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SEBI SINGLE REGN NO. INZ000171936 CORPORATE MEMBER: BOMBAY STOCK EXCHANGE MEMBER ID: 3187, NATIONAL STOCK EXCHANGE MEMBER ID: 12835 MULTI COMMODITY EXCHANGE OF INDIA LTD MEMBER ID: 56265 CDSL DPID NO.12052700, DP SEBI REG.NO. IN-DP-CDSL-432-2007

## Account Details Addition / Modification / Deletion Request Form ☐ Trading & Demat ☐ Demat ☐ Trading Inward No: Date: \_\_\_ DP ID 2 5 2 7 0 Client ID Name of the First / Sole Holder Name of the Second Holder Name of the Third Holder Name of Trading Account Holder **Trading Code** Dear Sir/Madam, I/We request you to make the following Additions / Modifications / Deletions to my / our Trading / Demat /Trading & Demat account in your records. 1.Bank & Dividend Details Addition Modification **Trading Account** Demat Account Modification Bank Name & Branch A/c No A/c Type MICR (Mandatory for DP) IF SC Code 2 0 5 2 0 2. POA – Addition / Deletion $\Box$ 3.Father / Spouse Name: A) Gross Annual Income: Below 1 Lac 1-5 Lac 5-10 Lac 10-25 Lac >25Lacs **B)** Marital status □ Single □ Married **C)** Occupation: □ Private Sector Service □ Government Service □ Professional D) Contact Details: □ Business □ Agriculturist □ House wife □ Student □ Retired □ Others Tel No: Mob: D) PEP Status: ☐ Politically Exposed Person ☐ Related to a Politically Exposed Person Email ID: F) Any other Information: (√) Trade Alerts from Exchanges 4.DP Details for Trading A/c (other than TRADEWELL) Pay - in Pay - out Third Holder First / Sole Holder Second Holder Signature\* (As per DP) \* To be signed by Authorised signatories with rubber stamp for other than individuals 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 four months with cancelled cheque. DP details: - Latest transaction statement/holding statement/CML copy. For Office Use only IPV Done Checker Maker Staff Name: Designation: Name of the org: Tradewell Securities Ltd. **HO** Received Stamp Signature:

Date: