SYSTEMATIC WITHDRAWAL PLAN (SWP)



Stamp & Signature

THE APPLICATION	FORM SHOU	JLD BE F	ILLED I	N BLO	CK LETTE	RS ON	ILY.																			
Distributor ARI		-Distribu	tor AR	N I	nternal S	Sub-Bro	oker /	Sol ID	E	mploye	ee Co	ode	_	EUI	IN		RI	A CO	DE^	S	erial	No., I	Date	& Tin	ne St	amp
ARN-1812 Upfront commission sho		tly by the in	vestorto	the AMFI	registered	l distribu	tor hase	d on the	investor	220220	ment o	fvario	E s facto	rs incl	udina	the se	ervice	renda	ared h	, the di	strihut	or				
^ I/We, have invested in under Direct Plan of all s	n the scheme(s) schemes of Axis I	of Axis Mu Mutual Fun	tual Fund d, to the	d under E above m	Direct Plan. entioned S	. I/We he EBI Regi	ereby giv stered In	re my/ou nvestmen	ir conse nt Advise	nt to sha r:	re/pro	vide th	e transc	action	s data	feed/	port	folio l	nolding	gs/ NA	V etc.	in resp	ect of	my/ou	rinves	tments
this transaction is employee/relationship notwithstanding the employee/relationship in the employee/relationship is emplo	executed wit	ibutor/sub broker or						Sec	ond Applicant Third Ap					d App	Power of Attorney Holder						older					
TRANSACTION	CHARGES	FOR A	PPLIC	OITA	NS ROL	JTED '	THRO																			
I confirm that In case the subscript	ion (lumpsum	n) amoun	tis ₹ 10	0.000/-	or more	and voi	ur Distr	ibutor h	— nas opt	nfirm ed to re	ceive	Trans	action	Cha	raes.	₹ 15	0/-	(for fi	rst tin	ne mu	ıtual t	und ir	vest	or) or	₹ 100)/- (fo
investor other than fi Applicant		al tund inv	/estor) v	will be d	educted t	trom the	e subsc	ription	amour	t and p	aid to	the di	stribut		_{nits w} Folio			ed ag	gainst	the b	aland	e amo	ount	investe	ed.	
Sole / 1st Unitho	lder 🗆															110	,	+	+	+			+		+	+
(as in PAN Card / KYC Guardian's Nam	- '			1							1	A A : J	dle N	l auda a		+	+	<u> </u>	<u> </u>			Laubi	NI.		+	
(as case of minor) 1st Holder		1 - 4 0 1		1 1	rst Natr	nd Hole	der 🗆			01	Δ !:		alejin	Tarrie		l Ho	ldei	 r	<u> </u>			Last	\pm	Пе	+	
PAN		1st Appli			PA	'N					Applic				PAN						31	d Appl	Icant			
2 SWP DETA	AILS# (To be	submitted	d atleas	t 15 day	s before	1st due	date. F	Please (1	√) the (appropr	iate o	ption)														
SWP From Scheme	е																									
Plan	☐ Re	egular			Direct																					
Option	☐ Gı	rowth			Dividend	Payout	† [_ Di	vidend	l Re-in	/estm	ent		Во	nus											
Withdrawal Amo	unt ₹		in	figures		₹	₹						in	word	ls											
Withdrawal Frequ	uency 🗌 M	Nonthly (minim	um 6)		Quarte	erly (m	ninimu	m 4)				Half \	Yearl	y (m	inim	ıum	4)		□ Y	early	(min	imu	ım 2)		
Withdrawal Perio	od From			То			OR	No	o. of i	nstalln	nents															
SWP Date* *In the event that # Units completed	,	is a ho	, .		ndrawal		d be a		on th				,	VP fa	cility	. Mir	nim	um i	nstal	llmer	nt ₹ 5	500/-	mu	ltiple	₹1/	
3 DECLARAT	ION AND	SIGN	ATUR	ES																				-		
Having read and under I/We hereby declare the the provisions of the Inc by any rebate or gifts, d satisfaction of the Multi undertake such other a Schemes of various Multi undertake such other a Schemes of various Multi	at the amount in come Tax Act, Ar directly or indirectual Fund, (I/we I	ivested in th nti Money L ctly in maki hereby aut funds that r	ne schem aunderi ng this in horize th	ne is throung Laws, and La	ugh legitim Anti Corru t. I/We cor I Fund, to	nate sour option Lan ofirm that redeem	ce only o ws or an t the fun- the fund	and does by other a ds invest ds investe has disc	not inversed in the	olve desi le laws e Scheme Scheme	gned for enacted e, lega e, in for	or the p d by the lly belo avour o	ourpose Gover ongs to r f the ap	of the nmen me/us oplicat	control t of Inc . In eve nt, at t	aventi dia fro ent "K he ap	ion com tin know oplice	of any / me to t Your (able N	Act, Ru time. I/ Custon IAV pre	les, Re /we ha ner" pi evailin	gulation ve not rocess g on the table to	receive is not c he date	otifica ed no ompl of su or the	tions or r have be eted by uch red	Direction Direct	ctives of nduced as to the on and
First / Sole A	First / Sole Applicant / Guardian					Second Applicant To be signed by All Applica											Applicant				PO	POA Holder				
*INSTRUCTIO	ON & INE	ODM/	TIOI	NI .	то ре	signed	з бу Аі	ГАрріі	canis	TITIOG	e or c	pperai	ion is	JOIL	11											
Please refer the					l Scheme	inform	nation o	locume	ents an	d State	nent	of ada	litiona	ıl info	rmati	ion o	of the	e resr	ectiv	e Sch	emes	(s) for	App	licable	NAV	/. Risk
Factors, Load S 2. Contingent De	Structure and a	other info	rmatio	n on the	Scheme	(s).																(-)	1-1-			,
3. The AMC reser	rves the right to	o accept S	SWP ap	plication	ns of diffe	erent an	nounts,	, dates c																		
 You can choos withdrawn from 	e to discontine m the account	ue any of or the ho	these f Idings t	acilities fall belo	by giving w the SW	g 15 da Pamou	ys prio ınt.	r notice	in writ	ing to c	ur Re	gistra	r Karvy	y and	it will	l tern	nina	te au	toma	tically	if all	the Ur	nits c	ıre liqu	vidate	ed, or
5. The Default bo available at w			ned in t	he abov	ve folio w	ould be	e consid	dered fo	or such	credits	. Inco	ase yo	u wish	to ch	ange	the	ban	k acc	ount	fill in	a Cho	ange c	of Ba	nk Acc	count	form
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Folio No.						Inve	estor N	Vame																		
From Scheme																										

Frequency

Amount