

UTI Focused Equity Fund

(An open ended equity scheme investing in maximum 30 stocks across market caps)

TRANSACTION FORM FOR PURCHASE & SWITCH (To be used during NFO only)

Please Fill In The Information Legibly In English & Capital Letters



Haq, ek behtar zindagi ka.

FINANCIAL ADVISOR INFORMATION

ARN/RIA Code^	Sub ARN Code	Sub Code	EUI No.*	UTI RM Code

TIME STAMP (FOR OFFICE USE ONLY)

^ By mentioning RIA code, I/we authorise you to share with the Investment Adviser the details of my/our transactions. *Please sign below in case the EUI No. is left blank/not provided/transaction is "execution-only" in nature.

I/We hereby confirm that the EUI No. box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction

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.

INVESTOR DETAILS

Existing Unit Holder Information: Scheme: _____ Folio No.: _____

Details	Name	PAN No.	KYC Copy
First Applicant			<input type="checkbox"/>
Guardian (In case of Minor)			<input type="checkbox"/>
Second Applicant			<input type="checkbox"/>
Third Applicant			<input type="checkbox"/>

PURCHASE (Please write your folio number and name on the reverse of the cheque/DD/Payment Instrument no.)

Cheque / DD No. _____ Date _____ DD Charges ₹ _____ Cheque / DD Net Amount ₹ _____

Bank Name _____ Branch: _____ City _____

Scheme **UTI FOCUSED EQUITY FUND** Plan : Regular Plan Direct Plan Option : Growth IDCW (Payout)

OR

Scheme _____ Plan : Regular Plan Direct Plan Option : _____

AUTOMATIC SWITCH TO UTI FOCUSED EQUITY FUND

SWITCH: I/We would like to Switch All units (or) Partial units No. of Units: _____ (or) Amount in figure : ₹ _____

Amount (in words) _____

From Scheme _____ Plan : Regular Plan Direct Plan Option : _____

To Scheme **UTI FOCUSED EQUITY FUND** Plan : Regular Plan Direct Plan Option : Growth IDCW (Payout)

On August 18, 2021 (NFO Closure Date) of **UTI Focused Equity Fund** IDCW - Income distribution cum capital withdrawal

I/We have read and understood the terms and conditions applicable to the switch facility and am/are fully aware of the risk associated with such event.

I/We have read and understood the Scheme Information Document (SID)/Statement of Additional Information (SAI) and Key Information Memorandum (KIM) of the Target Scheme and have understood the investment objectives, investment pattern and risk factors applicable to the Target Scheme.

DECLARATION

I/We have understood the contents of the Scheme Information Document, Statement of Additional Information, Key Information Memorandum and addenda issued till date and apply to the Trustees of UTI Mutual Fund as indicated above. I/ We agree to abide by the terms and conditions, rules and regulations of the scheme as on the date of investment. I/ We undertake to confirm that the applicant/unit holder is empowered to invest/ disinvest and the signatories have necessary authorization to invest/disinvest on behalf of applicant/ unit holder. I/We undertake to confirm that this investment has been duly authorized by appropriate authorities in terms of all relevant documents and procedural requirements. I/ We have not received nor been induced by any rebate or gifts, directly or indirectly in making investment. I/ We confirm that we are Non residents of Indian Nationality/ Origin and that the funds are remitted from abroad through approved banking channels or from my/ our funds from my/ our NRE/ NRO account. I/ We undertake to provide further details of source of funds and any such other relevant document, if called by UTI Mutual Fund. The ARN holder has disclosed to me/us all the commissions (in the form of trial 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.

Mobile No.: _____

Email ID: _____

Signature(s)

First Account Holder	Second Account Holder*	Third Account Holder*

* To be signed by all unit holders if mode of holding is joint.

Acknowledgement for submission of Purchase / Switch request (to be filled by the unitholder)

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Received, subject to verification, Request for Purchase Automatic Switch

Folio No.: _____

Scheme: _____ Amount/Units _____

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Guidelines

- Existing investors who are KYC compliant before 1st January 2012 will have to complete the new KYC requirements and get the IPV done if they wish to deal with any other SEBI registered intermediary other than a Mutual Fund.
- The last updated bank account details under the folio, (Folio number furnished in the Transaction Form on the reverse) will be updated under UTI Focused Equity Fund NFO. In case the investor wishes to update/change the bank details, the relevant form with supporting documents may be submitted alongwith the Transaction Form.
- Please use the service request forms as specified by UTI MF for the services like change of address (for non-KYC complied folios) updation / change of bank mandate. For the KYC complied Folios, request for change of address is to be updated with KYC Registration Agency (KRA)The completed and duly signed forms alongwith the necessary supporting documents can be submitted at any of the UTI Financial Centres.
- All cheques and bank drafts must be drawn in the name of the scheme as specified in the SID/ and crossed "A/c Payee Only" cheque /DD. A separate cheque or draft must accompany each Application. In order to avoid frauds and as a best practice, investors are advised to make the payment instrument (cheque, DD, pay order etc) favouring "UTI Mutual Fund Scheme A/c First Investor name" or UTI Mutual Fund Scheme A/c Permanent Account Number" or UTI Mutual Fund Scheme A/c Folio Number".
- The purchase / switch request must be signed by all joint holders in case the units are held jointly.

Check list

- The form is filled in CAPITAL letters only.
- The form is complete in all respects.
- The form is signed by the holders as per the holding basis.
- Units or Amount to switch is clearly written
- Scheme details



Toll-Free: 1800 22 1230 **Email: service@uti.co.in**
SMS: 'SERVICE' to 5 67 67 56 **Web: www.utmf.com**

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For Existing Investors



Type ESOA to 5 60 70 90 to request for Statement of Account.



Type BAL <Folio no> to 5 60 70 90 to know your Folio Balance.