

Registered Office: 807, New Delhi House, Barakhamba Road, Connaught Place, New Delhi, 110 011

Correspondence Office: RKSVM Securities India Private Limited, Salasar Business Park, Off 150 Feet Flyover Road, Bhayander West, Thane, Maharashtra 401101

Telephone: +91-22-6130-9999 | **Fax:** +91-22-6710-7492 | **Email:** vidya.jadhav@rksv.net / harishchandra.sawant@rksv.net, www.upstox.com

ACCOUNT DETAILS ADDITION / MODIFICATION / DELETION REQUEST FORM

Application No.		Date (dd/mm/yyyy)																
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Please fill all the details in Block Letters in English

DP ID	1	2	0	8	1	8	0	0	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 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 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			
Signature			



Powered by RKSVM Securities India Private Limited
SEBI REG NO.IN-DP-118-2015

===== (Please Tear Here) =====

Acknowledgement Receipt

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

Application No.		Date (dd/mm/yyyy)																
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DP ID	1	2	0	8	1	8	0	0	Client ID									
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Name of First / Sole Holder	
Name of Second Holder	
Name of Third Holder	
Modification requested for: (Specify reason)	

ADD/CHANGE LINKED BANK ACCOUNT

To, RKS
30th Floor, Sunshine Tower,
Senapati Bapat Marg,
Dadar (W),
Mumbai 400 013

Sub Request to change my linked bank account

Dear Sir/Madam,

I currently have an account with RKS Securities and/or RKS Commodities. I wish to change one of my linked bank accounts or add a new bank account with my trading account.

☐ I WOULD LIKE TO ADD A SECONDARY BANK ACCOUNT

☐ I WOULD LIKE TO CHANGE A LINKED BANK ACCOUNT

NEW BANK ACCOUNT INFORMATION			
BANK NAME			
BRANCH ADDRESS			
CITY/TOWN/VILLAGE	PIN CODE	STATE	
		COUNTRY	
ACCOUNT NUMBER	MICR NUMBER	IFSC CODE	
ACCOUNT TYPE <input type="radio"/> CURRENT <input type="radio"/> SAVINGS <input type="radio"/> OTHERS (Please Specify) _____			
OLD BANK ACCOUNT INFORMATION (IF CHANGING)			
BANK NAME			
BRANCH ADDRESS			
ACCOUNT NUMBER			

I/We am/are enclosing herewith copy of either one month's bank statement and an original cancelled copy of cheque leaf.

Yours faithfully,

CLIENT'S NAME	
CLIENT'S SIGNATURE <u>X</u>	DATE (DD/MM/YYYY)
CLIENT ID	