# SPECIAL FEATURES FORM - STP/SWP

Please read Product Labelling available on the Front Inside Cover Page and instructions before filling this form (all points marked * are mandatory)

**EDELWEISS MUTUAL FUND**

APPLICATION NO.

**Sponsor:** Edelweiss Financial Services Limited | **Trustee Company:** Edelweiss Trusteeship Company Limited | **Investment Manager:** Edelweiss Asset Management Limited
Edelweiss Mutual Fund, Edelweiss House, Off. C.S.T Road, Kalina, Mumbai - 400 098, Maharashtra.

☐ STP ☐ SWP

## 1 DISTRIBUTOR INFORMATION

| Distributor Code | Sub-Broker Code | Sub-Broker Code INTERNAL CODE | Employee Unique* IDENTIFICATION NO. (EUIN) | E-Code | RIA CODE^ ONLY FOR DIRECT INVESTMENT |
|---|---|---|---|---|---|
| ARN - | ARN - | | | | |

*Investors should mention the EUIN of the person who has advised the investor. If left blank, the fund will assume following declaration by the investor "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".
Upfront commission shall be paid directly by the investor to the AMFI registered Distributors based on the investors' assessment of various factors including the service rendered by the distributor. For Direct investments, please mention 'Direct' in the column 'Name & Distributor Code'.
^I/We, have invested in the below mentioned scheme of Edelweiss Mutual Fund under the Direct Plan. I/We hereby give my/our consent to share/provide the transaction data feed / portfolio holdings / NAV etc. in respect of this particular transaction, to the SEBI Registered Investment Advisor (RIA) bearing the above mentioned registration number.

**SIGNATURE (s)**

| SOLE / FIRST APPLICANT | SECOND APPLICANT | THIRD APPLICANT |
|---|---|---|
| | | |

All sections to be filled in English and in BLOCK LETTERS. Use this form If you are making a one time investment. For SIP investment use the separate SIP Form. All columns marked * are mandatory.

## 2 UNITHOLDER INFORMATION

| | | | |
|---|---|---|---|
| Folio No. (For Existing Unit Holders) | | | |
| Sole / 1st Unit Holder | | | |
| PAN | | Date of Birth | D D M M Y Y Y Y |
| Aadhaar No. | | CKYC No. | |

## 3 TRANSACTION CHARGES [Please ✓]

☐ I am First Time Investor in Mutual Funds ☐ I am Existing Investor in Mutual Funds

In case the subscription amount is ₹10,000/- or more and your Distributor has opted to receive Transaction Charges, ₹150 (for first time mutual fund investor) or ₹100/- (for investor other than first time mutual fund investor) will be deducted from the subscription amount and paid to the distributor. Units will be issued against the balance amount invested.

## 4 SCHEME DETAILS (STP/SWP from Scheme)

| Scheme/Plan/Option/Facility | Edelweiss- | Scheme | Plan | Option/Facility |
|---|---|---|---|---|

(Default Plan/Option/Facility will be applied in case of no information, ambiguity or discrepancy) IDCW (Reinvestment) Facility is not available under Edelweiss ELSS Tax saver Fund

### SCHEMES OFFERED BY EDELWEISS MUTUAL FUND :

| Equity Schemes | | Debt Schemes | Fund of Funds Schemes |
|---|---|---|---|
| Edelweiss Arbitrage Fund | Edelweiss Mid Cap Fund | Edelweiss Liquid Fund | Edelweiss Asean Equity Offshore Fund |
| Edelweiss Balanced Advantage Fund | Edelweiss Flexi Cap Fund | Edelweiss Banking and PSU Debt Fund | Edelweiss Emerging markets Offshore Fund |
| Edelweiss Large Cap Fund | Edelweiss Small Cap Fund | Edelweiss Corporate Bond Fund | Edelweiss Europe dynamic Offshore Fund |
| Edelweiss ELSS Tax saver Fund | | Edelweiss Money Market Fund | Edelweiss Greater China Equity Offshore Fund |
| Edelweiss Aggressive Hybrid Fund | | Edelweiss Government Securities Fund | Edelweiss US Value Offshore Fund |
| Edelweiss Large & Mid Cap Fund | | Edelweiss Overnight Fund | Bharat Bond FOF-April 2023 |
| Edelweiss Equity Savings Fund | | | Bharat Bond FOF-April 2030 |

## 5 FREQUENCY DETAILS

| ☐ Daily (STP) | ☐ Weekly (STP) | ☐ Fortnightly (STP) | ☐ Monthly (STP/SWP) | ☐ Quarterly (STP/SWP) |
|---|---|---|---|---|
| All Business Day | 7th, 14th, 21st, 28th of any month | 10th, 25th | Any date except last 3 days of month<br>Date : ____ / ____ / ________ | Any date except last 3 days of month<br>Date : ____ / ____ / ________ |

## 6 SYSTEMATIC TRANSFER PLAN (STP) DETAILS (NOT APPLICABLE FOR ELSS SCHEME)

To Scheme ____________________________ Option ____________________

STP Period : From Date ____ / ____ / ________ To Date ☐ Perpetual (99 years) (Default) or ☐ 10yrs or ☐ 5 yrs or ____ / ____ / _______

Amount Per Installment : ____________________ Amount (in words) ____________________

## 7 SYSTEMATIC WITHDRAWAL PLAN (SWP) DETAILS (NOT APPLICABLE FOR ELSS SCHEME) (Only Monthly and Quarterly Options Available)

Amount Per Withdrawal : ____________________ Amount in words : ____________________

SWP Period : From Date _____ / _____ / __________ To Date _____ / _____ / __________ or Perpetual (99 years) (Default) ☐

## 8 DECLARATION AND SIGNATURE (To be signed by ALL UNIT HOLDERS if mode of holding is 'joint')*

DATE : ____ /____ /______ PLACE : ____________________

Having read and understood the contents of Statement of Additional Information (SAI), Scheme Information Document (SID) of the Scheme(s), I/We hereby apply to the Trustees of Edelweiss Mutual Fund for units of Scheme(s) of Edelweiss Mutual Fund as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme (s). I/We hereby declare that the particulars given herein are correct and complete. I/We confirm that I/we have not received and will not receive any commission or brokerage or any other incentive in any form, directly or indirectly, for subscribing to units issued under any of the Scheme(s). I/We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of Income Tax Act, 1961, Prevention of Money Laundering Act, 2002, Prevention of Corruption Act, 1988 or any other applicable laws enacted by the Government of India from time to time.
The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.
**For NRIs/FIIs only:** I/We confirm that I am/we are Non Residents of Indian Nationality/origin and that I/We have remitted funds from abroad through approved banking channels or from funds in my/our Non-resident External Account/FCNR account/NRO/NRSR Account. (Please ✓ ) (Including amount of transactions made in future)
☐ Repatriation ☐ Non Repatriation

**SIGNATURE (s)**

| SOLE / FIRST APPLICANT | SECOND APPLICANT | THIRD APPLICANT |
|---|---|---|
| | | |

# TERMS AND CONDITIONS

**Systematic Transfer Plan /Systematic Withdrawal Plan**

1. All valid requests for STP/SWP forms from one Scheme to the other Scheme would be treated as switch-out/redemption & switch-in/purchase at the applicable NAV of the respective Scheme(s). The difference between the NAV of two Schemes will be reflected in the number of units allotted.
2. Minimum Investment Amount in Transfer Out Scheme should be as per the respective SID/ Addendum.
3. Units marked under Lien, Pledge or Lock-in Period in the Transfer Out Scheme will not be eligible for STP/SWP.
4. All valid applications will be processed as per the applicable uniform cut off timings on the working days as mentioned in the respective Scheme SID.
5. This form should be submitted at least 5 business days before the commencement date.
6. A Unit holder who has opted for STP/SWP under a specific Scheme can also redeem or switch his Units to any other eligible Scheme provided he has sufficient balance in his account on the date of such a request.
7. The Unit holder can make additional subscriptions in accordance to the terms and conditions of the Scheme Information Document (SID). Such additional subscription will alter the functioning of the STP/SWP.
8. STP/SWP will be terminated automatically in case of a Zero balance in the respective Scheme-Folio on the run-date or expiry of the enrolment period whichever is earlier.
9. The unit holders can choose to opt out from the STP/SWP at any point of time by submitting a written request to the nearest designated Investor Service Center. Such request for discontinuation should be received at least 10 working days prior to the next due date of the SWP/STP.
10. Edelweiss AMC reserves the right to reject any application without assigning any reason thereof and the Trustee reserves the right to change/modify the terms and conditions of SWP/STP.
11. Existing unit holders should note that unit holders' details and mode of holding (single, jointly, anyone or survivor) will be as per the existing Account.
12. The application is subject to detailed scrutiny and verification. Applications which are not complete in all respect are liable for rejection either at the collection point itself or subsequently after detailed scrutiny / verification at the back office of the Registrar.
13. STP/SWP facility is not available for units held in demat. Unit Holders opting the units in the demat mode, can submit redemption only through DP or through stock exchange platform.

| **Frequency of STP** | **Daily** | **Weekly** | **Fortnightly** | **Monthly** | **Quarterly** |
|---|---|---|---|---|---|
| Minimum no. of STP | 20 | 6 | 6 | 6 | 6 |
| Minimum Amount | ₹ 100 for all schemes & ₹ 500 for Edelweiss ELSS Tax Saver Fund | | | | |
| Investment Dates | All business days | 7th, 14th, 21st & 28th | 10th & 25th | Any date except last 3 days of the month | Any date except last 3 days of the month of the quarter |

| **Frequency of SWP** | **Fortnightly** | **Monthly** | **Quarterly** |
|---|---|---|---|
| Minimum no. of SWP | 6 | 6 | 6 |
| Minimum Amount | ₹ 100 for all schemes & ₹ 500 for Edelweiss ELSS Tax Saver Fund | | |
| Investment Dates | 10th & 25th | Any date except last 3 days of the month | Any date except last 3 days of the month of the quarter |

**Employee Unique Identification Number (EUIN):**

SEBI has made it compulsory for every employee/ relationship manager/ sales person of the distributor of Mutual Fund products to quote the EUIN obtained by him/her from AMFI in the Application Form. EUIN, particularly in advisory transactions, would assist in addressing any instance of mis-selling even if the employee/relationship manager/sales person later leaves the employment of the distributor. Individual ARN holders including senior citizens distributing

Mutual Fund products are also required to obtain and quote EUIN in the Application Form. Hence, if your investments are routed through a distributor please ensure that the EUIN is correctly filled up in the Application Form. However, if your distributor has not given you any advice pertaining to the investment, the EUIN box may be left blank. In this case, you are required to provide a duly signed declaration to this effect. Distributors are advised to ensure that the sub broker affixes his/her ARN code in the column separately provided in addition to the current practice of affixing the internal code issued by the main ARN holder and the EUIN of the Sales Person (if any) in the EUIN space.