

Please fill all the details in **Block Letters** in English. Please mark (✓) on the appropriate column.

Application No.: .....

Date: dd / mm / yyyy

DP ID	1	2	0	2	5	8	0	0	Client ID									
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### Account Holder's Details

First/Sole Holder Name	
Second/Joint Holder Name	
Third Holder Name	

I/We request to carry out the change of correspondence/permanent address / signature in the demat account

I/We request to carry out the change of address / signature in the KRA and demat account

I/We request you to make the following additions / modifications / deletions to my/our account in your records.

Details (Please specify change of correspondence / permanent address, bank details, tel. no., sub-status etc.)	Addition/ Modification/ Deletion (Please specify)	Existing Details	New Details
CHANGE OF BANK DETAILS	<input type="checkbox"/> Addition <input type="checkbox"/> Modification <input type="checkbox"/> Deletion	Bank A/C No.: - MICR CODE (Mandatory):- _____ IFSC CODE:- _____ Bank Address: - _____	Bank A/C No.: - MICR CODE (Mandatory):- _____ IFSC CODE:- _____ Bank Address: - _____
CHANGE OF ADDRESS <input type="checkbox"/> Correspondence <input type="checkbox"/> Permanent	<input type="checkbox"/> Addition <input type="checkbox"/> Modification <input type="checkbox"/> Deletion	Add:- _____ City: - _____ State: - _____ Country: - _____ Pin: _____ Mob: - _____ E Mail Add:- _____	Add:- _____ City: - _____ State: - _____ Country: - _____ Pin: _____ Mob: - _____ E Mail Add:- _____
CHANGE OF FINANCIAL / INCOME DETAILS	<input type="checkbox"/> Addition <input type="checkbox"/> Modification <input type="checkbox"/> Deletion	<input type="checkbox"/> < Rs. 1 Lakh <input type="checkbox"/> Rs. 1 - 5 Lakh <input type="checkbox"/> Rs. 5 - 10 Lakh <input type="checkbox"/> Rs. 10 - 25 Lakh <input type="checkbox"/> Rs. 25 Lakh - 1 Crore <input type="checkbox"/> > Rs. 1 Crore	<input type="checkbox"/> < Rs. 1 Lakh <input type="checkbox"/> Rs. 1 - 5 Lakh <input type="checkbox"/> Rs. 5 - 10 Lakh <input type="checkbox"/> Rs. 10 - 25 Lakh <input type="checkbox"/> Rs. 25 Lakh - 1 Crore <input type="checkbox"/> > Rs. 1 Crore
<input type="checkbox"/> OTHERS			

Attach an Annexure (with signature(s)) if the space above is found insufficient.

	First/Sole Holder	Second/Joint Holder	Third Holder
Name			
Signature			

(Please Tear Here)

Acknowledgement Receipt

Application No.: .....

Date: dd / mm / yyyy

Received Account Details Addition / Modification / Deletions request as per details given below:

DP ID	1	2	0	2	5	8	0	0	Client ID									
Name of First/Sole Holder																		
Name of Second/Joint Holder																		
Name of Third Holder																		

Modification request for (specify reason): \_\_\_\_\_

Depository Participant Seal and Signature