

SIP Modification Application Form

APP No. _____

1. DISTRIBUTOR / BROKER INFORMATION

Name & Broker Code / ARN	Sub Broker / Sub Agent ARN Code	*Employee Unique Identification Number	Sub Broker / Sub Agent Code	RIA Code**
ARN- (ARN stamp here)	ARN-			

*Please sign below in case the EUIIN is left blank/not provided. I/We hereby confirm that the EUIIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

++ I/We, have invested in the Scheme(s) of your Mutual Fund under Direct Plan. I/We hereby give you my/our consent to share/provide the transactions data feed/ portfolio holdings/ NAV etc. in respect of my/our investments under Direct Plan of all Schemes Managed by you, to the above mentioned Mutual Fund Distributor / SEBI-Registered Investment Adviser:

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

Upfront commission shall be paid directly by the investor to the AMFI registered distributor based on the investor's assessment of various factors including the service rendered by the distributor.

2. APPLICANT DETAILS

Name of Sole/1st holder Mr./Ms./M/s		FOLIO NO.	PAN No / PEKRN.	<input type="checkbox"/> KYC
			M A N D A T O R Y	
Name of 2nd holder Mr./Ms.			PAN No / PEKRN.	<input type="checkbox"/> KYC
			M A N D A T O R Y	
Name of 3rd holder Mr./Ms.			PAN No / PEKRN.	<input type="checkbox"/> KYC
			M A N D A T O R Y	

3. Existing SIP DETAILS

Scheme / Plan / Option	Frequency (Please -any one)	SIP Amount	SIP Debit Date (Please -any one)	Payment Mode	Bank Name / Account number
	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	₹ _____ (in figures)	<input type="checkbox"/> 2 <input type="checkbox"/> 7 <input type="checkbox"/> 10 <input type="checkbox"/> 18 <input type="checkbox"/> 23 <input type="checkbox"/> 28 <input type="checkbox"/> ____ (Any other Date)	One Time Bank Mandate	_____

4. SIP Modification Details

New Scheme / Plan / Option	New SIP Amount	New SIP End Date
	₹ _____	D D M M Y Y Y Y

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

INSTRUCTIONS cum TERMS AND CONDITIONS

- In order to provide flexibility, an investor investing through SIP shall have an option to modify the selected scheme and / or SIP installment amount and / or SIP end date, in the scheme wherein the SIP investments are currently being made.
- Request has to be submitted atleast 10 days prior to the next SIP installment date (excluding the request date and the next SIP installment date).
- Modify SIP facility shall be available only to investors whose SIP is registered through One Time Bank Mandate / Invest Easy Mandate.
- Modify SIP request shall be liable for rejection if the modified details do not meet the amount / tenure conditions as per the Scheme Information Document of the respective scheme or the registered mandate.
- If the investor submits request for Modify SIP details for a SIP registration where the Reliance STEP-UP facility is already registered, the Reliance STEP UP facility shall be cancelled immediately upon receipt of Modify SIP details request.
- The broker code mentioned on the initial SIP registration request will continue even after the SIP Modification registration request is given. In case a different broker code is specified on the SIP Modification registration request then the same will not be considered.

ACKNOWLEDGMENT SLIP (To be filled by the investor)

APP No. _____

Received from Mr./Mrs./Ms. _____ SIP modification request
 for SIP registered for ₹ _____ in Folio No. _____ under Reliance _____
 with _____ frequency and _____ Debit Date.
 Modification details given

Signature, Date & Stamp
Of receiving office

New Scheme / Plan / Option	New SIP Amount	New SIP End Date
	₹ _____	D D M M Y Y Y Y