

**REDEMPTION REQUEST FOR UNCLAIMED REDEMPTION /
Income Distribution cum Capital Withdrawal (IDCW) Cum COB**



First Holders Name	
Second Holders Name	
Third Holders Name	

I/We, the undersigned, hereby submit the requests to **redeem** the unclaimed redemption / IDCW payment(s) for the below given details.

Folio Number	Unclaim Redemption (Please tick)	Unclaim IDCW (Please tick)

The payment(s) to be re-issued with: Existing Bank details New Bank details (Please fill below table)

Bank account details		Any one of the Document submitted (Please tick)
Bank Name		<input type="checkbox"/> Cancelled original cheque <input type="checkbox"/> Self-attested copy of bank account statement <input type="checkbox"/> Bank passbook with current entries not older than 3 months <input type="checkbox"/> Bank letter, on the letterhead of the bank duly signed by branch manager/ authorized personnel stating the complete bank account details
Bank Account No.		
Bank Branch		
IFSC code		
MICR Code		

Please note bank proof required for old bank mandate irrespective if there is a change in bank or payment to be made in existing bank account.

I/We hereby declare and confirm that the information provided in this request is true and correct. I/We further agree and confirm that in the event there is any discrepancy between the information provided in this form and the supporting documents, the AMC/ Mutual Fund shall be entitled to reject the request. The AMC/ Mutual Fund shall not be liable and/or responsible for any loss or damage that I/we may incur if the request is rejected. I/We confirm that we have not encashed/claimed the aforesaid payments earlier, I/we agree to indemnify and repay PPFAS Mutual Fund, the AMC and Registrar in case of any duplicate payment.

Signature

Sole/ First Unit holder/ Guardian/ POA

Second Unit holder

Third Unit holder

INSTRUCTIONS

- Proof of Identity - ANY ONE of the below mentioned documents to be submitted for First / Sole Unitholder / Guardian as valid ID proof with self attestation.
 - PAN card copy
 - Aadhaar Card copy
 - Passport copy
 - Voter ID copy
- In case of Address change please update it in your KYC by giving a new KYC registration form to your KRA.
- KYC should be verified and PAN Aadhar should be linked to give a redemption in unclaim scheme also.
- In the event of death of First / Sole / all Unitholders, the claimant should first complete the transmission formalities. Subsequent to processing of the transmission, a request to claim the unclaimed amount(s) should be submitted to us.
- In the event of a request for change in bank account information being invalid / incomplete/ not satisfactory in respect of signature mismatch/ document insufficiency / not meeting any requirements more specifically as indicated in aforesaid clauses, the request for such change of bank account and subsequent payout of unclaimed amount(s) may not be processed.
- The new bank account mentioned in this form will be registered as the default bank account.
- PPFAS AMC / PPFAS Mutual Fund may call for any additional documents if required.
- Please ensure that this form is complete in all respects and signed by the Unitholder(s) as per the mode of holding registered in the folio(s).

PPFAS Mutual Fund

81/82, 8th Floor, Sakhar Bhavan, Ramnath Goenka Marg, 230, Nariman Point, Mumbai - 400 021. INDIA. Tel: 91 22 6140 6555, Fax: 91 22 6140 6590

Trustee Company: PPFAS Trustee Company Private Limited.

AMC Name: PPFAS Asset Management Private Limited.

**Investor
Helpline**

Toll Free: 1800 266 7790, Email: mf@ppfas.com

**Distributor
Helpline**

Call: 91 22 6140 6538, Whatsapp: 77770 05775, Email: partners@ppfas.com

Website: www.amc.ppfas.com

Mutual Fund investments are subject to market risks, read all scheme related documents carefully.