

Systematic Withdrawal Plan

KYC acknowledgement is man	datory for all investors	w.e.f. 01/01/2011. However in the	he case of Micro SIP/Pru	chase of an individual inves	s only) which can be downloded from our website. tor (if the total amount of investment pproved document can be accepted.	
Folio No		Distributor's ARN & N	Name Sul	b-broker Code	Sub-broker's ARN	
Upfront commission shall be paid	directly by the investor	to the AMFI-registered distributors ba	ased on the investors' assess	sment of various factors include	ding services rendered by the distributor.	
Name of First/Sole Applic	ant Gender* ☐ Male	e □ Female □ Others				
			Mobile*		PIN Code*	
E-Mail						
Name of Second Applican	nt Gender* 🗌 Male [□ Female □ Others			PIN Code*	
Name of Third Applicant	Gender* □ Male □	Female ☐ Others				
			Mobile*		PIN Code*	
Permanent Account Numbe	r (PAN)*	Aadhaar Card Number	* / PEKRN	Central KYC Numbe	r CKYC Proof attached (Mandatory)	
First/Sole Applicant/Guardian				'Mandatory		
Second Applicant				* War		
Third Applicant						
You will receive an account	statement by e-mail	. If you wish to receive a physic	cal statement please ti	ick 🗆		
Scheme Name				☐ Fixed Amount Rs	OR Capital Appreciation	
Plan: □ Regular □ Direct □ C	Others:	Option: Income Distribution cum	Capital Withdrawal (IDC	W) □ Payout □ Reinvestm	ent □ Transfer □ Growth □ Bonus	
SWP Amount		SWP Period □ 1 y	year □ 2 years □ 3 yea	ars □ 5 years □ 10 years	☐ 15 years ☐ Till further notice*	
SWP Frequency □ Monthly	•				will be processed on 1st working	
The minimum SWP amount is subject to minimum redemptoon criteria. Kindly refer to respective SID for complete details. SWP Starting SWP Ending OR I till further notice						
SWP Period 0 1		OR OR OR	Till further notice*	5 0 Request Date	DDMMYYYY	
(*The end date – 01/12/2050 as end	d date for not specified by	the investor. This will be considered in b				
		Tur 	n overleaf for De	claration & ÆSigna	ature (Mandatory)	
Acknowledgement	Reques	t Date: DDMMY	YYY	Time Stamp/Seal		
Folio No		☐ Fixed Amount Rs	OR Capital Appreciation			
Scheme Name: SWP Frequency Monthly Quarterly (Minimum amount Rs 1,000 Minimum No of installments 6) SWP will be processed on 1st working day of the month/quarter						
Contact No. 1860 425 +91 40 2345 2215 (NR		SMS SFUND to	56767		vices@sundarammutual.com vices@sundarammutual.com	
www.sundarammutual	com				Sundaram Mutual Fund	



Systematic Withdrawal Plan

Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document/addenda issued to the SID and KIM till date • hereby apply for units under the scheme(s) as indicated in the application form • agree to abide by the terms, conditions, rules and regulations of the scheme(s) • agree to the terms and conditions for Auto Debit • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment • do not have any existing Micro SIPs/investments which together with the current application will result in the total investments exceeding Rs. 50,000 in a financial year or a rolling period of twelve months (applicable for PAN/Aadhar exempt category of investors). The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

Applicable to NRIs only: Please (✓) ☐ I/We confirm that I am/We are Non-Resident of Indian Nationality/Origin and I/We hereby confirm that the funds for subscription have been remitted from abroad through normal banking channels or from funds in my/our Non-Resident External/Ordinary Account/FCNR Account on a ☐ Repatriation Basis ☐ Non-Repatriation Basis.

I/We hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. I/ We further agree not to hold Sundaram Asset Management, its sponsor, their employees, authorised agents, service providers, representatives of the distributors liable for any consequences/losses/costs/damages in case of any of the above particulars being false, incorrect or incomplete or in case of my/our not intimating/delay in intimating any changes to the above particulars. I/We hereby authorise Sundaram Asset Management to disclose, share, remit in any form, mode or manner, all/any of the information provided by me/ us, including all changes, updates to such information as and when provided by me/us, any Indian or foreign governmental or statutory or judicial authorities/agencies, the tax/revenue authorities and other investigation agencies and SEBI registered intermediaries without any obligation of advising me/us of the same. I/We hereby agree to provide any additional information/documentation that may be required in connection with this application.

Signature						
First / Sole Applicant / Guardian						
Second Applicant						
Third Applicant						
Paguast Data	-					

Contact No. 1860 425 7237 (India) +91 40 2345 2215 (NRI)

www.sundarammutual.com

SMS SFUND to 56767

E-mail: customerservices@sundarammutual.com (NRI): nriservices@sundarammutual.com

Sundaram Mutual Fund