عد_ا	SUNDARAM MUTUAL
GT	SUNDAKAM MUTUAL

Systematic Withdrawal Plan

KYC acknowledgement is mandatory for all investors		UBO) information (for non-individuals only) which can be downloded from our website. chase of an individual investor (if the total amount of investment PAN proof other approved document can be accepted.		
Folio No	Distributor's ARN & Name Sub ARN-87761	o-broker Code Sub-broker's ARN		
Upfront commission shall be paid directly by the investor to the AMFI-registered distributors based on the investors' assessment of various factors including services rendered by the distributor.				
Name of First/Sole Applicant (capital Letters)				
Name of Guardian in case First / Sole Applicant is a Minor (capital Letters)				
E-Mail Mobile No				
You will receive an account statement by e-mail. If you wish to receive a physical statement please tick 🗆				
Scheme Name				
Plan: Regular Direct Others:				
SWP Amount SWP Period 1 year 2 years 3 years 5 years 10 years 15 years Till further notice*				
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				
SWP Period SWP Starting S	WP Ending OR ☐ Till further notice*			
0 1 M M Y Y 0	0 1 M M Y Y 0 1 1 2 2 0	3 1 Request Date		
(*The date may be taken as 01/12/2031 in case of a requirement of an input for a specific date in the system) 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 Signature				
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 exempt category of investors). The ARM holder has disclosed to mefus all commissions 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. First / Sole Applicant / Guardian				
Applicable to NRIs only: Please (/) IWe 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 Non-Resident External/Ordinary Account/FCNR Account on a Repatriation Basis Non-Resident External/Ordinary Account/FCNR Account/FCNR Account on a Repatriation Basis Non-Resident External/Ordinary Account/FCNR Accoun				
Whe hereby declare that all the particulars given herein are true, correct and complete to the best of my/our knowledge and belief. If 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. IWe 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, to any Indian or foreign governmental or statutory or judicial authorities/agencies, the tav/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.				
Acknowledgement Request Date: DDMMYYYYY Time Stamp/Seal				
Folio No Folio No	☐ Fixed Amount Rs. OR ☐ Capital Appreciation			
Scheme Name: Plan: Regular Direct Others Options: Dividend Payout Re-Investment Sweep Growth Bonus	SWP Frequency Monthly Quarterly (Minimum amount Rs 1,000 Minimum No of installments 6)			
Toll Free: 1800 103 7237 (India) +91 44 49057300 (NRI)	SMS SFUND to 56767	E-mail: customerservices@sundarammutual.com (NRI): nriservices@sundarammutual.com		
www.sundarammutual.com		Sundaram Mutual Fund		