

Dated:

Zuari Finserv Private Limited

Sub : Addition / Change of Signature in Demat Account No. _____

Dear Sir / Madam,

I/We wish to change our existing signature, for the account number as mentioned above

Name of Account Holder(S) (Name should be in the same order as they are appearing in the Demat A/c)	New Signature (s)
Sole/First Holder Name	
Second Holder Name	
Third Holder Name	

Reason for change of signature (Mandatory)

Medical Reason Signature changed over a period of time Any other _____

Attestation by the Bank (Mandatory)

Bank Account No	
Bank Address	
Name of Attesting Authority	
Designation	
Employee No.	
Signature of Attesting Authority	Bank Stamp / Seal

Signature of Holders (s) in the presence of DP Officials :

Sole / First Holder

Second Holder

Third Holder

DP Officer Name :

DP Officer Signature:

PS: This request should be submitted with Id Proof of the customer viz. Pan Card, Voter Id , Driving License, Passport.