

SYSTEMATIC TRANSFER PLAN / SYSTEMATIC WITHDRAWAL PLAN

Form - 4

Application No.

Distributor ARN/RIA#	ARN Name	Sub-Distributor ARN/RIA#	Internal Sub-Broker/Employee Code	EUIN
RN/RIAARN-167174		ARN		E326136
reby confirm that the EUIN box has beer any interaction or advice by the en standing the advice of in-appropriatenes tor and the distributor has not charged ar	n intentionally left blank by me/us as this is an "execution-only" transaction ployee/relationship manager/sales person of the above distributor s, if any, provided by the employee/relationship manager/sales person of t	on Of he First Holder	Second Holder	Third Holder
EXISTING UNIT HOLDER INFORMATION				
Name of the First Holder _		Folio	No.	
PAN/PERN (mandatory) Enclosed PAN/PERN Proof KYC Complicane				
SYSTEMATIC TRANSFER PLAN (STP) (Please mention the PAN/PERN without which, this application form will be considered incomplete and is liable to be rejected.)				
Please arrange for STP with From Scheme	n the following options		Plan	
Option Growth / Growt	Dividend-Payout / Dividend - Reinvest D	Dividend Frequency (In case of Dividen		
Option Growth / Dividend-Payout / Dividend - Reinvest Dividend Frequency (In case of Dividend option)				
Fixed Amount (d Transfer Plan (Minimum Rs.1000)		iation (Minimum Rs.1000)
STP Frequency: Wee	<u> </u>	Except Daily Dividend		se of Growth Option
STP Amount : STP Dates : 1st STP Period: Start: End:		1st 7 th 14 th 21st Start: D D M M Y End: D D M M Y	STP Dates : 1st STP Period: Star	
SYSTEMATIC WITHDRAWAL PLAN (SWP) (Please mention the PAN/PERN without which, this application form will be considered incomplete and is liable to be rejected.)				
Please arrange for SWP with the following options - Fixed Amount				
Rs. (in figures) Rs. (in words)				
SWP Frequency: \square Monthly \square Quarterly SWP Date: \square 1 st \square 7 ^m \square 14 th \square 21 st \square 28 th				
SWP Period: Start: M M Y Y End: M M Y Y				
From Scheme				
Plan Option				
Dividend Frequency (In case	of Dividend option)			
terms, conditions, rules and not designed for the purpose Laws or any other applicable by any rebate or gifts, directl is not completed by me / us 1 NAV prevailing on the date of su The ARN holder has disclosed amongst which the Scheme is b For NRIs only: 1 / We confirm / our Non-Resident External / No	ood the contents of the Scheme Information Do- regulation governing the Scheme(s). I / We hereby deck- e of the contravention of any Act, Rules, Regulations, N- laws enacted by the Government of India from time to y or indirectly in making this investment. I / We confirm to the satisfaction of the Mutual Fund, I / We hereby auth ch redemption and undertake such other action with such fund d to me/us all the commissions (in the form of trail com- eing recommended to me / us. that I am / we are Non Residents of Indian nationality / on-Resident Ordinary/FCNR account.	are that the amount invested in the Sotifications or Directions fo the provisitime. I / We have understood the deta that the funds invested in the Scheme orize the Mutual Fund, to redeem the fids that may be required by the Law. Immission or any other mode), payable for the first provided in the scheme of the first provided in the scheme of the first provided in the scheme of the scheme of the first provided in the Scheme of the sch	cheme(s) is through legitimate source ons of the Income Tax Act, Anti Mone is of the Scheme(s) and I / We have (s), legally belong to me / us. In the e unds invested in the Scheme(s), in favo o him for the different competing Sch	es only and does not involve and by Laundering Laws, Anti Corruptin not received nor have been induct event "Know Your Customer" proces our of the applicant, at the applicable terms of various Mutual Funds fro
First / Sole Applican	t / Guardian Second Applicant	Third Ap	olicant	POA Holder
X				
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