Moneywise. Be wise.

ACCOUNT DETAILS ADDITION/MODIFICATION /DELETION REQUEST FORM

Regd office address: 11/6B, Shanti Chamber, Pusa Road, New Delhi – 110 005
CRF & DP office address: 9B, Netaji Subhash Marg, Daryaganj, Delhi – 110 002

Please fill the details in BLOCK letters in English (Strike Off, If not applicable)

Trading code								**Date**	D	D	M	M	Y	Y

CDSL DP A/C No.	**1**	**2**	**0**	**1**	**9**	**1**	**0**	**1**								
NSDL DP A/C No.	**I**	**N**	**3**	**0**	**3**	**6**	**5**	**5**								

Account Holders Details	
Name of First Holder	
Name of Second Holder	
Name of Third Holder	

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

☐ **Trading Account**	☐ **Demat Account**	☐ **Both**

Fields	**New Details**	**Supporting Document Enclosed**
Address Details □Correspondence □Permanent □ Both	KYC Mandatory	□ **KYC form (Mandatory)** □ **Individual client** (anyone) Aadhaar card / Driving License / Voter ID Card / Passport □ **Non-Individual client** (anyone) Telephone Bill (landline) / Electricity Bill / Bank Statement / Registered Lease or Sale Agreement ***Telephone, electricity bill or bank statement should not be older than 3 month***
Bank Details □ **Primary**	**Bank Name** **A/C Number** **IFSC** (0) **MICR**	□ Copy of latest bank Passbook □ Copy of latest bank statement □Original Cancelled Cheque ***(With Preprinted name of account holder, IFSC Code & MICR Code)***
□ **Secondary**	**Bank Name** **A/C Number** **IFSC** (0) **MICR**	
Email ID	□ **Primary** □ **Secondary** ***One email ID is not allowed in multiple accounts.*** ***If exist kindly tick on relation: ( ) Spouse / ( ) Dependent child / ( )Dependent parents***	
Contact No	□ **Primary** □ **Secondary** ***One mobile number is not allowed in multiple accounts.*** ***If exist kindly tick on relation: ( ) Spouse / ( ) Dependent child / ( )Dependent parents***	
SMS/Email Alert Facility	□ SMS □ Email □ Both	***Tick any one to receive transaction alert by Stock Exchange (for Trading A/c Only)***

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting. I am/we are aware that I/we may be held liable for it.

Client Sign	1ST Holder	2nd Holder	3rd Holder	Verified By Branch /Sub Broker with Stamp

For Office Use only:

Maker		**Checker**		**Date**	D	D	M	M	Y	Y