

Please fill all the details in Block Letters in English

Date: dd / mm / yyyy

<input type="checkbox"/> NSDL					<input type="checkbox"/> CDSL						
DPID IN301055 CLIENT ID						DPID 120258000 CLIENT ID					

Account Holder's Details

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

Dear Sir/Madam,

I/We am/are having afore mentioned Demat Account with M/s ZUARI FINSERV LIMITED and I/We hereby acknowledge and confirm you that I/We have received my/our DIS (Delivery Instruction Slip) Booklet and details are as follows;

Serial No. From _____ Serial No. To _____
 Serial No. From _____ Serial No. To _____
 Serial No. From _____ Serial No. To _____

The reason for NON-DELIVERY of DIS Booklet through courier services / or via POST by the Depository Participant are as follows;

Please mark (✓) on the appropriate column

- Because I/We am/are not able to receive my/our DIS Booklet as I/We am/are not available for some time at the mailing address registered in your record due to my/our personal reason.
- Because I/We have visited your branch office.
- Others (please specify) _____

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

All account Holders need to sign.

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Please Note:

** Signature should match with those updated in our records.*