

Application form for Transfer of AUM [To be submitted by Transferor Distributor]

Please complete the relevant sections legibly in black / dark blue ink and in BLOCK LETTERS

To, _____
NAME of the AMC

| | | | | | | | | |
|------|---|---|---|---|---|---|---|---|
| Date | D | D | M | M | Y | Y | Y | Y |
|------|---|---|---|---|---|---|---|---|

Sir/Madam,

1) I/We, the below mentioned Transferor distributor, hereby request you to shift the folios of all the unitholders in Regular Plan of all the Schemes in your fund house linked to my/our ARN to the ARN of the below mentioned Transferee distributor:

| Transfer of AUM | Name | ARN |
|--|------|-----|
| From: (Transferor) | | |
| To: (Transferee) | | |
| Reason for transfer*: (Please ✓ whichever is applicable) | | |
| <input type="checkbox"/> Individual distributor merging his MF distribution business into/with a partnership firm* / Pvt. Ltd.* | | |
| <input type="checkbox"/> Partnership firm converting itself into LLP <input type="checkbox"/> Exit of Partners / Dissolution of partnership firm | | |
| <input type="checkbox"/> Merger of companies / entities <input type="checkbox"/> De-merger of companies / entities | | |
| <input type="checkbox"/> Transfer of business to family member <input type="checkbox"/> Transfer of business to an associate distributor | | |
| <input type="checkbox"/> Conversion of Pvt. Ltd. co. to Public Ltd. co. <input type="checkbox"/> Conversion of Public Ltd. co. to Pvt. Ltd. co. | | |
| <input type="checkbox"/> Transferor Distributor will be working as sub-distributor of the Transferee MFD | | |
| <input type="checkbox"/> Transferee distributor, who is a sub-distributor of Transferor (Principal) distributor, is moving out of the tie-up with the principal distributor. | | |
| <input type="checkbox"/> Winding up of business / Voluntary cessation / Retirement | | |
| <input type="checkbox"/> Others _____ | | |
| <i>* Please delete whichever is not applicable. Please attach supporting document for reason for transfer of AUM</i> | | |

2) I/we hereby understand and agree that the AMC shall effect the transfer of AUM subject to the below mentioned conditions –

- a) The ARNs of both transferor and transferee distributor are valid as on date, both are KYD-compliant and have furnished all annual Declaration of Self-Certification (DSC) due till date.
- b) The transfer of assets will be carried out for all folios under Transferor-ARN holder* /OR

The transfer of assets will be carried out for all folios/AUM under Transferee-ARN holder*[@] who is a sub-distributor Transferor-ARN holder. * Please delete whichever is not applicable.

[@] In case a sub-distributor under a Principal ARN holder is moving out of the tie-up with the principal distributor, partial AUM transfer is permitted / may be requested. In such a case both the principal distributor and the sub-distributor need to certify to the AMC that the entire AUM of the sub-distributor is being transferred).

3) I/We hereby agree and declare that after the transfer of AUM, I/we shall cease to operate under my/our ARN and shall surrender my/our ARN to CAMS-AMFI unit for cancellation within 15 days of AUM transfer and submit a copy of the ARN cancellation letter to the respective RTAs**

**Not applicable where the Transferor distributor is the principal distributor who will continue to operate under his/her/its ARN. Please delete if not applicable.

- 4) I / We confirm and certify that I/we have informed all my/our mutual fund clients through email / letters about the proposed change of distributor / ARN code in respect of their folios under my/our ARN and the reason for the same, along with the details of the new (transferee) distributor who will be servicing them after the change of distributor code in their folios. A specimen of the email/letter is attached herewith along with the list of investors with their Folio no. and PAN.
- 5) I / We further certify that, I/we have informed the clients that if they do not wish to transfer their MF holdings/folios to ARN _____ of the aforesaid transferee distributor, and wish to shift to some other mutual fund distributor or investment adviser of their choice, OR wish to SWITCH the units to Direct Plan, they are requested to inform the concerned mutual funds/ AMCs accordingly through a written communication within 15 days from the date of the letter /email. I/We have also mentioned that if the AMC does not receive any written communication from the investor in this regard within 15 days from the date of the email/letter, it will be deemed that the investor has no objection to the proposed change in ARN, and the concerned AMC(s) shall proceed with the change of ARN code in their folios.

In this regard, I undertake to notify the AMC/RTA immediately if any of the clients convey their objection to the proposed change to me directly.

- 6) I/We further declare and certify that the proposed transfer of assets is not being done to circumvent any legal or regulatory obligation and / or AMFI guideline / requirements.
- 7) I/We undertake to inform the concerned platforms / service providers regarding the AUM transfer for the existing SIP/STPs routed through MFU/ Exchange/ Online platforms (*if applicable*).
- 8) I / We request the AMC to de-link / de-map the EUINs (as per list attached) currently mapped to my/our ARN, and link /map the said EUINs to the ARN of the transferee MFD/ARN.**
- 9) I/We am/are aware and agree that in case there is any deficiency or discrepancy in the information provided herein and the supporting documents submitted herewith, my application is liable to be rejected by the AMC/RTA.
- 10) I/We understand that AMCs / RTA will not be obliged to address any queries or complaints arising due to this ARN Code change request.
- 11) I/We hereby declare that the information furnished herein is complete and correct in all respects and I/we shall forthwith communicate any change in the information furnished to the AMC/RTA.
- 12) I/We hereby indemnify the AMC against any loss or damages arising due to any claims or disputes made by any investor or Sub-distributor on account of the AMC effecting the transfer of AUM.

Thanking you,

Signature of Transferor Distributor

Checklist of Documents to be submitted:

- 1) Supporting document for reason for transfer of AUM
- 2) Sample of the letter / email sent to the clients intimating about the proposed AUM transfer / change in ARN with date of communication.
- 3) Proof of dispatch of letters/e-logs of emails.
- 4) List of investors to whom the intimation has been sent (along with their Folio nos. and PAN)
- 5) List of EUIN holders to be de-linked / de-mapped from the ARN of the transferor MFD/ARN holder and to be mapped / linked to ARN of the transferee MFD/ARN.

**Delete if not applicable