

Request for Systematic Withdrawal Plan

Date: _____

Folio: _____

Amt Rs. _____

Scheme: _____

Option: _____

Start Date M M Y Y Y Y

End Date M M Y Y Y Y



REQUEST FOR SYSTEMATIC WITHDRAWAL PLAN

New Registration Cancellation

Date: _____

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

for Rs. _____ per month/quarter.

(Rupees _____ only)

Start Date M M Y Y Y Y

End Date M M Y Y Y Y

Folio No. _____



(Name of the First Holder)

(Signature)

(Name of the Second Holder)

(Signature)

(Name of the Third Holder)

(Signature)

