

Application No.

Date

Distributor ARN	Sub-Distributor ARN / Sol ID	Internal Sub-Broker / Employee Code	EUIN	Serial No., Date & Time Stamp

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

"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."

First / Sole Applicant / Guardian

Second Applicant

Third Applicant

Power of Attorney Holder

EXISTING FOLIO NUMBER

PAN (mandatory)

Enclosed  PAN Proof  KYC Acknowledgment letter

SYSTEMATIC TRANSFER PLAN (STP) (To be submitted at least 7 days before the 1st due date for transfer).

From Scheme#  Plan

Option (✓)  Growth OR  Dividend Dividend Frequency

Plan  Existing  Direct  Retail

To Scheme  Plan

Option (✓)  Growth OR  Dividend Reinvestment OR  Dividend Payout Dividend Frequency

Plan  Existing  Direct

Transfer Instalment ₹  Minimum ₹ 1,000 No. of Instalments  Minimum 6

Total Transfer ₹

Transfer Period From       To        
 (First Instalment) (Last Instalment)

Transfer Frequency (Please choose either Weekly or Fortnightly or Monthly (✓))

Weekly (Every Wednesday)

Fortnightly (Every Alternate Wednesday)

Monthly  1st  7th  10th  15th  25th

\*Please refer to the Scheme Information Documents of respective schemes for STP availability.

Having read and understood the contents of the Scheme Information Document of the Scheme(s), I / we hereby apply for units of the Scheme(s) and agree to abide by the terms, conditions, rules and regulations governing the Scheme(s). I / We hereby declare that the amount invested in the Scheme(s) is through legitimate sources only and does not involve and is not designed for the purpose of the contravention of any Act, Rules, Regulations, Notifications or Directions of the provisions of the Income Tax Act, Anti Money Laundering Laws, Anti Corruption Laws or any other applicable laws enacted by the Government of India from time to time. I / We have understood the details of the Scheme(s) & I / we have not received nor have been induced by any rebate or gifts, directly or indirectly in making this investment. I / We confirm that the funds invested in the Scheme(s), legally belong to me / us. In the event "Know Your Customer" process is not completed by me / us to the satisfaction of the Mutual Fund, I / we hereby authorise the Mutual Fund, to redeem the funds invested in the Scheme(s), in favour of the applicant, at the applicable NAV prevailing on the date of such redemption and undertake such other action with such funds that may be required by the Law.

The ARN holder has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

For NRIs only: I / We confirm that I am / we are Non Residents of Indian nationality / origin and that I / we have remitted funds from abroad through approved banking channels or from funds in my / our Non-Resident External / Non-Resident Ordinary / FCNR account.

I / We confirm that details provided by me / us are true and correct.

First / Sole Applicant / Guardian	Second Applicant	Third Applicant	POA Holder
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Application No.

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First / Sole Applicant /  
Guardian

Second Applicant

Third Applicant

Power of Attorney Holder

**INVESTOR'S INFORMATION**Mr / Mrs Existing Folio Number PAN Enclosed  PAN Proof  KYC Acknowledgment letterE-mail ID **SWP DETAILS\*** (To be submitted atleast 15 days before 1<sup>st</sup> due date. Please (✓) the appropriate option)

**SWP From Scheme**

<input type="checkbox"/> Axis Equity Fund	<input type="checkbox"/> Axis Gold Fund	<input type="checkbox"/> Axis Income Saver
<input type="checkbox"/> Axis Triple Advantage Fund	<input type="checkbox"/> Axis Midcap Fund	<input type="checkbox"/> Axis Focused 25 Fund
<input type="checkbox"/> Axis Dynamic Bond Fund	<input type="checkbox"/> Axis Short Term Fund	<input type="checkbox"/> Axis Income Fund
<input type="checkbox"/> Axis Treasury Advantage Fund	<input type="checkbox"/> Axis Banking Debt Fund	<input type="checkbox"/> Axis Constant Maturity 10 year Fund
<input type="checkbox"/> Axis Long Term Equity Fund <sup>#</sup>		

Plan  Regular  DirectOption  Growth  Dividend Payout  Dividend Re-investmentWithdrawal Amount ₹  in figures  ₹  in wordsWithdrawal Frequency  Monthly (minimum 6)  Quarterly (minimum 4) Withdrawal Period From  To SWP Date\*  1<sup>st</sup>  5<sup>th</sup>  10<sup>th</sup>  15<sup>th</sup>  25<sup>th</sup>

\*In the event that such a day is a holiday, the withdrawal would be affected on the next business day.

<sup>#</sup> Units completed three years of lock in period in Axis Long Term Equity Fund would be eligible for SWP facility.**DECLARATION AND SIGNATURES**

I/We have read and understood the contents of the SID/SAI of the above referred Scheme(s) of Axis Mutual Fund. I/We hereby apply for systematic withdrawal of Units in the Scheme indicated as above and agree to abide by the terms and conditions applicable there to. I/We hereby declare that I am / We are authorized to make this withdrawal in the above mentioned Scheme and that the amount invested in the Scheme 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 Axis Mutual Fund, its investment Manager and agents to disclose details of my investment to my / our Investment Advisor and / or banks.

First / Sole Applicant / Guardian

Second Applicant

Third Applicant

POA Holder

To be signed by All Applicants if mode of operation is "Joint"

**#INSTRUCTION & INFORMATION**

- Please refer the Key Information Memorandum and Scheme information documents and Statement of additional information of the respective Schemes(s) for Applicable NAV, Risk Factors, Load Structure and other information on the Scheme(s).
- Contingent Deferred Sales Charge (CDSC)/Exit Load if any is applicable to SWP.
- The AMC reserves the right to accept SWP applications of different amounts, dates and frequency.
- You can choose to discontinue any of these facilities by giving 15 days prior notice in writing to our Registrar Karvy and it will terminate automatically if all the Units are liquidated, or withdrawn from the account or the holdings fall below the SWP amount.
- The bank account as mentioned in the above folio would be considered for such credits, incase you wish to change the bank account fill in a Common Transaction Slip available at [www.axismf.com](http://www.axismf.com).
- Incorrect, incomplete, ambiguous forms will not be accepted and will be returned to the investor within 30 days of their receipt.