

# Form pertaining to Employee Unique Identity Number (EUIIN) box in the Application Form / transaction slip for subscription of Units in the scheme(s) of Bajaj Finserv Mutual Fund



To,  
Bajaj Finserv Mutual Fund

I / We hereby refer to the following application for subscription of Units in the Scheme(s) of Mutual Fund:

|                                                           |                                                                                                                                                                        |
|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Application Number / Folio Number                         |                                                                                                                                                                        |
| Transaction Date                                          |                                                                                                                                                                        |
| Transaction Type                                          | <input type="checkbox"/> Purchase <input type="checkbox"/> Switch - in <input type="checkbox"/> SIP / STP registration <input type="checkbox"/> Other (Please specify) |
| Name of First or Sole Applicant / Unit holder OR Guardian |                                                                                                                                                                        |
| Name of Second Applicant / Unitholder                     |                                                                                                                                                                        |
| Name of Third Applicant / Unitholder                      |                                                                                                                                                                        |
| For Scheme                                                |                                                                                                                                                                        |
| For Amount                                                |                                                                                                                                                                        |
| Name of Distributor                                       |                                                                                                                                                                        |
| ARN Code                                                  |                                                                                                                                                                        |
| Sub-Distributor ARN Code                                  |                                                                                                                                                                        |

## Declaration from Distributor for Inserting / Rectifying Employee Unique Identity Number (EUIIN)

I would like to Insert / Rectify the Employee Unique Identity Number (EUIIN) in the transaction slip / application form

EUIIN - \_\_\_\_\_

☐

EUIIN mentioned incorrectly

☐

EUIIN was not mentioned

Signature of ARN holder:

OR

## Declaration from Investor(s) for leaving the box for Employee Unique Identity Number (EUIIN) blank

"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 not withstanding the advice of in - appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."

Signature(s):

First or Sole Applicant /  
Unit holder

Second Applicant /  
Unit holder

Third Applicant /  
Unit holder

### NOTE:

1. This declaration must be submitted within 30 days from the date of Application or Transaction
2. A separate declaration must be submitted for each and every Application or Transaction
3. This declaration must be signed by all applicants, in case the mode of holding is 'Joint'

**BAJAJ FINSERV ASSET MANAGEMENT LIMITED**