

Date: DD / MM / YYYY

To
Nippon India Mutual Fund

Dear Sir,

I/We, _____ 1st Applicant _____ 2nd Applicant _____ & _____ 3rd Applicant _____
had given instruction for (Fixed Transfer STP / Capital Appreciation STP)* in the Folio No. _____
from Transferor Scheme _____ to Transferee Scheme _____
for the period _____ to _____ with STP frequency as _____
for ₹ _____.

I / We wish to discontinue my Systematic Transfer Plan (STP) in the above mentioned scheme. I / We request you to
cancel / stop the STP registered with you from my / our above account from the ensuing month MM / YYYY.

Yours truly,

SIGN HERE	First / Sole Applicant / Guardian Authorised Signatory	Second Applicant Authorised Signatory	Third Applicant Authorised Signatory
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INSTRUCTIONS

- 1) The investors can use the STP cancellation form to discontinue STP registered in a given scheme in a given folio / account with NAM India. Please use separate cancellation forms for different schemes in the same folio or different folios.
- 2) The investors can discontinue STP facility by providing a written notice to the DISC at least 7th calendar days (excluding day of submission) prior to the due date of the next transfer date. If the cancellation form is not received 7th calendar days prior to the due date of the next transfer date then the STP will get cancelled from the next eligible cycle date falling after 7th calendar day.
- 3) Investor needs to ensure that the details mentioned in the STP Cancellation form are correctly filled in. In case of any ambiguity the STP Cancellation form is liable for rejection either at the collection point itself or subsequently after detailed scrutiny/verification at the back office of the Registrar.
- 4) In case of joint holders in the folio the form needs to be signed by either one of the holder or all the holders depending upon the mode of holding.

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Received from Mr./Mrs./Ms. _____ 1st Applicant _____ 2nd Applicant _____ & _____ 3rd Applicant _____
an application for cancellation of STP in Folio no. _____
from Transferor Scheme _____ for ₹ _____.

Signature, Date & Stamp
Of receiving office