

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

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ACCOUNT DETAILS ADDITION / MODIFICATION / DELETION REQUEST FORM

CHANGE ACCOUNT DETAILS Trading CDSL Commodity

UCC		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								
PAN									Aadhaar No.								

Account Holder's details

Name of First / Sole Holder							
Name of Second Holder							
Name of Third Holder							

Tick either one box or both boxes to specify change Permanent Address Correspondent Address

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 <small>(Please specify change of address, bank details, mobile*, email*, etc.)</small>	Addition / Modification / Deletion <small>(Please Specify)</small>	Existing Details	New Details

* The mobile and email address provided belong to me. (Note on mobile and email declaration.)

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

Proof of address to be provided by applicant. Please submit ANY ONE of the following valid documents & TICK against the document attached

- Passport Ration Card Registered Lease/Sale Agreement of Residence Driving Licence Voter Identity Card
 *Latest Gas Bill *Latest Bank A/C Statement/Passbook *Latest Telephone Bill (Only landline) *Latest Electricity Bill
 Aadhaar Card Others (Please Specify) _____

*Not more than 3 months old. Validity/Expiry date of proof of address submitted (dd/mm/yyyy) _____

Proof of Identity submitted for PAN exempt cases. Please tick.

- Aadhaar Card Passport Voter ID Driving Licence Others _____

Proof of Bank

- Copy of canceled cheque leaf/ Pass book/ Bank Statement (Please ensure the document specifies the name of the constituent, MICR Code and/or IFSC code of the bank.)

Declaration

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/We undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I may be held liable for it.

	First / Sole Holder	Second Holder	Third Holder
Name			
Client's Signature	/	/	/
PLACE:	DATE (DD/MM/YYYY) _____		

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FOR OFFICE USE ONLY

AMC/Intermediary name OR code	IPV Done	<input type="checkbox"/> on (dd/mm/yyyy)	
<input type="checkbox"/> (Originals verified) True copies of documents received			Seal/Stamp of the intermediary should contain Staff Name, Designation, Name of the Organization, Signature, Date
<input type="checkbox"/> (Attested) True copies of documents received Main Intermediary			

..... (Please Tear Here)

Acknowledgement Receipt

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

UCC		Date (dd/mm/yyyy)													
DP ID	1	2	0	8	1	8	0	0	Client ID						
Name of First / Sole Holder															
Name of Second Holder															
Name of Third Holder															
Modification requested for:															