REMEDIATION FORM

Employee Unique Identification Number

Birla Sun Life Mutual Fund

(Please use separate form for each transaction)

I/We hereby remediate the missing / invalid Employee Unique Identification Number (EUIN) by providing the EUIN/execution only confirmation, for the following transaction:

Date D D - M M - Y Y Y Y

1. INVESTOR DETAILS

Folio / App. No. | **First Unitholder Name**

2. TRANSACTION DETAILS (REMEDIATION ALLOWED WITHIN 90 CALENDAR DAYS OF THE TRANSACTION TRADE DATE)

Trade Date D D - M M - Y Y Y Y

Transaction Type (Tick Any One) ☐ Purchase ☐ SIP ☐ Switch-In ☐ STP

Amount

3. SCHEME NAME BSL

☐ **Execution Only Transaction Declaration (Please Tick)**

"I/We hereby confirm that the EUIN 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".

First Unit Holder / Authorized Signatory | Second Unit Holder | Third Unit Holder

OR

☐ **Distributor Details** (Primary ARN Code would not be updated)

ARN Code: A R N-

Sub-Broker Details: Sub-Broker ARN Code: A R N-

Sub-Broker Code: *(As alloted by ARN Holder)*

EUIN*: E

*Please provide valid EUIN mapped to the ARN code or Sub Broker ARN Code. If Sub Broker ARN is mentioned, validity check will be base on Sub Broker ARN only.

Signature of ARN Holder / Authorized Signatory with Name & Seal

(Tear-off for acknowledgement)

Folio/App. No. | **Transaction Type:**

Scheme Name: BSL | **ARN No.:**

DATE: D D - M M - Y Y Y Y

EUIN or Execution only EUIN: or Execution only confirmation ☐