

Systematic Transfer / Withdrawal Form Strike off sections that are not applicable

	Mutual Fund			Jume e	The sections that are not applicable	
	Distributor's ARN/ RIA Code#	Sub-Broker's	s ARN Sub-E	Broker's Code	EUIN	
By mentioning RIA/PMS code, I/ We authorize you to share with the Investment Adviser/ Portfolio Manager the details of my/our transactions in the scheme(s) of						
Kotak Mahindra Mutual Fund. Declaration for Execution-only transactions (only where EUIN box is left blank) "I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker."						
(S)						
SIGNATURE(S)	Sole/Frist Applicant		pplicant		hird Applicant	
		To be signed by All Applicants if mode of operation is "Joint" nmission shall be paid directly by the investor to the AMFI registered distributors based on the investor's assessment of various factors including the service				
rendered by the distributor.						
Investor's Information						
	olio No. Ser Existing Investors)	App (For N	lication No. ew Investors, Please attach the application form)			
	Sole/ First Applicant Second A		licant Third Applicant		Third Applicant	
Na	of Applicant Name of Applicant			Name of Applicant		
PA	N	PAN		PAN		
_						
I would like to opt for ■ Systematic Transfer Plan ■ Systematic Withdrawal Plan						
S	ystematic Transfer Plan: Kindly strike-off unused rows (which are not being filled-out by you)					
	From Source Scheme: Kotak To Destination Scheme: Kotak ———————————————————————————————————					
1	Frequency: Daily Weekly Specif	Mention any day, Monday to Friday	STP Period: Start Date	D D M M Y Y	End Date D D M M Y Y	
	☐ Monthly ☐ Quarterly ☐ ☐ ☐ Mention any date of the month From Source Scheme: Kotak		Amount (Rs.) 1,000 2,000 5,000 Other To Destination Scheme: Kotak STP Period: Start Date D M M Y Y End Date D D M M Y Y			
2	Frequency: Daily Weekly Specif					
	Monday to Friday Mention any date of the month		Amount (Rs.) 1,000 2,000 5,000 Other			
	From Source Scheme: Kotak	or the month		To Destination Scheme: Kotak		
3	Frequency: Daily Weekly Specify Day Mention any day, Monday to Friday STP Period: Start Date D. M. M. Y. Y.				End Date D D M M Y Y	
	Monthly Quarterly	Monday to Friday Mention any date	Amount (Rs.) 1,000 2,000 5,000 Other			
or the month						
3	ystematic Withdrawal Plan From Source Scheme: Kotak		Plan □ Regular	Option □ Gro	owth □IDCW Payout	
			□ Direct		W Reinvestment	
1	Withdrawal Option (Please ✓) ☐ Fixed Si	Min. Rs. 1000	0/-			
		ention any day, londay to Friday	Commencement Date	D D M M Y	Y To D D M M Y Y	
	☐ Monthly ☐ Quarterly ☐	Mention any date of the month	No. of Installments			
	From Source Scheme: Kotak		Plan □ Regular □ Direct	Option ☐ Gro	owth ☐ IDCW Payout	
	Withdrawal Option (Please ✓) ☐ Fixed Sum OR ☐ Entire Appreciation Min. Rs. 1000/-					
2	Frequency: Weekly Specify Day	ention any day,			V To D D M M V V	
	Monthly Quarterly	onday to Friday Mention any date	No. of Installments		Y To D D M M Y Y	
		of the month				
Declaration and Signatures We have read and understood the contents of the SID/SAL of the above referred Scheme(s) of Kotak Mahindra Mutual Fund. We hereby apply for allotment / purchase of Units in the Scheme(s) indicated as above and agree to abide by the						
We have read and understood the contents of the SID/SAI of the above referred Scheme(s) of Kotak Mahindra Mutual Fund. I/We hereby apply for allotment / purchase of Units in the Scheme(s) indicated as above and agree to abide by the terms and conditions applicable there to. I/We hereby declare that I / We authorized to make this investment in the above mentioned Scheme(s) and that the amount invested in the Scheme(s) is through legitimate sources only and is not designed for the purpose of any contravention or evasion of any Act, Rules, Regulations, Notifications or Directions of the provisions of income Tax Act, Anti Money Laundering Act, Anti Corruption Act or any other applicable laws enacted by the Government of India from time to time. I/We hereby authorize Kotak Mahindra Mutual Fund, its investment Manager and its agents to disclose details of my investment to my/our Investment Advisor and/or banks. When have neither received nor been induced by any rebate or grifts, directly, in making this investment.						
					Table of the same	
SIGNATURE(S)	Sole/Frist Applicant	Second Ap			hird Applicant	
Acknowledgement Slip (To be filled by Applicant)						
	Received from (Investor's Name) Please retain this Acknowledgement Silp for future reference DATE: D D M M Y Y Y Y NAME D D M M Y Y Y Y					
	Folio Number				Annual Division Control	
	Request for STP SWP			Officia	Acceptance Point Stamp & Sign	