

Request for Systematic Withdrawal Plan (Option 1)

Date: _____

Folio: _____

Amt Rs. _____

Scheme: _____

Option: _____

SWP Date

Start Month/
Year

End Date



REQUEST FOR SYSTEMATIC WITHDRAWAL PLAN (OPTION 1)

New Registration Cancellation

Date: _____

I/We wish to opt for the Systematic Withdrawal Plan from the ICICI Prudential _____
_____ Plan/Fund _____ option

Frequency [Tick (✓) any]: Monthly Quarterly Half Yearly Yearly

for Rs. _____

(Rupees _____ only)

SWP Date

Start Month/Year

End Date

Folio No. _____



(Name of the First Holder)

(Signature)

(Name of the Second Holder)

(Signature)

(Name of the Third Holder)

(Signature)