

	Branch:											
	DEMAT	A/c. MOI	DIFICATION FORM-D	MF								
DP ID :				Client ID	:							
Name :												
Dear Sir / Madam												
I/We are holding a demaid Change my/our address			to:		☐ Cori	esnon	denc	Δ				
										_		
If correspondence address		new Corres	pondence Address							_		
Permanent Address will All communication will b	•	_								-		
correspondence addres		City:			Pin code :							
				_	1 111 0000							
☐ Permanent / Foreign Ad	ddress / Guardian Address									_		
			City :		Pinc	ode:		1		Ī		
						Thind	الملماء			- 7		
<u> </u>	First / Sole Ho	lder	Second Holder	1 1		Third	Holae	)r		4		
PAN No.					<del>                                     </del>		1			_		
AADHAR No.							$\perp$	4		4		
Date of Birth	D D M M Y	YYY	D D M M Y Y	Y	D D N	l M	Υ	Υ	Υ	4		
Telephone No.										_		
Mobile No. Email Id										-		
I hereby declare that the										_		
aforeside mobile no. &	☐ To me ☐ My F	amily	☐ To me ☐ My Fami	ily	П	me 🗌	Му F	amil	y			
email belongs to												
I want SMS alert facility at given mobile (PIs tick)*	I I Voc I No		☐ Yes ☐ No		Yes	s 🗌	No					
Mother's Name												
* Please enclose the PAN	I card / AADHAR card / Pro	of of DOB du	lly self-attested by the client	and verifie	ed with orig	inal by	the br	anch	officia	al		
· ·		communica	tions from issuer & RTA in	Physical f	orm		, [	¬				
(In case of email ID is re	-	ount Statom	ant) from NCDL /CDCL on m	vrogistor	ad amail IF		Yes [ Yes [	_				
			ent) from NSDL/CDSL on m (Sol) to									
☐ Addition / Deletion / Mo						11011 (C			/			
		-	Non-Repatriable) in my/ou	r aforesai	d demat a	ccount	as:					
1. Ordinary to NRI (N		•	Yes No									
	Repatriable Promoter		Yes No									
-	•		ue to comply with requirem	_	r FEMA gu	iideline	es.					
□ Add/Change RBI Appr		-		dated				٦.,				
☐ Standing Instruction for	-							_  N	_			
☐ I/We authorize you to d	_						Yes	N	0 🗀			
_	ndividual/Corporate Acco									_		
☐ Submitting FATCA Dec							Yes [	_ N	o 🗌			

(Please submit duly signed copy of FATCA declaration for individuals / non individuals / corporate, as applicable)

☐ Change the financial (Bank) deta	ils for credit (receiv	ring dividends	s) & debit	(Charg	jes rec	overy)								
Please treat this authorisation as irr	evocable till further	instruction fro	om our sid	de is rec	eivedi	n writin	gandt	hesar	ne is d	luly a	cknov	wledged		
	Dividend Bank A/c Detail				Charges Bank A/c Detail									
Bank Name														
Branch Address														
Saving/Current A/c No.							1	1						
MICR Code										<u>L</u>				
IFSC Code														
* Other than PNB A/c holders, Pleas	e submit personaliz	ed cancelled	cheque l	eaf/Bai	nk A/c	stateme	ent aut	horise	d by t	he Ba	ınk of	ficial.		
☐ Change my billing category to			ar	ıd unda	te abo	ve char	ne ha	nk det:	ail					
(Charges for changed billing cate	egory will be effecti	ive from next		•	to abo	ve enai	ge ba	in act	uli .					
☐ Change in my/our Gross Annual	-	ivo iroini rioxi	manoidi	youry										
_ Change in my, can Cross / iiiniaan	For Indiv	idual						F	or No	n- Inc	dividu	ıal		
1 <sup>st</sup> Holder	2 <sup>nd</sup> Hold		3 <sup>rd</sup> Holder											
Below ₹ 1 lac	Below ₹ 1 lac	Bel	Below ₹ 1 lac				Below ₹ 20 lac							
₹ 1-5 lacs	₹ 1-5 lacs	₹1	₹ 1-5 lacs											
₹ 5-10 lacs	₹ 5-10 lacs	₹ 5-10 lacs					₹ 50 – 1 crore							
₹ 10 – 25 lacs	₹ 10 – 25 lacs	₹ 10 – 25 lacs				_ Above ₹ 1 crore								
More than ₹ 25 lacs	More than ₹ 2	More than ₹ 25 lacs			More than ₹ 25 lacs									
☐ Change in authorised signatory/m	y/our signature(s) i	n your record	on accou	ınt of _										
(Reason	I/We authorise the	Bank to allow	operatio	ns in my	y our D	emat ac	ccount	aspe	rthe n	ew si	gnatu	ures onl		
Name of H	olders	Old Signature				New Specimen Signature								
1														
2														
3														
* Please submit proof of Identify	dulv self-attested b	ov the client a	ınd verifi	ed with	origina	al by the	e bran	ch offi	cial.					
,					J	Í								
		BANKERS AT												
			•	-		ittested								
affixed his/ her new signature in my	presence. Verified	d the identity	Proof and	d photo	graph	that we	re furi	nished	are fo	ound	satis	factory		
Yours faithfully.														
Sole / 1st Holder / Signatory		2nd Holder /	Signator	 У			3rd	d Hold	er / S	ignat	ory	-		
Confirm that holder/s / authorized p	varson visited and	signed in pro	cont of th	o Bran	ch Offi	cial								
Name of Branch Official		PF No	Sent Of th	e biaii	CII OIII		natur	e & Se						
Tamo of Dianon Omolal	<u> </u>	. 140				016	, iatul	J 4 OC	,ui					
(Incomplete detail will not be acce	pted)													
For DP : Modification No.	Entered By	Verifie	ed Bv			•								
	=::::::::::::::::::::::::::::::::::::::		J											