

Modification Form

(* Marked Fields are Mandatory)

Ref No/CRN No. _____
Received Date: ____ / ____ / ____

To,
 Motilal Oswal Fin. Ser. Ltd.
 2nd Floor, Palm Springs Center, Malad Link Road, Malad (W), Mumbai - 400064

Date : ____ / ____ / ____

I/We request MOFSL to modify details as per given below in my / our account you to make the following in your records. Account details are as under: -

* NSDL DP	N		
* CDSL DP	1 2	* Trading Account	
* PAN of 1st Holder		* Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
* Marital Status	<input type="checkbox"/> Single / <input type="checkbox"/> Married	* Date of Birth	
		* Client Type	<input type="checkbox"/> INDIVIDUAL / <input type="checkbox"/> NON-INDIVIDUAL

Father's /Spouse Name _____ Nationality Indian/ Others _____

* Please select correct Modification type

Request For Modification	Existing Details	New Details						
<input type="checkbox"/> Correspondence Address <input type="checkbox"/> Permanent Address <input type="checkbox"/> Email ID <input type="checkbox"/> Mobile/Landline <input type="checkbox"/> Bank Details <input type="checkbox"/> Signature <input type="checkbox"/> Name Change								
<input type="checkbox"/> Only Addition <table style="margin-left: 20px; border-collapse: collapse;"> <tr><td><input type="checkbox"/> DP</td></tr> <tr><td><input type="checkbox"/> Bank</td></tr> </table> <input type="checkbox"/> Add with default <table style="margin-left: 20px; border-collapse: collapse;"> <tr><td><input type="checkbox"/> DP</td></tr> <tr><td><input type="checkbox"/> Bank</td></tr> </table> <input type="checkbox"/> Other Modification <table style="margin-left: 20px; border-collapse: collapse;"> <tr><td>Please Specify</td></tr> <tr><td>_____</td></tr> </table>	<input type="checkbox"/> DP	<input type="checkbox"/> Bank	<input type="checkbox"/> DP	<input type="checkbox"/> Bank	Please Specify	_____		
<input type="checkbox"/> DP								
<input type="checkbox"/> Bank								
<input type="checkbox"/> DP								
<input type="checkbox"/> Bank								
Please Specify								

I/We wish to update the above changes in KRA / Demat / Trading account

Family Declaration: (Use separate sheet for more family members (if any))
 Please Fill up below declaration in case Email/ Mobile is already updated in sole / first holder account and wish to update same details for Family member as per SEBI guidelines.

I and my family members hereby request that mobile number being _____ and Email ID being _____, belonging to sole / first account holder shall be considered in your records for the purpose of receiving communication from you or Stock Exchanges or Depository with regard to details of trading / DP transactions executed through you.

Thus, any communication relating to our trading and demat account should be sent to the above mentioned mobile number and e-mail ID. This facility shall be extended to us as an exception, for our convenience of receiving transaction details at a single mobile number and e-mail ID.

I understand that for the purpose of availing the above facility "family" means self, spouse, dependent children and dependent parents.

Client Name	Client Code	Relationship with sole/ first holder	Signature
		Spouse / Mother / Father / Son / Daughter	
		Spouse / Mother / Father / Son / Daughter	
		Spouse / Mother / Father / Son / Daughter	
		Spouse / Mother / Father / Son / Daughter	

<p>Declaration : I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief. 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/we may be held liable for it.</p> <p>In case of email / mobile updation, I hereby give consent to receive all communication from Motilal Oswal on the above email / mobile number.</p>	Name of Organisation NSE/BSE/MCX/NCDEX - SB / AP Registration Number Person Name doing IPV Designation/ MOFSL Emp code Date of IPV/ Document Verification Signature of the Person	IPV Verification Please Affix Rubber Stamp and Sign
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Name of the Account Holder			
Signature of the Holder (Incase of Non Individual Account affix stamp with signature)	1st Holder	2nd Holder	3rd Holder