



STP APPLICATION FORM

SYSTEMATIC TRANSFER PLAN (STP) ENROLMENT FORM (Read Instructions Overleaf)

Broker Code :

Name of Sole/First Applicant (Leave space between first/middle/last name) Salutation ☐ Mr. ☐ Mrs. ☐ M/s.

STP Date ☐ 1st ☐ 7th ☐ 10th ☐ 15th

Application Number

Enrolment From : To

Transfer From :

Scheme Name

Amount

Frequency : ☐ DAILY ☐ WEEKLY ☐ MONTHLY ☐ QUATERLY ☐ HALF YEARLY

Transfer To:

Folio/Account Number (for existing investor)

Plan

OR Capital Appreciation

Scheme Name

Plan

SIGNATURE Sole/first Applicant Second Applicant Third Applicant

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Mutual Fund Investments Are Subject To Market Risks, Read All Scheme Related Documents Carefully.