	rovided. Any additional detail	ls/notings/instructions o	r those provided at a no	S TRANSACTION	not be executed. Kindly strike of	
Distributor / RIA Nam and ARN / Code		l & Sub Broke	rorm for each Transaction rr/Branch/RM nal Code	on and for each Scheme / Plan and EUIN (Refer note below)	,	r Office use only
	e EUIN box is intentionall by the distributor person		us as this is an "exe	cution-only" transaction witho	ut any	
nt commission shall be paid direc	•		investors' assessment of various	factors including the service rendered by the		
isting Folio Number		Name of Sole / Fi	rst Unitholder		(Sole / First	Applicant's Signature Mandatory)
		cheque with multiple sche	emes OR "Scheme Name",	NFORMATION, AMBIGUITY OR I in case of single scheme / scheme wise Amount (	cheques. Payment	Mode: Facility (One Time Mandate)
1. DSP -	Scheme	Plan	Option/Sub O	ption	🗌 Chequ	ue 🗌 DD 🗌 RTGS
2. DSP -	Scheme	Plan	Option/Sub O	ption	NEFT     Cheque/C	Funds transfer D/RTGS/NEFT Details:
3. DSP -	Scheme	Plan	Option/Sub O	ption	Ref. No	
Total A	mount in words			Amount in F		d / m m / y y y y
Payment from Bank A/	/c No.	Pay In A/c No.		A/c. Type Savings	DD charge	es, if any   FCNR   Others
Bank Name & Branch	h					
	to avoid Third Party Pay	<b>,</b> ,		, E		
EDEMPTION (Write	e Scheme Name, Plan	/ Option / Sub Op	tion below)		out Scheme Name, Plan /	Option / Sub Option below)
heme Name/Plan/ otion*/Sub Option*	DSP -			Scheme Name/Plan/ Option*/Sub Option*	SP -	
nount in Figures	Amount in Words	;		Amount in Figures	Amount in Words	
5.				Rs.		
(Please note that the hits in Figures	Redemption can be done ei Units in Words	ither in Units or in Am	nount and not in both)	Units in Figures	Units in Words	Units or in Amount and not in both)
ank Account for T	This Redemption Pro	coods (This should	d NOT be construed	Switch-in To Scheme / Pla DSP	n 7 Option" 7 Sub Option"	
	andate" request. Refer Ir			PAN AND KYC UPDAT	10N	KYC LETTER
	ion proceeds should be sent e e fund or to the default bank			Sole / First Applicant /		Attached
ank Name				Guardian Second Applicant /		
ccount No.				Guardian Third Applicant /		Attached
	ed bank account will not be co			Guardian		Attached
	ould avail multiple bank acc pose. If unit holder(s) provide				y) REGISTRATION DETAILS	(Refer Instructions overleaf)
e redemption request (wit	th or without necessary suppo	orting documents) such		Name of the PoA holder		
	of redemption proceeds and v applied in case of no infor	5	r discrepancy.	PAN of the PoA holder		Attached KYC Letter (Mandatory)
ECLARATION & SIGN	••	inacion, anoigaich e	and opaney.		(*	To be signed as per Mode of Holding)
ring read and understood the SSP Mutual Fund for Units of igned for the purpose of cor uced by any rebate or gifts, emes of various Mutual Fund UIN is left blank/not mention	e contents of the Scheme Inform, f the relevant Scheme and agree ntravention or evasion of any Ac, directly or indirectly in making ds from amongst which the Sche oned; I/We hereby confirm that t	to abide by the terms an tt, Regulation, Rule, Notifi this investment. The ARI the is being recommende the EUIN box has been int	d conditions, rules and regu ication, Directions or any o N holder has disclosed to m d to me/us. Applicable to N entionally left blank by me	Jlations of the Scheme. I / We declare ther applicable laws enacted by the G ne/us all the commissions (in the form RRIs only: I/We confirm that I am/We /us as this is an "execution-only" trans	that the amount invested in the Sch overnment of India or any Statutory , of trail commission or any other mo are Non-Resident(s) of Indian Nationa faction without any interaction or ad	Mutual Fund, I / We, hereby apply to the Trust eme is through legitimate sources only and is r Authority. I / We have neither received nor be ide), payable to him for the different competi lity. vice by the employee/relationship manager/sa not charged any advisory fees on this transaction
Sole / First Unit Holder Second Unit Holder			Third Unit Holder POA Holder, if any			
	· <del>×</del>			· ·		<b>%</b>
CKNOWLEDGEM		processed in case of incom-	lete / ambiguous / improves	/ incorrect details in Transaction Form	Redemption or	DSP MUTUAL FUN
Acknowledgement is subject to Investor Name	vernication, kequest may not be	processed in case of incomp	amoiguous / improper	/ incorrect details in Transaction Form.	Amount (Rs.)	JWILCH
					OR Units	
olio Number		[	Additional Purch	ase or 🗌 SIP (PDC)	_	tion
		г	otal Amount (Rs.)		PAN and KYC Upda	
Scheme/s		г	otal Cheques		PoA Registration	STP or SWP or DTP
			Cheques From			
			No.(s) To			

ISC Stamp & Signature

## DSP .....

## SIP (PDC) / STP / SWP / DTP

Distributor Name and ARN	Sub Broker Name and ARN	Branch/RM Internal Code	Employee Unique ID.	No. (EUIN)	For Office use only		
Name of Sole / First Unitholo	<b>ler</b> (Leave space betwo	een first / middle / last name)	□ Mr. □ Ms. □ M/s. □	Others F	olio Number		
Scheme Name/Plan/Option*/	Sub Option* DS	Р		PLAN	OPTION		
SYSTEMATIC TRANSFER	PLAN (STP) (Pleas	e allow 7 days to register		that the EUIN box is intention of the time of			
STP in To Scheme/Plan/Opti	on*/Sub Option*		Upfront comn	nission shall be paid directly by the i	investor to the AMFI registered Dis	ributors based on the	
DSP	PLAN	OPTION		essment of various factors including			
Transfer Dixed	Sum of Rs.	(Minimum Rs	s.500/-)				
	l Appreciation, subject	to Minimum of Rs.500/-					
Frequency (✓ Tick any one	) Days/Dates (v	Tick any one)		Sole / FirstApplic	ant's Signature Mandatory		
Daily     All Business days				Sole / FirstApplicant's Signature Mandatory			
Weekly	Mon*	Fue 🗌 Wed 🔲 Thu 🗌		<b>FRANSFER PLAN (DTP)</b> · ow 7 days to register DT		anditions)	
🗆 Monthly* 🗆 Half Yea	rly D D Ar	ny date (1st <sup>*</sup> to 31st)		ion complete Scheme, Plan		jindicions)	
Quarterly  Vearly		, , , , , , , , , , , , , , , , , , ,	`	ne (From where Dividend is	• /		
Transfer Period	D D / M M / Y			PLAN	,	ION	
(Period to cover - minimum From 6 STP transactions)	D D / M M / Y	Y To D D / M M / Y	DSP	PLAN		ION	
Investments done in scheme and the load structure for S	s through STP will be IP will be applicable.	treated as investments through			To		
SYSTEMATIC WITHDRAW	AL PLAN (SWP) (Plea	ase allow 7 days to register SWP)		e (To where Dividend is to I	,	101	
Withdrawal 🛛 Fixed	Sum of Rs.	(III ) D 5		PLAN		ION	
Amount	l Appreciation, subject	(Minimum Rs.50 to Minimum of Rs 500/-	STSTEMAT	C INVESTMENT PLAN (S			
Withdrawal Date	Any date (1 <sup>st*</sup> to 31 <sup>st</sup>			eque required for investme should be of same date of t		Plan)	
			Each SIP Amo	unt (minimum Rs. 500) R	s.		
Withdrawal Period	y* □ Quarterly □ Ha		SIP Date	D Any date (1 <sup>st*</sup> to 31 <sup>s</sup>	st) Frequency 🔲 Monthly	Quarterly	
(Period to cover - minimum 6 SWP transactions)	D   /   M   M   /   Y	Y TO D D / M M / Y	SIP Period Fro	m D D / M M /	YYTODD/N		
'		o for Payout. If no details are mentioned p					
Bank Name	.ount.		Cheque Nos.	From	То		
			Drawn on Bar	k/			
Bank Account No.			Branch				
	••	information, ambiguity or discr	repancy.				
DECLARATION & SIGNATU		Desument and Chaterrant of Addition	formation Vou Information W	ndum lastructions	(To be signed as per M	ode of Holding)	
naving read and understood the conten of DSP Mutual Fund for Units of the rel designed for the purpose of contraventii by any rebate or gifts, directly or indired Mutual Funds from amonest which the S	ts of the Scheme Information evant Scheme and agree to al on or evasion of any Act, Regu ttly in making this investment, cheme is being recommended	Document and Statement of Additional In bide by the terms and conditions, rules ar lation, Rule, Notification, Directions or any . The ARN holder has disclosed to me/us al to me/us. Applicable to NRIs only: I/We c	rormation, Key information Memora nd regulations of the Scheme. I / W v other applicable laws enacted by t I the commissions (in the form of tr confirm that I am/We are Non-Revir	Indum, instructions and addenda issue le declare that the amount invested i he Government of India or any Statuto all commission or any other mode), pay lent(s) of Indian Nationality.	in the Scheme is through legitimate ry Authority. I / We have neither rec yable to him for the different compe	sources only and is not eived nor been induced ting Schemes of various	

If EUIN is left blank/not mentioned; I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this is an "execution-only" transaction without any interaction or advice by the employee/relationship manager/sales person of the above distributor or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor and the distributor has not charged any advisory fees on this transaction.

Sole / First Unit Holder	Second Unit Holder	Third Unit Holder	POA Holder, if any

## INSTRUCTIONS

INSTRUCTIONS
This form should be used by existing investors only by mentioning their folio number, name and Scheme details. Please read the Scheme related documents, Addenda, KIM and Instructions there-in and below mentioned instructions only in the designated space provide in the form else the same may not be considered and applied. Separate cheques and form should be given for each separate investment in different scheme, plan, option and auto, think holder should be one of the bank account budges in the pay-in bank account. Furchase application through Cheque/DD/RTGS/NETT request should necessarily mention the pay-in bank account budgers in the pay-in bank account budgers in the pay-in bank account are viewed on the payment to they (FURS/NETT request should necessarily mention the pay-in bank account to are registered in your folio, loages to fit is a payment to they (FURS/NETT request should hecessarily mention the pay-in bank account to are registered in your folio, loages to the request should hecessarily mention the pay-in bank account to are registered in your folio, loages to the request should hecessarily mention the bank payment to they (FURS/NETT request Should hecessarily mention the paylicator), the fund certains payneent through OTM facility registered in your folio, loages to the registered with the application, the fund servers the right to registered may with the (Abott Should registered), default bank mandate under OTM facility, please mention the bank account are made bank name where you are making payment through OTM facility registered in your folio, loages the registered bank account secolifies on complexit the relevant bank hare exercises and bank pare the relevant with the debit to happen. If the same is not mentioned or is not registered bank account secolifies on complexit the relevant bank relevant bank paylicator or Walk the folio and relevant paylicator or Walk to registered bank account secolifies on complexit the relevant paylicator and the paylicator or Walk the debit the paylic