

## **EVERMORE STOCK BROKERS PVT. LTD.**

CIN - U74210GJ1984PTC118111

REG. OFFICE ADDRESS: UNIT -1-A, 15TH FLOOR, TOWER -1, GIFT CITY, GUJARAT-382355.

CORP OFFICE: UNIT NO-003, 1ST FLOOR RAGHULEELE MEGA MALL S.V.ROAD KANDIVALI

(W) MUMBAI - 400067 TEL. NO.: 022-42229999, FAX: 022-42229988, Email: backoffice@evermore.in

|  |                   | ` ′     | D: 1207         |        | 100071 | LL. IVC | <b>7</b> 022 - | <b>+</b> 22200                       | 999,1 <b>AX</b> .022 - | <b>F</b> ZZZ00 | OO, ETTI | <b>.</b> | CKOITIC | ,ewe  | _      | C.II I |
|--|-------------------|---------|-----------------|--------|--------|---------|----------------|--------------------------------------|------------------------|----------------|----------|----------|---------|-------|--------|--------|
|  |                   |         | Acco            | unt D  | etails | Ado     | dition/I       | Modi                                 | fication/Del           | etion          | Requ     | est Fo   | orm     |       |        |        |
|  |                   | •       | plica<br>ease f |        |        | etails  | s in BLC       | Date:<br>in BLOCK LETTERS in English |                        |                |          |          |         |       |        |        |
| DP<br>ID   | 1                 | 2       | 0               | 7      | 2      | 1       | 0              | 0                                    | Client ID              |                |          |          |         |       |        |        |
| Accou  | nt Hol            | der's [ | Details         |        |        |         |                |                                      |                        |                |          |          |         |       |        |        |
| Name of the First/Sole Holder  |                   |         |                 |        |        |         |                |                                      |                        |                |          |          |         |       |        |        |
| Name of the Second Holder  |                   |         |                 |        |        |         |                |                                      |                        |                |          |          |         |       |        |        |
| Name   | of the            | Third I | Holder          | ,      |        |         |                |                                      |                        |                |          |          |         |       |        |        |
|  | I/We              | reque   | est to          | carry  | out t  | he c    | hange          | e of a                               | ddress/sign            | ature          | in the   | e den    | nat a   | ccou  | nt.    |        |
|  | I/We              | reque   | est yo          | u to d | carry  | out t   | he cho         | ange                                 | of address/            | signo          | ıture i  | n the    | KRA (   | and c | dema   | t acco |
|  | e requ<br>ount in | •       |                 |        | e the  | follo   | wing a         | ıdditi                               | ons / modifi           | catio          | ns / de  | eletio   | ns to   | my/   | our E  | Demat  |
| DETAILS(Please specify change of address, bank details, telephone number etc)  Addition/ Modificati Deletion(F |                   |         |                 |        |        |         | -              |                                      | Existing               | Detail         | ls       |          | N       | ew De | etails |        |





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

|           | First/Sole Holder | Second Holder | Third Holder |
|-----------|-------------------|---------------|--------------|
| Name      |                   |               |              |
| Signature |                   |               |              |

Acknowledgement Receipt

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

| Applic                                       |   |   |   |   |   |   | Date: |   |           |  |  |  |  |
|--|---|---|---|---|---|---|-------|---|-----------|--|--|--|--|
| DP ID  | 1 | 2 | 0 | 7 | 2 | 1 | 0     | 0 | Client ID |  |  |  |  |
| Name of the Sole/First Holder                |   |   |   |   |   |   |       |   | •         |  |  |  |  |
| Name of the Second Joint Holder              |   |   |   |   |   |   |       |   |           |  |  |  |  |
| Name of the Third Joint Holder               |   |   |   |   |   |   |       |   |           |  |  |  |  |
| Modification requested for: (Specify Reason) |   |   |   |   |   |   |       |   |           |  |  |  |  |

**Depository Participant Seal and Signature** 

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