

Annexure 5

Application form for Transfer of AUM from ARN of deceased Distributor to ARN of Nominee / Legal Heir

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

Date:	D	D	M	M	Y	Y	Y	Y
-------	---	---	---	---	---	---	---	---

To,

NAME of the AMC

Sirs,

1) I, Mr./Ms. _____ am the registered nominee* / legal heir* of the deceased mutual fund distributor, Mr./Ms. _____ (ARN _____) who expired on DD-MMM-YYYY. A copy of his/her death certificate is attached herewith.

2) I have already notified AMFI/CAMS to take note of his/her demise and to cancel his/her ARN on _____.

3) I am registered with AMFI as a distributor under ARN _____, which is valid up to DD-MMM-YYYY.

4) I wish to carry on the mutual fund distribution business of the aforesaid deceased distributor as his/her nominee* / legal heir* and shift the AUM/clientele under his/her ARN to my ARN, so that I can service the clients, subject to the concurrence of the concerned clients.

5) In this regard, the NOC** from the other surviving legal heirs of the deceased distributor is attached herewith.

6) Accordingly, I hereby request you to replace the ARN code in the MF folios of all the unitholders currently linked to ARN _____ of the abovenamed deceased distributor under all the MF schemes of your fund house with my ARN _____ as his/her nominee / legal heir.

7) I hereby confirm that I have informed all the clients of the deceased distributor through emails / letters about the proposed change of distributor / ARN code in respect of their MF folios and the reason for the same. I have also informed them that I shall be servicing them after the change of distributor code and have shared my contact details and my ARN with them. A specimen of communication sent to the clients is attached herewith along with the list of the investors to whom the same has been sent, mentioning their Folio no. and PAN.

8) I further certify that, I have informed the clients that if they do not wish to transfer their MF holdings/folios under my ARN, and wish to shift to some other mutual fund distributor, 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, and 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.

9) I am aware and agree that in case of any deficiency or discrepancy in the information provided herein and/or the supporting documents submitted herewith, my application is liable to be rejected by the AMC/RTA. I also understand that AMCs / RTA will not be obliged to address any queries or complaints arising due to this ARN Code change request.

10) I hereby declare that the information furnished herein is complete and correct in all respects and I shall forthwith communicate any change in the information furnished to the AMC/RTA.

11) I 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

Name of claimant - _____

Email id - _____

Mobile Number - _____

* Delete whichever is not applicable.

** NOC of other surviving legal heirs of the deceased is not applicable in case the claimant (transferee distributor) is the nominee.

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Checklist of Documents to be submitted:

- 1) ☐ Death certificate of the deceased MFD
- 2) ☐ NOC of other legal heirs (not applicable if the transferee MFD is the Nominee)
- 3) ☐ Sample of email / letter sent to the clients about the proposed change of distributor /ARN
- 4) ☐ Proof of dispatch of letters/e-logs of emails
- 5) ☐ List of investors to whom the intimation has been sent (along with their Folio no. and PAN)