

ANNEXURE C to Business Rules**Reconversion Request Form for conversion of Mutual Fund Units held in Dematerialised form to Statement of Account form
(Pre-printed serial nos.)**

To	Date	DD	MM	YYYY
DP Name (Pre printed)				
DP ID (Pre printed)				
DP Address (Pre printed)				

I/We hereby declare that the below mentioned account may be debited to the extent of my/our reconversion request and equivalent units into Statement of Account form be issued for the same. I/We hereby declare that the below mentioned units are registered in the name(s) of below mentioned person(s).

Client Details								
Client ID								
Name of the account holder(s)	Sole/First holder							
	Second holder							
	Third holder							

Details of Units:

Mutual Fund Name	
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☐
Free Units

☐
Locked-in Units

Sr. No	ISIN	Unit Description	Quantity	Details of Lock-in (if applicable)		Reconversion request number (RRN) (To be filled in by Participant)
				Reason	Release date	

Notes:

1. In case the space is found to be insufficient, an annexure containing the said details in the same format may be attached.
2. Please use separate form for free units and locked-in units

Authorised Signatory(ies)

Holder(s)	Signature(s)
Sole/First Holder	
Second Holder	
Third Holder	

Participant Authorisation

Received the above mentioned Units for reconversion into Statement of Account form:

Client Details									
Client ID									
Name of the account holder(s)	Sole/First holder								
	Second holder								
	Third holder								

The application form is verified with the details of the Client account and certify that the application form is in order. The account has sufficient balances to accept the reconversion request as requested. It is also certified that the Clients' signatures are verified and found in order.

Date:

Forwarded by (Name of the Official) :

(Participant's Stamp)

Signature:

Acknowledgment

Participant's Name, Address and ID

(pre-printed serial no.)

We hereby acknowledge the receipt of a reconversion request for _____ (quantity) of Mutual fund units of _____ (security details) from _____ (Name) having Client ID _____ surrendered on _____ (date) to be delivered in the form of Mutual Fund units represented by Statement of Account.

(Participant's Stamp and Signature)
