

Account Details Addition / Modification / Deletion Request Form

CENTRUM BROKING LIMITED (12200) CENTRUM HOUSE CST ROAD, VIDYA NAGARI MARG KALINA, SANTACRUZ (E) TEL :- 67249000 FAX :- 67249355.		
Trading ()	Modification in (Please tick) Demat ()	Both ()

Trading Code		Date							
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Please fill all the details in Block Letters in English

DP ID	1	2	0	1	2	2	0	0	Client ID	0	0						
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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			

===== (Please Tear Here) =====
Acknowledgement Receipt

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

Application No.		Date															
DP ID	1	2	0	1	2	2	0	0	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