



IDBI Asset Management Ltd.

CIN: U65100MH2010PLC199319

Mafatlal Centre, 5th Floor, Nariman Point, Mumbai - 400 021 Website: www.idbimutual.co.in

**Systematic Investment Plan (SIP) / Systematic Transfer Plan (STP) /
Systematic Withdrawal Plan (SWP) Cancellation Request Form**

Folio:		Date:	
PAN No.:			
Sole / First Investor Name:			

<input type="checkbox"/> SIP Cancellation	DC Number: (For Office Use) _____
Scheme Name: _____	
Plan _____	Option _____
SIP Amount: (Rs.) _____	Frequency : <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
SIP Date : <input type="checkbox"/> 1st / <input type="checkbox"/> 5th / <input type="checkbox"/> 10th / <input type="checkbox"/> 15th / <input type="checkbox"/> 20th / <input type="checkbox"/> 25th	
SIP Cancellation Effective Date : ____ / ____ / ____	
Investor Bank Name : _____	
Investor Account No.	<input type="text"/>

<input type="checkbox"/> STP Cancellation
From Scheme: _____
To Scheme: _____
STP Amount: (Rs.) _____
Frequency : <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
STP Date : <input type="checkbox"/> 1st / <input type="checkbox"/> 5th / <input type="checkbox"/> 10th / <input type="checkbox"/> 15th / <input type="checkbox"/> 20th / <input type="checkbox"/> 25th
STP Cancellation Effective Date : ____ / ____ / ____

<input type="checkbox"/> SWP Cancellation
Scheme Name: _____
SWP Amount: (Rs.) _____
Frequency : <input type="checkbox"/> Monthly
SWP Date : <input type="checkbox"/> 25th
SWP Cancellation Effective Date : ____ / ____ / ____

INSTRUCTIONS

- Please provide separate requests in case of multiple cancellations.
- All the details on the form need to be filled for smooth processing of the cancellation transaction.
- SIP discontinuation request should be received at least 21 days prior to the next due date of the SIP.
- STP discontinuation request should be received at least 7 days prior to the due date of the next transfer date.
- SWP discontinuation request should be received at least 7 days prior to the due date of the next transfer date.
- In case of any ambiguity, the SIP/STP/SWP cancellation form is liable for rejection either at the collection point itself or subsequently after detailed scrutiny at the back office of the registrar.
- The cancellation form should be signed depending upon mode of holding.

Sole/First Holder/Authorised Signatory

Second Holder/Authorised Signatory

Third Holder/Authorised Signatory

Mutual Fund investments are subject to market risks, read all scheme related documents carefully

ACKNOWLEDGEMENT SLIP



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Date ____ / ____ / ____

Stamp, Signature & Date

RECEIVED from Mr. / Ms. / M/s. _____
application for Cancellation of SIP/STP/SWP.

Stamp, Signature & Date