SYSTEMATIC TRANSFER PLAN (STP) / SYSTEMATIC WITHDRAWAL PLAN (SWP) ENROLMENT FORM

Please read instructions before filling this form

Sponsors: The Investment Trust of India Limited and Fortune Credit Capital Limited

Trustee Company: ITI Mutual Fund Trustee Private Limited

Investment Manager. ITI Asset Management Limited Naman Midtown, 'A' Wing, 21st Floor, Senapati Bapat Marg Prabhadevi, Mumbai 400 013 CIN: U67100MH2008PLC177677



Enrolment Form No.

DISTRIBUTOR INFORMATION								FOR OFFICE USE ONLY	
Distribu	ıtor Name & Co	ode :	Sub-Distributor Code	Internal Code for Sub-Broker/Employ	EUIN*	RIA C	ode	Date and Time of Receipt	
RN-		ARN-							
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	First/Sole Ur	nit Holder/ G	uardian	Second Unit I	Iolder/Guardian		Thire	d Unit Holder/Guardian	
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TP / SI	VP FREQUEN	ICY [Pleas	e tick (\checkmark) in the appro	priate box]					
O D	aily STP		O Weekly STP	O Mont	hly STP/SWP (Defa	ult)		O Quarterly SWP	
All Bus	iness Days	7th,	14th, 21st and 28th	○1st ○7th,	○ 14th, ○ 21st	, O 28th	○1st ○7	th, ○14th, ○21st, ○28th	
fault Fre	quency will be	Monthly, in c	ase frequency not selected	d or in case of any amb	guity.				
STEM	ATIC TRANS	FER PLAN	(STP) DETAILS (Not a	• •	•				
m So	heme: ITI			Plan: ○ Regu	lar O Direct Opt	i on: O Growth	O Dividend-	Reinvest O Dividend-Payout	
Sc	heme: ITI			Plan: ○ Regu	•			-Reinvest O Dividend-Payout	
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ECLAR	ATION & SIG	NATURE(S	3)						
ereto, I/I nd condiferived the oplicable arkets up ocument ontrary to We decla	We hereby apptions, rules an rough legitima laws or notifinder any order in to the relevant of the relevant of the relevant the pare that the	oly to the Tody regulation of the sources of the so	rustee of ITI Mutual Fund is of the Scheme(s). I/We and is not held or designe ections issued by the go ignent etc., of any Regulat the Scheme(s) and the A al documents. I/ We have	d for enrolment under e further declare, I am ed for the purpose of o vernmental or statuto tion, including SEBI. It MC/Trustee/Fund wo e not received nor bee	the STP/SWP of the two are authorised contravention of any authority from the expressly undersuld not be responsion induced by any results.	ne Scheme as to invest the a acts, rules, re- ime to time. I/' tood that I/We ble if the inves bate or gifts, d	indicated abomount and the gulations or a We am/are no have the exprotement is ultrairectly or indi	nation and subsequent amendmer ove and agree to abide by the terr nat the amount invested by me/us ny statute or legislation or any oth ot prohibited from accessing capi ess authority from our constitution a vires thereto and the investment rectly in making this investments.	
Date				SIGNAT	URE(S) as per ITI	Mutual Fund	records		
D D M M Y Y Y Y		YY				¥			
			Sole/First Unit Holde	er/Guardian	Second Uni	t Holder		Third Unit Holder	
			CKNOWLEDGEMENT S	LIP (To be filled in by	the Unit holder)			Enrolment Form No.	
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STP	From S	cneme		Plan	Ontio	n			
STP				Plan				_	
STP	To S	cheme		Plan	Optio	n n n		ISC Stamp, Date & Signature	