

Request for Systematic Withdrawal Plan

Date: _____

Folio: _____

Amt Rs. _____

Scheme: _____

Option: _____

Start Date

End Date



REQUEST FOR SYSTEMATIC WITHDRAWAL PLAN

New Registration Cancellation

Date: _____

I/We wish to opt for the Systematic Withdrawal Plan from the ICICI Prudential _____
 _____ Plan/Fund _____ option

for Rs. _____ per month/quarter.
 (Rupees _____ only)

Start Date

End Date

Folio No.



 (Name of the First Holder)

 (Signature)

 (Name of the Second Holder)

 (Signature)

 (Name of the Third Holder)

 (Signature)



