SUNDARAM MUTUAL

Systematic Withdrawal Plan

Folio No / | Broker Code | Sub-Broker Code

Name of First/Sole Applicant (Please use capital Letters)

E-Mail | Mobile No

Scheme Name | ☐ Fixed Amount Rs._____ OR ☐ Capital Appreciation

☐ Regular Plan ☐ Institutional Plan ☐ Super Institutional Plan | ☐ Dividend Payout ☐ Dividend Re-Investment ☐ Dividend Sweep ☐ Growth ☐ Others.....

SWP Amount | **SWP Period** ☐ 1 year ☐ 2 years ☐ 3 years ☐ 5 years ☐ 10 years ☐ 15 years ☐ Perpetuity ☐ Others.....

SWP Frequency ☐ Monthly ☐ Quarterly

SWP Starting M M Y Y Y Y

SWP will be processed on 1st working day of the month/quarter

Declaration: I/We • having read and understood the contents of the Statement of Additional Information/Scheme Information Document • agree to abide by the terms, conditions, rules and regulations of the scheme • agree to terms & conditions of PIN agreement • agree to receive account statement/communication by Email • have not received nor been induced by any rebate or gifts, directly or indirectly in making this investment. 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.

Request Date D D M M Y Y Y Y

Signature		
First Applicant	Second applicant	Third Applicant

Acknowledgement **Request Date:** D D M M Y Y Y Y

Time Stamp/Seal

Folio No /

Scheme Name: Plan.....Option.....

SWP Rs | Period | From M M Y Y Y Y ☐ Monthly ☐ Quarterly