

ACCOUNT MODIFICATION REQUEST

Date :

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.

Request for Addition/Modification/Deletion of Account Details

I/We the undersigned, hold PMS Account No.

I/We request you to make the following additions / modifications / deletions to my/our PMS account in your records.

Category	Addition / Modification / Deletion (Please specify)	Existing Details	New Details
<input type="checkbox"/> Bank Detail			
<input type="checkbox"/> Address			
<input type="checkbox"/> Email ID			
<input type="checkbox"/> Mobile Number			
<input type="checkbox"/> Nominee			
<input type="checkbox"/> Change of name			
<input type="checkbox"/> Signature			

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

	First / Sole Holder	Second Holder	Third Holder
Name			
Signature *			

*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.



Account Details Addition / Modification / Deletion Request Form

To,
NJ IndiaInvest Pvt. Ltd.,

Block No.901 & 902, 6th Floor, B Tower, Udhna Udyog Nagar Sangh Commercial Complex, Central Road No.10, Udhna, Surat – 394210, Gujarat.

Please fill all the details in Block Letters in English

Application No.

*Date :

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:

I/We request to carry out the change of 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 Trading and Demat account in your records.

DETAILS (Please specify change of address, bank details, telephone number 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	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>
Signature * (As per DP)	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>	<input style="width: 95%; height: 15px;" type="text"/>

Name of client :	<input style="width: 95%; height: 15px;" type="text"/>
Signature of Client* (As per Trading account)	<input style="width: 95%; height: 15px;" type="text"/>

Any one Proof Required from the following list (Self attested) :

Bank details : Copy of cheque with name printed, copy of bank passbook, copy of bank statement of accounts duly attested by bank authorities not older than three months with cancelled cheque.

Address details : Copy of Ration card, Passport, Voter ID card, Driving license, Bank passbook, Electricity bill (not more than two months), Telephone bill - Land line (not more than two months).

(Please Tear Here)

Acknowledgement Receipt

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

Application No.

Date :

DP ID:

Client ID:

UCC No:

Name of the First / Sole Holder:

Name of the Second Holder:

Name of the Third Holder:

Modification requested for:
 (Specify reason)

Depository Participant Seal and Signature