CHANGE OF EXISTING SIP OPTION

UNITHOLDER’S DETAILS

FOLIO No. ____________________________

Sole/First Applicant (Mr./Ms.) ____________________________
FIRST NAME ______________ MIDDLE NAME ______________ LAST NAME ______________

I/We wish to change from the Dividend Option to Growth Option of my/our existing SIP under the Scheme as given below:

DETAILS OF EXISTING SIP INVESTMENT

1. Scheme Name & Plan: IDFC ____________________________

Each SIP Amount: ____________________________ Rupees in words: ____________________________

SIP Frequency (✓): ☐ Monthly SIP Date: ___________ SIP Start Month/Year: ___________ ___________ SIP End Month/Year: ___________ ___________

TERMS & CONDITIONS:

1. Please use separate cancellations forms for different schemes in the same folio or different folios.

2. Investors need to ensure that details mentioned in the change form are correctly filled in. In case of any ambiguity, the form is liable for rejection.

3. In case of joint holders in the folio, the form needs to be signed by either one of the holders or all the holders depending upon the mode of holding.

4. Requests for registering for modification of SIP shall be subject to an advance notice of 30 (thirty) days.

5. In the absence of sufficient no. of days as mentioned above the modification would be effected from the next eligible cycle date.

6. Multiple requests pertaining to the same folio cannot be submitted in a single form.

Signature of Sole/First Applicant ____________________________
Signature of Second Applicant ____________________________
Signature of Third Applicant ____________________________

ACKNOWLEDGEMENT SLIP

CHANGE OF EXISTING SIP OPTION

FOLIO No. ____________________________ Date: ___________ ___________ ___________ ___________ ___________ ___________

Existing SIP details in which Option to be changed from Dividend to Growth:

Scheme Name & Plan: IDFC ____________________________

Each SIP Amount: ____________________________ Rupees in words: ____________________________

SIP Date (✓): ___________ SIP Start Month/Year: ___________ ___________ SIP End Month/Year: ___________ ___________

Signature of Sole/First Applicant ____________________________
Signature of Second Applicant ____________________________
Signature of Third Applicant ____________________________