

Transaction Form For Existing Investors

This Form is for use by existing Unitholders of all funds of HSBC Mutual Fund only
Please use a separate Form for each Transaction

No. W

Distributor / Broker ARN	
ARN	Prudent CAS Ltd 9992

Sub-Broker Code
BHAVESH MODH 27030

For Office Use Only

Only empanelled Distributors / Brokers will be permitted to distribute Units of HSBC Mutual Fund.

1 UNITHOLDER INFORMATION (MANDATORY)

Folio No.	<input type="checkbox"/> Sole / First Unitholder's Name	<input type="checkbox"/> Mr/Ms/M/s			
Sole / First Unitholder		Guardian	Second Unitholder	Third Unitholder	
PAN** (Mandatory)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Enclosed (✓)	<input type="checkbox"/> PAN Card Copy <input type="checkbox"/> KYC Compliance Proof*	<input type="checkbox"/> PAN Card Copy <input type="checkbox"/> KYC Compliance Proof*	<input type="checkbox"/> PAN Card Copy <input type="checkbox"/> KYC Compliance Proof*	<input type="checkbox"/> PAN Card Copy <input type="checkbox"/> KYC Compliance Proof*	
Date of Birth (Mandatory for Minors)	D D M M Y Y Y Y				

* W.e.f. 01 February, 2008, if the investment is Rs. 50,000 and above, all the applicants need to be KYC Compliant. Please see point 8 under General Instructions.
** Please note that w.e.f. 01 January, 2008, copy of PAN Card is Mandatory for all investors (including Joint Holders, Guardian in case of Minor and NRIs). Please submit photocopy of PAN Card (alongwith the original) for verification, which will be returned across the counter. Please see point 7 under General Instructions.

2 ADDITIONAL PURCHASE (Please ✓ your choice of Scheme / Plan / Option) (See instruction 1-4)

Scheme Name	<input type="checkbox"/> HEF <input type="checkbox"/> HIOF <input type="checkbox"/> HMEF <input type="checkbox"/> HAIF <input type="checkbox"/> HEMF <input type="checkbox"/> HDF <input type="checkbox"/> HIF <input type="checkbox"/> HGF <input type="checkbox"/> HMIP <input type="checkbox"/> HFRF <input type="checkbox"/> HCF <input type="checkbox"/> HLPF <input type="checkbox"/> HFDF	
Plan	<input type="checkbox"/> Regular <input type="checkbox"/> Institutional <input type="checkbox"/> Institutional Plus	
Sub-option	<input type="checkbox"/> Growth* <input type="checkbox"/> Dividend Reinvestment <input type="checkbox"/> Dividend Payout	
Dividend Frequency	<input type="checkbox"/> Daily** <input type="checkbox"/> Weekly** <input type="checkbox"/> Monthly# <input type="checkbox"/> Quarterly <input type="checkbox"/> Fortnightly^	
Investment Amount (Rs.)	DD charges (Rs.)	Net Amount (Cheque / DD amount) (Rs.)
(Rs. in words)		
Mode of Payment	Cheque / DD / Fund Transfer / _____	Cheque / DD No.
A/c. No.	A/c. Type (✓) <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRO* <input type="checkbox"/> NRE* (* For NRI Investors)	
Drawn on Bank		
Branch		
City		

MANDATORY DECLARATION : The details of the bank account provided above pertain to my / our own bank account in my / our name (✓) Yes No. If No, my relationship with the bank account holder is (✓) Spouse Child Parent Relative Sibling Friend Others. Transaction Form without this information is liable to be rejected.

3 REDEMPTION (Please ✓ your choice of Scheme / Plan / Option) (See instruction 1, 2 & 5)

Scheme Name	<input type="checkbox"/> HEF <input type="checkbox"/> HIOF <input type="checkbox"/> HMEF <input type="checkbox"/> HAIF <input type="checkbox"/> HEMF <input type="checkbox"/> HDF <input type="checkbox"/> HIF <input type="checkbox"/> HGF <input type="checkbox"/> HMIP <input type="checkbox"/> HFRF <input type="checkbox"/> HCF <input type="checkbox"/> HLPF <input type="checkbox"/> HFDF <input type="checkbox"/> HFTS <input type="checkbox"/> HINF	
Plan	<input type="checkbox"/> Regular <input type="checkbox"/> Institutional <input type="checkbox"/> Institutional Plus	
Sub-option	<input type="checkbox"/> Growth <input type="checkbox"/> Dividend Reinvestment <input type="checkbox"/> Dividend Payout	
Dividend Frequency	<input type="checkbox"/> Daily** <input type="checkbox"/> Weekly** <input type="checkbox"/> Monthly# <input type="checkbox"/> Quarterly <input type="checkbox"/> Fortnightly^	
<input type="checkbox"/> Amount (Rs. in figures)	<input type="checkbox"/> OR <input type="checkbox"/> No. of Units	<input type="checkbox"/> All Units
(Rs. in words)		

4 SWITCH (Please ✓ your choice of Scheme / Plan / Option)

Switch From	Switch To	
Scheme Name	Scheme Name	
Plan	Plan	
Option	Option	
Sub-option	Sub-option	
Dividend Frequency	Dividend Frequency	
<input type="checkbox"/> Amount (Rs. in figures)	<input type="checkbox"/> OR <input type="checkbox"/> No. of Units	<input type="checkbox"/> All Units

* Default Sub-option, if not ticked. The Dividend Option (Reinvestment or Payout) chosen will be applied to all existing Units held in that Scheme in the destination Folio.
** Applicable for Institutional / Institutional Plus Options of HCF, HFRF-ST, HIF-ST, HIF-IP and HLPF only. # Applicable for Institutional / Institutional Plus Options of HCF, HFRF-ST, HIF-ST, HIF-IP, HLPF and Regular / Institutional Plus Option of HFDF only. ^ Applicable for Institutional Plus Option of HFDF only.
Please note that dividend payout is available only in the Monthly Sub-Option.

5 CHANGE OF BANK MANDATE

A/c. No.	A/c. Type (✓) <input type="checkbox"/> Current <input type="checkbox"/> Savings <input type="checkbox"/> NRO* <input type="checkbox"/> NRE* (* For NRI Investors)
Bank Name	
Branch Address	
MICR Code	RTGS IFSC Code For Rupees One lakh and above
	NEFT IFSC Code For less than Rupees One lakh

▲ (9 digit number next to your Cheque No.) Please also provide a cancelled cheque leaf of the same bank account as mentioned above. Mentioning your RTGS IFSC Code or NEFT IFSC Code, as applicable, will help us transfer the amount to your bank account quicker, electronically.

...continued overleaf ⇨

ACKNOWLEDGEMENT SLIP (To be filled by the investor)

No. W

Note: This Acknowledgement Slip is for your reference only. Information provided on the form is considered final.

Folio No.	Name
Received from the above mentioned investor the following :	
<input type="checkbox"/> Additional Purchase Scheme	Total Amount (Rs.)
Cheque No(s)	Drawn on
<input type="checkbox"/> Redemption or <input type="checkbox"/> Switch Amount (Rs.)	OR Units
<input type="checkbox"/> STP <input type="checkbox"/> SEP <input type="checkbox"/> Change of Bank Mandate <input type="checkbox"/> Change of Address <input type="checkbox"/> Nomination / Cancellation of Nomination	

Signature, Stamp & Date

6 CHANGE OF ADDRESS / E-MAIL COMMUNICATION

New Address for correspondence : Address is (Please ✓) : Home Office

City	Pin Code‡
State	Country‡
Phone	Extn. Fax
O	Mobile
R	

Receive Account Statement, Annual Reports and other information instantly by e-mail* I/We wish to receive updates via SMS on my mobile (✓)

e-mail _____

I / We wish to receive the above by email I / We do not wish to receive the above by email. * Note : Where the investor has not opted for any option or has opted for both options, the application will be processed as per the default option, i.e., receive the account statement, annual reports and other correspondence by e-mail and receive SMS updates on Mobile. ‡ Please refer to point 9 under General Instructions.

7 SYSTEMATIC ENCASHMENT PLAN (SEP) (For investors in scheme(s) where applicable) Registration Cancellation

Scheme Name HEF HIOF HMEF HAIF HTSF HDF HEMF HIF HGF HMIPR HMIPS HFRF HCF HLPF HFDF

Sub-option Growth Dividend Reinvestment Dividend Payout

Option Regular Institutional Institutional Plus

Frequency (✓) Monthly Quarterly

Withdrawal Options Fixed Amount Capital Appreciation

Period of enrolment From MM / YY / YY To MM / YY / YY

Withdrawal Amount Rs. _____ Redemption amount will equal appreciation

Note : SEP will be processed on the 1st Business Day of the month. (Minimum withdrawal amount is Rs. 1000 and in multiples of Re.1/- thereafter)

8 SYSTEMATIC TRANSFER PLAN (STP) (For investors in scheme(s) where applicable) Registration Cancellation

Transfer from

Scheme Name HIF HGF HMIP HFRF HCF HLPF HFDF

Plan _____

Option Regular Institutional Institutional Plus

Sub-option Growth Dividend Reinvestment Dividend Payout

Dividend Frequency Daily** Weekly** Monthly# Quarterly Fortnightly^

Transfer to

Scheme Name HEF HIOF HMIP HMEF HAIF HTSF HFDF

Option Growth Dividend Reinvestment Dividend Payout

Amount per instalment Rs. _____

(Minimum transfer amount Rs.1000/- and in multiples of Re.1/- thereafter)

STP Date (✓) 3rd 10th 17th 26th All Dates

Instalment commencing From MM / YY / YY To MM / YY / YY

** Applicable for Institutional / Institutional Plus Options of HCF, HFRF-ST, HIF-ST, HIF-IP and HLPF only. # Applicable for Institutional / Institutional Plus Options of HCF, HFRF-ST, HIF-ST, HIF-IP, HLPF and Regular / Institutional Plus Option of HFDF only. ^ Applicable for Institutional Plus Option of HFDF only.

9 NOMINATION / CANCELLATION OF NOMINATION (To be filled in by Individual(s) applying singly or jointly)

I/We _____ and _____

_____ (strike out which is not applicable) do hereby nominate the person(s) more particularly described hereunder / and / cancel the nomination made by me / us on the _____ day of _____ in respect of units held by me / us under Folio No. _____

Name and Address of Nominee(s) / Guardian (in case Nominee is a Minor)

	First Nominee	Second Nominee	Third Nominee
Name			
Address			
Allocation %			
Date of Birth (in case nominee is a minor)			

10 DECLARATION AND SIGNATURES

The Trustees, HSBC Mutual Fund Having read and understood the contents of the Offer Document(s) and Addenda of the Scheme(s) issued till date, I / We hereby apply to the Trustees of HSBC Mutual Fund for units of the Scheme / Plan / Option as indicated above and agree to abide by the terms, conditions, rules and regulations of the Scheme. I / We have understood the details of the Scheme and I / We have not received nor been induced by any rebate or gifts, directly or indirectly, in making this investment. I / We hereby authorise HSBC Mutual Fund, its Investment Manager and its Agents to disclose details of my / our investment to my/our bank(s) / HSBC Mutual Fund's Bank(s) and / or Distributor / Broker / Investment Advisor and to verify my / our bank details provided by me / us. *I/We confirm that I am/we are Non-Residents of Indian Nationality / Origin and that the funds are remitted from abroad through approved banking channels or from my / our NRE / NRO / FCNR Account. I / We confirm that the details provided by me / us are true and correct. I / We hereby declare that the amount being invested by me/us in the Scheme(s) of HSBC Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any other applicable laws or any Notifications, Directions issued by any governmental or statutory authority from time to time.

*Applicable to NRI Date: _____

SIGNATURE(S)	Sole/First Unitholder/Guardian/POA	
	Second Unitholder/POA	
	Third Unitholder/POA	

Applications from investors resident in USA or Canada shall be rejected.

Default options will be applied in cases where the information provided is either ambiguous or has any discrepancy.

INSTRUCTIONS

GENERAL INSTRUCTIONS : 1. This Form is for use by existing unitholders of all funds of HSBC Mutual Fund only. Please use a separate Form for each transaction. 2. Investors should refer to the Offer Document(s), Addenda & KIM of the respective Scheme(s) carefully before filling the Application Form. 3. Please refer to the Offer Document(s) for cut-off timings, available product features, add-ons and dividend frequency, minimum additional purchase amounts etc. 4. Additional Purchases - Cheque/DD must be drawn in name of the Scheme or its abbreviation as applicable and crossed 'Account payee only'. Outstation cheque will not be accepted. 5. Bank charges for demand drafts will be borne by the AMC and will be limited to the bank charges as for amount Upto Rs.10,000/-, DD Charges are at actuals, subject to a maximum of Rs. 50/- and for amount above Rs.10,000/- at Rs. 3.50/- per Rs. 1000/-. Minimum Rs 50/- and Maximum Rs 12,500/-. The AMC will not entertain any request for refund of demand draft charges. Outstation cheques / outstation demands draft will not be accepted. 6. Redemption amounts should not be less than minimum repurchase amounts. 7. As per Securities and Exchange Board of India (SEBI) Circular dated 27 April 2007 and letter dated 25 June 2007, Permanent Account Number (PAN) has been made the sole identification number for all participants investing in the securities market, irrespective of the amount of investment. With effect from 1 January 2008, for all applicable transactions, investors will need to submit a photocopy of their PAN card, which shall have been either verified with the original or verified/ attested by AMFI registered distributors, bank managers or judicial authorities. The PAN requirements will be applicable to all joint applicants as well as the Guardian, in case of applications by a Minor. Accordingly, submission of Form 49A and/ or declaration in Form 60/61 will not be accepted. Hence, all applicable transactions not accompanied by a duly verified/ attested copy of PAN card are liable to be rejected. 8. KYC is mandatory under the Prevention of Money Laundering Act, 2002 for all applications for subscriptions of Rs. 50,000 and above. This will be applicable for investments from individual investors including joint holding / institutional customers / other non-institutional investors / investments through power of attorney holders / investments of minor through guardian. The KYC requirements can be completed by filling up the prescribed form and submitting the same along with the other requisite details / proof (attested true copies of supporting documents relating to proof of identity and address or verification with the original) to a designated Point of Service (PoS) of CDSL Ventures Limited (CVL). Any subsequent change to Address, Pin Code, Country, Nationality, Occupation, Income details, Date of Birth, Proof of Identity need to be communicated to CVL ONLY. For details of the process and list of PoS, please visit our website http://www.assetmanagement.hsbc.co.in. In case investor has completed the KYC Compliance process, without submitting a copy of PAN Card, he/she must forthwith provide a copy PAN Card alongwith the copy of KYC compliance acknowledgment to CVL. In view of this, with effect from February 01, 2008 each investor (including Joint unit holder) who wishes to invest an amount of Rs. 50, 000/- or more need to obtain this KYC confirmation letter from CVL and quote the same in the application form for investing in the schemes of Mutual Fund. 9. Please note that information sought will be obtained from CVL database and information in the AMC records will be overwritten.

INSTRUCTIONS FOR NOMINATION : 1. Applicants applying for Units singly / jointly can make a nomination at the time of initial investment or during subsequent investments. 2. The nomination can be made only by individuals applying for / holding units on their own behalf singly or jointly. Non-individuals including society, trust, body corporate, partnership firm, Karta of Hindu Undivided Family, holder of Power of Attorney cannot nominate. If the units are held jointly, all joint holders will sign the nomination form. 3. Maximum number of Nominees in the given folio limited to 3. Also, the percentage of allocation / share in favour of each of the Nominee should be in whole numbers without any decimal making a total of 100 percent. 4. A minor can be nominated and in that event, the name, address and PAN of the Guardian of the minor nominee (in case the minor does not have PAN) shall be provided by the Unitholder. 5. The Nominee shall not be a trust, (other than a religious or charitable trust) society, body corporate, partnership firm, Karta of Hindu Undivided Family or a Power of Attorney holder. A non-resident Indian can be a Nominee subject to the exchange controls in force, from time to time. Nomination can also be made in favour of the Central Government, State Government, Local Authority, any person designated by virtue of his office or a religious or charitable trust. 6. Nomination in respect of the Units stands rescinded upon the transmission of Units. 7. Transmission of Units in favour of a Nominee shall be valid discharge by the AMC / Mutual Fund / Trustees against the legal heir. 8. The cancellation of nomination can be made only by those individuals who hold Units on their own behalf singly or jointly and who made the original nomination. 9. On cancellation of the nomination, the nomination shall stand rescinded and the AMC / Mutual Fund / Trustees shall not be under any obligation to transmit the Units in favour of the Nominee.