SMART FEATURES FORM

STP / SWP / DTP / TRIGGER / LIQUITY

Application No.

Please read INSTRUCTIONS carefully. All sections to be completed in FNGLISH in BLACK / BLUE COLOURED INK and in BLOCK LETTERS

BROKER CODE (ARIA CODE)/RIA CODE# ARN-0186				#	SUB-BROKER ARN CODE						SUB-BROKER CODE (As allotted by ARN holder)				Employee Unique Identification No. (EUIN)			
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APPLIC	CAN	T(S)	DET	AILS	(Pleas	se Refe	r to Ins	truction I	No. II (b)) Ma	andatory	information – If le	t blank the applica	ition is liable t	to be reject	ed.		
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Note: All future communications in connection with this application should be addressed to the nearest ICICI Prudential Mutual Fund Customer Service Centre, quoting full name of the first applicant, the application serial number, the name of the scheme, the amount invested, date and the place of the Customer Service Centre where application was lodged.

SIGNATURE, STAMP & DATE

		NCELLATION (Please i	erer to matruction is	lo. XVIII)	
Please ✓ ON	ew Registration O Update	existing registration		Cancellation (Of any trigger set-up registered	earlier
mount / Units	to be triggered From (Pl	ease ✓ Source Scheme)			
ICICI Prudential Sa	avings Fund OICICI Pru	dential Flexible Income Plan	O ICICI Prudential Inc	come Plan O ICICI Prudential Short Term Plan	
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		○ 20% or INMULT	PLES OF 100 POINTS	MINIMUM 10% AND IN MULTIPLE OF 5%	
		(Please refer inst	ruction XVIII/1\\	100 % of Total Registered Amount	
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	ILITY (Please refer to instru				
OURCE SCHEM	ES & OPTIONS (Appreciation	n / Dividend amount to be tran	sferred from - Please ✓	anyone of the Scheme / Options)	
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