

# Sharewealth Securities Limited

4th Floor, Pooma Complex

No.25/469/23, MG Road

Thrissur - 680 001

Ph: 0487- 2436500 Email: ho@sharewealthindia.com

SEBI Regn No: IN – DP – CDSL – 379 – 2006 DP ID 12047600



Ref No:

## Bank Details Addition / Modification / Deletion Request Form

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

Unique Client Code														
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DP ID										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 you to make the following additions / modifications / deletions to my/our account in your records.

Details (PI specifies change of bank details)	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		Client ID								
Name of the Sole / First Holder										
Name of Second joint Holder										
Name of Third joint Holder										

Depository Participant Seal and Signature