

# SPECIAL PRODUCT FORM

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



Sponsor: Edelweiss Financial Services Limited. Trustee Company: Edelweiss Trusteeship Company Limited. Investment Manager: Edelweiss Asset Management Limited. Edelweiss House, Off. C.S.T Road, Kalina, Mumbai - 400098

☐ STP ☐ SWP ☐ SIP-PDC

1 DISTRIBUTOR INFORMATION					FOR OFFICE USE ONLY	
Name & Distributor Code	Sub-Broker Code	Employee Unique Identification Number (EUIIN)*	Sub-Broker Code	E - Code	Registrar/Bank Serial No.	Date & Time of Receipt
<b>132061</b>	ARN	<b>E352389</b>	Internal Code			

\*Investors should mention the EUIIN 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 EUIIN 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'

All sections to be filled in English and in BLOCK LETTERS.

Signature(s)	Sole/1st Applicant/Guardian / Authorised Signatory / POA Signatory	2nd Applicant / Authorised Signatory	3rd Applicant / Authorised Signatory

2 NEW / EXISTING UNIT HOLDER INFORMATION	
Folio / Application No.	Name of the Sole/1st Applicant

3 TRANSACTION CHARGES (Please ✓) (Default option Existing Investor) (Refer Instruction No. XIV)	
<input type="checkbox"/> I am a First Time Investor in Mutual Funds	<input type="checkbox"/> I am an 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			
Scheme/Plan/Option/Facility	Edelweiss-	Scheme	Plan
			Option/Facility

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

**Schemes offered by Edelweiss Mutual Fund:**

Equity Schemes		Debt Schemes	
Edelweiss Absolute Return Fund	Edelweiss Emerging Leaders Fund	Edelweiss Liquid Fund	Edelweiss Gilt Fund
Edelweiss Diversified Growth Equity Top 100 (E.D.G.E. Top 100) Fund	Edelweiss Value Opportunities Fund	Edelweiss Ultra Short Term Bond Fund	Edelweiss Debt and Corporate Opportunities Fund
Edelweiss ELSS Fund	Edelweiss Arbitrage Fund	Edelweiss Short Term Income Fund	

5 FREQUENCY DETAILS (Please ✓)			
<input type="checkbox"/> Daily (STP)	<input type="checkbox"/> Weekly (STP)	<input type="checkbox"/> Monthly (STP/ SWP/SIP-PDC)	<input type="checkbox"/> Quarterly (SWP)
All Business Days	<input type="radio"/> 7th, 14th, 21st, 28th of any month	<input type="radio"/> 7th <b>OR</b> <input type="radio"/> 21st	<input type="radio"/> 14th <b>OR</b> <input type="radio"/> 28th

6 <input type="checkbox"/> SYSTEMATIC INVESTMENT PLAN (SIP) DETAILS					
SIP Period: From Date <input type="text" value="MM YYYY"/> To Date <input type="text" value="MM YYYY"/> Amount Per Installment: <input type="text"/> Amount (in words) _____					
SIP POST DATED CHEQUE DETAILS					
Cheque No.	Cheque Date	Amount (Rs.)	Cheque No.	Cheque Date	Amount (Rs.)
1.			7.		
2.			8.		
3.			9.		
4.			10.		
5.			11.		
6.			12.		
Cheque drawn on Bank _____				Total No. of Cheques: _____	
Branch _____ City _____				Total Amount Rs. _____	

7 <input type="checkbox"/> SYSTEMATIC TRANSFER PLAN (STP) DETAILS (Not applicable for ELSS Scheme)	
To Scheme _____	Option _____
STP Period: From Date <input type="text" value="M M Y Y Y Y"/> To Date <input type="text" value="M M Y Y Y Y"/>	
Amount Per Installment: <input type="text"/> Amount (in words) _____	

8 <input type="checkbox"/> SYSTEMATIC WITHDRAWAL PLAN (SWP) DETAILS (Not applicable for ELSS Scheme) (Only Monthly and Quarterly options are available)	
Amount per Withdrawal: <input type="text"/> Amount (in words) _____	
SWP Period: From Date <input type="text" value="M M Y Y Y Y"/> To Date <input type="text" value="M M Y Y Y Y"/>	

## DECLARATION AND SIGNATURES

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.

For Micro SIP investors- I/we hereby declare that the I/we do not have any existing Micro SIP's which together with current application will result in aggregate investments exceeding ₹50,000/- in a financial year.

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/NRSL Account. (Please ✓) (Including amount of transactions made in future)

☐ Repatriation ☐ Non Repatriation

1st / Sole Applicant
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2nd Applicant
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3rd Applicant
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## SPECIAL PRODUCT FORM: 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. 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
6. 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.
7. STP 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.
8. 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.
9. 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.
10. The section for SIP is to be filled up only if investor opts for Systematic Investment Plan (SIP) via Post Dated Cheques (PDCs). New investor has to submit Common Application Form along with SIP Enrolment Form for Post Dated Cheques and Existing investors with folio number can submit only SIP Enrolment Form for Post Dated Cheques.
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 Minimum SIP amount per execution (per installment) in case of Monthly SIP option will be: Rs 500X12 cheques
13. The minimum no. of cheques required in case of SIPs as stated above will be including the cheque required for account/ folio opening. Thus the minimum aggregate value of the SIP investment should be at least Rs6000
14. All SIP cheque except the 1st cheque must be dated 7th or 14th or 21st or 28th of a month. If an investor does not mention SIP Date in the application form or multiple SIP dates are mentioned in the SIP Mandate or the SIP Date is unclear in the application form / SIP Mandate, the default SIP date shall be treated as 7th of every month as per the frequency defined by the investor. An investor shall have the option of choosing for 1 or more than 1 SIP in the same scheme and in the same month however more than one SIP on the same debit date is not allowed.
15. All SIP cheques including the 1st cheque under Monthly SIP should be of the same amount.
16. In case of two consecutive failures due to insufficient balance in bank account while processing request for SIP, Edelweiss Asset Management Limited shall reserve the right to terminate the SIP without any written request from the investor.
17. Allotment of units would be subject to realisation of credit.
18. The cheque should be drawn in the favour of the scheme/plan chosen (e.g. "Edelweiss Absolute Return Fund Growth Fund") and crossed "A/C Payee Only" and payable locally and drawn on any bank, which is situated at and is a member of the Bankers Clearing House located at the place where the SIP application is submitted. Outstation cheque will not be accepted.
19. 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.
20. Unit Holders opting the units in the demat mode, can submit redemption only through DP or through stock exchange platform
21. The first SIP cheque could be submitted on any working day. However the subsequent cheques should be dated 7th or 14th or 21st or 28th. For example if an investor wishes to have a monthly SIP of Rs 5000/- each for 12 months, starting from January to December, then he will have to submit:
  - a. First cheque for Rs 5000 on any date in June.
  - b. 11PDCs of equal amount i.e, Rs 5000. All these cheque should bear the same date of different months (to be chosen by an investor from the following available dates- 7th,14th, 21st or 28th of a month) .
22. **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.

**MUTUAL FUND INVESTMENTS ARE SUBJECT TO MARKET RISKS, READ ALL SCHEME RELATED DOCUMENTS CAREFULLY.**

