

ACKNOWLEDGEMENT SLIP

Acknowledgement is subject to verification. Request may not be processed in case of incomplete / ambiguous / improper / incorrect details in Transaction Form.

Investor Name

Folio Number/s

- Change of Address
- Change of Bank Mandate
- PoA Registration
- Contact Details
- PAN and KYC Updation
- Change in Mode of Holding
- Consolidation of Folios
- Nomination Details
- Cancellation for Systematic Transactions
 - SIP STP SWP
- DTP - Cancellation

ISC Stamp & Signature

**NON-FINANCIAL
TRANSACTIONS**

COMMON TRANSACTION FORM

(For Existing Investors only)

**NON-FINANCIAL
TRANSACTIONS**

Please fill only in the space provided. Any additional details/notings/instructions or those provided at a non designated area of the form may not be executed. Kindly strike off the unused Sections of the Form to avoid misuse.

Distributor Name and ARN	Sub Broker Code	Sub Broker/Branch/RM Internal Code	Employee Unique ID. No. (EUIIN) (Refer note below)

Existing Folio Number/s

Name of Sole / First Unitholder (Leave space between first / middle / last name) Mr. Ms. M/s. Others _____

CHANGE OF ADDRESS

For KYC complied folio, change of address should be submitted in KYC change form.
For Non KYC folios-Attach self attested Proof of address AND PAN Card (OR Any other Proof of Identity for PAN exempt cases only).
Copies of all documents submitted should be accompanied by originals for verification or they should be attested by a KYD complied distributor or personnel / entities authorized for attesting as per KYC guidelines.

Landmark

City

Pin Code

State

CHANGE OF BANK MANDATE

Attach any one of: Cancelled Cheque with name & account number pre-printed
 Latest Bank statement Latest Pass book Bank Letter
Submit originals of any one of the documents mentioned above, or copy should be attested by the Bank or originals should be produced for verification. All supporting documents should clearly evidence the bank name, bank account number and names of all account holders.

Bank Name

Core Bank A/c No.

A/c Type Savings Current NRE NRO FCNR Others _____

Branch Name & Address

City

Pin

IFSC Code (11 digit)

MICR Code (9 digit)

PoA (Power of Attorney) REGISTRATION DETAILS (Refer Instructions overleaf)

Name of the PoA holder

PAN of the PoA holder

Attached KYC Letter (Mandatory)

Notarized copy of PoA

CONTACT DETAILS (Refer Instructions overleaf)

E-Mail

(IN CAPITAL)

Mobile

Tel. (Off.)

STD Code

Tel. (Resi.)

STD Code

Fax

STD Code

PAN AND KYC UPDATION

Sole / First Applicant / Guardian

Second Applicant / Guardian

Third Applicant / Guardian

KYC LETTER

Attached

Attached

Attached

DECLARATION & SIGNATURES

Having read and understood the contents of the Scheme Information Document and Statement of Additional Information, Key Information Memorandum and Instructions. I / We, hereby apply to the Trustee of DSP BlackRock Mutual Fund for Units of the relevant Scheme and agree to abide by the terms and conditions, rules and regulations of the Scheme. I / We hereby nominate the above nominee to receive all the amounts to my/our credits in the event of my/our death and have read the instructions for nomination. Signature of the nominee acknowledging receipts of my/our credit will constitute full discharge of liabilities of DSP BlackRock Mutual Fund. I / We declare that the amount invested in the Scheme is through legitimate sources only and is not designed for the purpose of contravention or evasion of any Act, Regulation, Rule, Notification, Directions or any other applicable laws enacted by the Government of India or any Statutory Authority.

Sole / First Holder

Second Holder

Third Holder

(To be signed as per Mode of Holding)

