



SYSTEMATIC WITHDRAWAL PLAN ENROLLEMENT FORM (Please fill in BLOCK Letters)			
INVESTOR DETAILS (MANDATORY)			
EXISTING FOLIO NO./ APPLICATION NO. (For existing unitholders) (For new investors)			
Name (Mr/Ms/M/s)			
E-mail ID			
Mobile No.			
SWP DETAILS			
	1	2	3
Scheme Name			
Plan	Regular Direct	Regular Direct	Regular Direct
Option	Growth Dividend Frequency	Growth Dividend Frequency	Growth Dividend Frequency
Dividend Facility	Reinvest Payout	Reinvest Payout	Reinvest Payout
SWP Instalment Amou	nt		
SWP Frequency	Weekly Quarterly Annually	Weekly Quarterly Annually	/ Weekly Quarterly Annually
	Monthly Half-year	Monthly Half-year	Monthly Half-year
SWP Date	1st 10th 22th	1st 10th 22th	1st 10 th 22 th
	5 th 15 th 25 th 30 th	5 th 15 th 25 th 30 th	5 th 15 th 25 th 30 th
SWP Period	From To	From To	From To
any rebate or gifts, directly or indirectly, in making this investment. I/We hereby declare that the amount invested/to be invested by me/us in the scheme(s) of SBI Mutual Fund is derived through legitimate sources and is not held or designed for the purpose of contravention of any act, rules, regulations or any statute or legislation or any other applicable laws or any notifications, directions issued by any governmental or statutory authority from time to time. I/We certify that the funds invested do not attract the provisions of Foreign Contribution Regulations Act (FCRA). 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.			
* I/We certify that as per the Memorandum and Articles of Association of the Company, Bye laws, Trust Deed or Partnership Deed and resolutions passed by the Company / Firm / Trust, I/We am/are authorised to enter into the transactions for and on behalf of the Company/Firm/Trust. ** I/We confirm that I/We am/are Non Resident of Indian Nationality/Origin and I/We hereby confirm that funds for the subscriptions have been remitted from abroad through approved banking channels or from my/our Non Resident External/Ordinary account/FCNR Account. *** I/We hereby declare that I/We do not hold a Permanent Account Number and hold only a single PAN Exempt KYC Reference No. (PEKRN) issued by KYC Registration Agency and also confirm that the aggregate of lump sum and SIP installments in a rolling 12 months period or financial year does not exceed Rs. 50,000/- (Rupees Fifty Thousand).			
* Applicable to other than Individuals / HUF; ** Applicable to NRIs; *** Applicable to "Micro investments";			
SIGNATURE(S) Applicants must sign as per mode of holding			
	⊗ Standardian / Authorised Signatory	2nd Applicant / Authorised Signatory	⊗ 3rd Applicant / Authorised Signatory
Date	Tot Applicant/ Qualdian/ Authorised Signatory	Place Place	ora Approvint/ Authorised Signatory