



LIC NOMURA
MUTUAL FUND

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4th Floor, Industrial Assurance Building, Opp. Churchgate Station, Mumbai - 400 020

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E-mail: corp.office@licnomuramf.com, Website: www.licnomuramf.com

(Please use separate Enrolment Form for each Scheme. A Photocopy of this form is valid)

EUIN - E019976

Systematic Investment Plan through Cheque

Normal SIP

Micro SIP

Name of the Authorised Centre:

FOR OFFICE USE ONLY

AGENT/ BROKER

SUB-BROKER CODE
(if any)

RM CODE

ARN No.

6574

NAME

Tel. No.

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

TRANSACTION CHARGES FOR APPLICATIONS THROUGH DISTRIBUTORS/AGENTS ONLY (Refer Instruction No. 28)

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 the 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.

New Investors* Existing Investor (Please tick as applicable)

I/We hereby apply to the LIC NOMURA MUTUAL FUND TRUSTEE CO. PVT. LTD. for a Systematic Investment Plan (SIP) through postdated cheque payment under the following Scheme and agree to abide by the terms, conditions, rules and regulation of the scheme(s) mentioned overleaf as on the date of this investment.

Name of Sole /First Account Holder : Mr./Mrs./M/s

Folio/ Account Number (For existing investor)

(* New investors are required to complete and submit a Common Application Form also)

Name: 2nd Holder

3rd Holder

SIP Details: Scheme

Plan

Option

For MICRO SIP Cases (Refer Instruction No. 21 overleaf)

DOB

1st Holder

2nd Holder

Supporting Document

1st Holder

2nd Holder

Reference Number(if any)

1st Holder

2nd Holder

Frequency Monthly Quarterly(Please tick as applicable)

Amount of each SIP Cheque _____ (minimum SIP Amount per Cheque should be ₹ 100/- / 500/- conditions apply* (See Inst. No. 20)

SIP Date 1st 7th 10th 15th

Account Type : Saving Current

Cheque No.(s)	Dated 1/7/10/15 of every month/quarter	Amount (₹)	Cheque No. (s)	Dated 1/7/10/15 of every month/quarter	Amount (₹)
1...../...../.....	7...../...../.....
2...../...../.....	8...../...../.....
3...../...../.....	9...../...../.....
4...../...../.....	10...../...../.....
5...../...../.....	11...../...../.....
6...../...../.....	12...../...../.....

*Total Cheque

Total Amount ₹

Enrolment Period FROM

(mm/yy) TO

(mm/yy)

Drawn Bank

Branch

SYSTEMATIC TRANSFER PLAN (STP) ENROLMENT FORM (Read Instructions Overleaf)

Broker Code :

Name of Sole/First Applicant (Leave space between first/middle/last name)

Salutation Mr. Mrs. M/s.

STP Date 1st 7th 10th 15th

Application Number

Folio/Account Number
(for existing investor)

Enrolment From :

To

Transfer From :

Scheme Name

Plan

Amount

OR Capital Appreciation

Frequency : DAILY WEEKLY MONTHLY QUATERLY HALF YEARLY

Transfer To:

Scheme Name

Folio/Account Number
(for existing investor)

Plan

Sole/first
SIGNATURE Applicant

Second
Applicant

Third
Applicant