Flex STP is not available from "Daily / Weekly" IDCW plans of the source schemes; Flex STP is available only in "Growth" option of the target scheme.

Scheme Details

Source Scheme / Plan / Option	
Target Scheme / Plan / Option	
Target Scheme Sub Option	Div. Payout Option: (select any one) ☐ Div. Reinvest ☐ Div. Payout

Transfer Plan Details (Select any one) Flex STP is applicable only under Fixed Amount Transfer Plan.

☐ Fixed Amount Transfer Plan (FATP) /**1st Installment for Flex STP**	Amount in Rs. ₹	Amount in Words
☐ Fixed Units Transfer Plan (FUTP)	Number of Units	Units in Words
☐ Capital Appreciation Transfer Plan (CATP)		☐ IDCW Transfer Plan (DTP)

Transfer Frequency (Select any one - Not Applicable for IDCW Transfer Plan)

☐ Daily	Only from Monday to Friday [In case any day is a non-business day for any one of the schemes (either STP from or STP to scheme) the STP will be processed as per the matrix provided on our website www.tatamutualfund.com.]	**In case the day of STP is a non business day the request will be considered for the next business day.**
☐ Weekly	☐ Monday ☐ Tuesday ☐ Wednesday *(Default)* ☐ Thursday ☐ Friday	
☐ Monthly	Days of the Month (Select any one)	
☐ Quarterly	☐ 1st ☐ 7th ☐ 10th ☐ 20th ☐ 28th	

Enrolment Period (Not Applicable for IDCW Transfer Plan)

Start Date (D D / M M / Y Y Y Y)	End Date (D D / M M / Y Y Y Y)	OR	Number of Installments / Transfers

5. DECLARATION AND SIGNATURES

I/We have read, understood and hereby agree to comply with the terms and conditions of the scheme related documents including the key information Memorandum and apply for allotment of Units of the Scheme(s) of Tata Mutual Fund ("Fund") indicated in this application form. I/We will indemnify the Fund, AMC, Trustee, RTA and other intermediates in case of any disputes regarding the eligibility, validity and authorization of my/our transactions. 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. Date _____.

1st Applicant Signature / Thumb Impression	2nd Applicant Signature / Thumb Impression	3rd Applicant Signature / Thumb Impression

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Acknowledgement Slip Sr. No.:

Received from Mr./Ms./M/s. _____ Folio No. _____ STP request

from Scheme _____ to Schemes _____

for ☐ Flex ☐ FATP ☐ FUTP ☐ CATP ☐ DTP for Amount (₹) _____ / Units _____ Subject to verification.