## Account Details Addition / Modification / Deletion Request Form

KEDIA CAPITAL SERVICES PVT LTD   Corporate Office: Office no 1, Tulip Flower Valley, Khadakpada, Kalyan West-421301 Tel: 8069159999   Registered Office: Office no 1, Tulip Flower Valley, Khadakpada, Kalyan West-421301 Tel: 8069159999																
Investor grievance e-mail: grievance@kediacapital.com																
Application No. Date D D M M Y Y Y Y																
Please fill all the detai	ls in I	Block	Lette	ers in	Englis	sh										
DP ID									Client	ID						
Account Holder's D	etail	5														
Name of First / Sole	Holde	er														
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			

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									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**