Redemption Transaction Form

SELECT SIF
— Brought to you by Sundaram Mutual —

Redemption Transaction Form: ☐ I would like to redeem as per particulars given below

Folio No.

ISC's Signature & Stamp

*Mandatory

Name of First/Sole Applicant (Name as per PAN card)

FIRST MIDDLE LAST Mobile* DOB/Date of incorporation* D D M M Y Y Y Y

E-Mail*

Please tick the Family Code for the Mobile Number and Email ID provided
Mobile: ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian **Email:** ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian

Name of Second Applicant (Name as per PAN card)

FIRST MIDDLE LAST Mobile* DOB/Date of incorporation* D D M M Y Y Y Y

E-Mail*

Please tick the Family Code for the Mobile Number and Email ID provided
Mobile: ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian **Email:** ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian

Name of Third Applicant (Name as per PAN card)

FIRST MIDDLE LAST Mobile* DOB/Date of incorporation* D D M M Y Y Y Y

E-Mail*

Please tick the Family Code for the Mobile Number and Email ID provided
Mobile: ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian **Email:** ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian

	Permanent Account Number (PAN)*	**PEKRN**	**Central KYC Number** ☐ CKYC Proof attached (Mandatory)
First/Sole Applicant/Guardian			
Second Applicant			
Third Applicant			

☐ Amount..... ☐ Units..... Strategy Name: ..... Plan ☐ Direct ☐ Regular

Options: ☐ **Income Distribution cum Capital Withdrawal (IDCW)** ☐ Payout ☐ Reinvestment ☐ **Growth**

#Bank Account No:_____ Bank Name: _____

(#Please specify the bank details in which you wish to receive the redemption proceeds. Kindly note that this bank account should be one of the registered bank account in the folio else by default the redemption proceeds will be credited into the default bank account. Also this cannot be treated as change of bank mandate.)

(If the balance in the account does not cover the amount in this request, I/We authorise you to close the account and send the available amount)

Legal Entity Identifier (Mandatory) - (Only for Non-Individuals including HUF)

Validity Date of LEI D D M M Y Y Y Y

Since you propose to go ahead with redeeming your investments, please let us know the reasons that prompted your decision. Was it because you were:

☐ Intending to Invest in an Asset – House/Car etc
☐ In need of Immediate funds
☐ Interested in similar Strategy from other SIFs
☐ Disappointed over quality of our Service
☐ Others, please specify.....

We do respect your decision and we thank you for choosing Select SIF as your trusted investment partner all this while.

..... Signature of the sole/first unit holder/guardian

..... 2nd unit holder

..... 3rd unit holder

Investments in Specialized Investment Funds involve relatively higher risk, including potential loss of capital, liquidity risk, and market volatility. Please read all investment strategy related documents carefully before making investment decisions.

Acknowledgement

☐ Redemption

Request Date: D D M M Y Y Y Y

Time Stamp/Seal

Folio No | Fund:

Plans: ☐ Regular ☐ Direct | Amount/Units

Options: **IDCW** ☐ Payout ☐ Re-Investment ☐ **Growth**