The Wealth Company
MUTUAL FUND

CANCELLATION OF SYSTEMATIC INVESTMENT PLAN

Toll Free Number : 1800 267 3454 | Email : investorcare@wealthcompany.in | Website : www.wealthcompanyamc.in

INVESTOR DETAILS

Folio Number*

Sole / First Unit Holder First Name Middle Name Last Name

Guardian Name

PAN Details 1st Applicant 2nd Applicant 3rd Applicant

SIP DETAILS

Scheme* Plan*

Option* SIP Cycle Date D D SIP ref#

Amount SIP Start M M Y Y Y Y SIP End M M Y Y Y Y

DEBIT BANK DETAILS

Bank Name* Branch

Option*

I/We wish to discontinue my Systematic Investment Plan in above mentioned scheme. I/We would request you to cancel / stop deducting the SIP amount registered with you from my / our above account from the ensuring month M M Y Y

Sole / First Applicant (Signature as per The Wealth Company Mutual Fund)	Second Applicant (Signature as per The Wealth Company Mutual Fund)	Third Applicant (Signature as per The Wealth Company Mutual Fund)

Name (as per bank record)

Sole / First Applicant (Signature as per Investor Bank records)	Second Applicant (Signature as per Investor Bank records)	Third Applicant (Signature as per Investor Bank records)

INSTRUCTIONS

1. A form to be used for single folio only.
2. For multiple SIP's fill multiple form, please ensure that all the said parameters are mention. Else the form may be liable for rejection.
3. This form is only to stop the debit instructions for the said SIP. This instruction doesn't result in automatic redemption of the units in the scheme.
4. Please allow 10 days processing gap before next SIP cycle date. SIP instalment falling within 10 days post receipt of cancellation request will bededucted from the account.

ACKNOWLEDGMENT SLIP - (To be filled in by the investor)

Received an application form cancellation of Systematic Investment Plan for

Folio Number Scheme

Plan Option with SIP date D D M M Y Y Y Y

Stamp & Signature