

DISTRIBUTOR / BROKER INFORMATION

Distributor ARN Code	Sub Distributor ARN	Sub Agent Code /Bank Branch Code/ Internal Code	*Employee Unique Identification Number (EUIIN)	RIA Code**
ARN- (ARN stamp here)	ARN-			

*Please sign alongside in case the EUIIN is left blank/not provided. I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or not with standing the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

1. INVESTOR'S DETAILS

Folio Number Pan

NAME Mr. / Ms. / M/s. FIRST MIDDLE LAST

Scheme Name:

Plan: Option: Date:

2. ADDITIONAL PURCHASE REQUEST

I/We would like to purchase additional units in above scheme

(₹) (In figures):

(₹) (In words):

3. REDEMPTION REQUEST

I/We would like to redeem units from above scheme

(₹) (In figures):

(₹) (In words):

Or Units: Or Entire Units (Please tick)

Please credit redemption payment to my registered Bank account Number Bank Name

Please note, if balance in portfolio is less than the redemption request then all units or entire balance shall be redeemed.

4. SWITCH REQUEST

I/We would like to switch from above scheme

(₹) (In figures):

(₹) (In words):

Number of units: Tick to switch all units

to (Scheme)

Plan:

OPTION Growth IDCW

IDCW Reinvest Payout

SIGN HERE 

Primary holder / Guardian / POA 1st Joint Holder 2nd Joint Holder