



Account Details Addition / Modification / Deletion Request Form

SHREE BALAJI MULTICOMMODITES PVT. LTD.											
Office No. 724/725, 7 TH Floor, Sun N Moon Chamber, Near ajmer pulia, Jaipur (Raj.) 302006											

Application No.		Date	D	D	M	M	Y	Y	Y	Y
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Please fill all the details in Block Letters in English

DP ID	1	2	0	8	9	2	0	0	Client ID							
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Account Holder's Details	
Name of First / Sole Holder	
Name of Second Holder	
Name of Third Holder	

- 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, telephone number, sub-status etc.)	Addition / Modification / Deletion (Please specify)	Existing Details	New Details

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

	First/Sole Holder	Second Holder	Third Holder
Name			
Signature			

===== (Please Tear Here) =====
Acknowledgement Receipt

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

Application No.		Date	D	D	M	M	Y	Y	Y	Y
DP ID	1 2 0 8 9 2 0 0	Client ID								
Name of the Sole / First Holder										
Name of Second joint Holder										
Name of Third joint Holder										
Modification requested for: [Specify reason]										

Depository Participant Seal and Signature