## **ACCOUNT MODIFICATION REQUEST**

| Date : |  | М | М | Υ | Υ | Υ | Υ |
|--------|--|---|---|---|---|---|---|

To,

NJ Asset Management Private Limited (Formerly known as NJ Advisory Services Private Limited)

Block No.901, 6th Floor, B Tower, Udhna Udyognagar Sangh Commercial Complex, Central Road No.10, Udhna, Surat – 394210, Gujarat.

| Reque   | est for Addition/Modification/Deletion of Account Details             |  |
|---|---|--|
| I/We the undersigned, hold PMS Account No. with your Company. |   |  |
| I/We request you to make the following addition               | ns / modifications / deletions to my/our PMS account in your records. |  |

| Category       | Addition / Modification /<br>Deletion (Please specify) | Existing Details | New Details |
|----------------|--|------------------|-------------|
| Bank Detail    |  |                  |             |
| Address        |  |                  |             |
| ☐ Email ID     |  |                  |             |
| Mobile Number  |  |                  |             |
| Nominee        |  |                  |             |
| Change of name |  |                  |             |
| Signature      |  |                  |             |

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

|             | First / Sole Holder | Second Holder | Third Holder |
|-------------|---------------------|---------------|--------------|
| Name        |                     |               |              |
| Signature * |                     |               |              |

<sup>\*</sup>All the PMS Account Holders must sign as per the PMS records

Supporting document for change (self attested):

- 1. Bank details: Copy of cheque with name printed, duly attested copy of bank passbook or statement of accounts by bank authorities (not older than three months) with canceled cheque.
- 2. Address details: Copy of Ration card, Passport, Voter ID card, Driving license, Bank passbook (not older than three months), Electricity bill (not more than two months old), Telephone bill- Land line (not more than two months old).
- 3. Name: Copy of gazette notification or newspaper publication in case of an individual. Certificate of Incorporation or Registration in case of Non-Individuals.
- 4. Nominee: Nomination form of NJ India Invest Private Limited to be attached along with Modification Form.



## NJ INDIA INVEST PVT. LTD.

Registered & Correspondence Office Address: Block No.901 & 902, 6th Floor, B Tower, Udhna Udyognagar Sangh Commercial Complex,
Central Road No.10, Udhna, Surat - 394 210, Gujarat | Phone: 0261 402 5500 | Fax: 0261 402 5880
SEBI Reg No - BSE & NSE: INZ000213137 | SEBI Reg No - CDSL & NSDL: IN-DP-14-2015
Email id: dpservices@njgroup.in | Website: www.njgroup.in



## **Account Details Addition / Modification / Deletion Request Form**

| To,<br>NJ IndiaInvest Pvt. Ltd.,<br>Block No.901 & 902, 6th Floor, B Towe  | , , ,  | angh Commercial Com  | nplex, Central Road No.10  | , Udhna, Surat – 394210, Gujarat.  |
|--|--|--|--|--|
| Please fill all the details in Block Letters in En   | glish  |  |  |  |
| Application No.  |  |  |  | *Date: D D M M Y Y Y Y   |
| DP ID:   |  | Client ID:   |  | UCC No:  |
| Account Holder's Details   |  |  |  |  |
| Name of the First/Sole Holder:   |  |  |  |  |
| Name of the Second Holder:   |  |  |  |  |
| Name of the Third Holder:  |  |  |  |  |
|  | go of address / signatur   | o in the demot accoun  | .+   |  |
| I/We request to carry out the chan   |  |  |  |  |
| I/We request to carry out the chan   | ge of address / signatur   | e in the KRA and dema  | at account   |  |
| I/We request you to make the following   | additions / modification   | s / deletions to my/our  | Trading and Demat accou  | int in your records.   |
| DETAILS (Please specify change of address, bank details, telephone number etc.)  | Addition /<br>Modification /<br>Deletion<br>(Please specify)                         |  | kisting Details  | New Details  |
|  |  |  |  |  |
| Attach an Annexure (with signature(s))   | if the space above is for  | and insufficient.  |  |  |
|  | if the space above is fou  |  | nd Holder  | Third Holder   |
|  | •  |  | nd Holder  | Third Holder   |
| First / 5  | •  |  | nd Holder  | Third Holder   |
| Name Signature *   | •  |  | nd Holder  | Third Holder   |
| Name Signature *   | •  |  | nd Holder  | Third Holder   |
| Name Signature * (As per DP)   | Sole Holder  |  | nd Holder  | Third Holder   |
| Name Signature * (As per DP)  Name of client: Signature of Client* (As per Trading account Any one Proof Required from the foll Bank details: Copy of cheque with reolder than three months with cancelled.  | lowing list (Self attested ame printed, copy of b cheque.                            | ):<br>ank passbook, copy o   | of bank statement of account passbook, Electricity bill (            | Third Holder  unts duly attested by bank authorities not not more than two months), Telephone bill |
| Name Signature * (As per DP)  Name of client: Signature of Client* (As per Trading account to the content of the content to th | owing list (Self attested ame printed, copy of b cheque. , Passport, Voter ID card   | Secondary  ): ank passbook, copy of the co | of bank statement of account passbook, Electricity bill (            | unts duly attested by bank authorities not   |
| Name Signature * (As per DP)  Name of client: Signature of Client* (As per Trading accounts)  Any one Proof Required from the fole Bank details: Copy of cheque with resolder than three months with cancelled Address details: Copy of Ration carded - Land line (not more than two months)   | lowing list (Self attested ame printed, copy of b cheque.  , Passport, Voter ID card | Second Se | of bank statement of account passbook, Electricity bill (e)  Receipt | unts duly attested by bank authorities not   |
| Name Signature * (As per DP)  Name of client: Signature of Client* (As per Trading account to the content of the content to th | lowing list (Self attested ame printed, copy of b cheque.  , Passport, Voter ID card | Second Se | of bank statement of account passbook, Electricity bill (e)  Receipt | unts duly attested by bank authorities not   |
| Name Signature * (As per DP)  Name of client: Signature of Client* (As per Trading account Details Addition / Management Addition No.  | lowing list (Self attested ame printed, copy of b cheque.  , Passport, Voter ID card | Secondary  ): ank passbook, copy of the co | of bank statement of account passbook, Electricity bill (e) Receipt  | unts duly attested by bank authorities not not more than two months), Telephone bill               |
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| Name Signature * (As per DP)  Name of client :  Signature of Client* (As per Trading account)  Any one Proof Required from the folder than three months with cancelled Address details: Copy of Cheque with rolder than three months with cancelled Address details: Copy of Ration cand - Land line (not more than two months)  Received Account Details Addition / Mapplication No.  DP ID:  Name of the First / Sole Holder:  | lowing list (Self attested ame printed, copy of b cheque.  , Passport, Voter ID card | Secondary  ): ank passbook, copy of the co | of bank statement of account passbook, Electricity bill (e) Receipt  | unts duly attested by bank authorities not not more than two months), Telephone bill               |
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