

To,

Modification Form

Ref NoICRN No.

Received Date:

(* Marked Fields are Mandatory)

Motilal Oswal Fin. Ser. Ltd.

 $2nd\,Floor, Palm\,Springs\,Center, Malad\,Link\,Road, Malad\,(W), Mumbai-400064$

Date : 1

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

NSDL DP	N						
CDSL DP 1	2				* Trading	g Account	
PAN of 1stHolder			*Gender	Male	* Date of Birt	th	
Marital Status	Single/ Married	1	I	Female	* Client Type	e [□INDIVIDUAL /□NON-INDIVIDUAL
Father's/SpouseName		Nationality Indian/Others					
* Please select correct Modification type Request For Modification Existing Details New Details							
Correspondence Ac		1					New Details
Permanent Addre							
Email ID							
Bank Details							
Signature							
Only Addition							
	DP						
Add with defau							
	It DP						
	Please Specify						
Other Modification	on		Non – Indi	vidual			Individual
		Below Rs.1	Lacs	viuuai		Below	Rs.1 lac
☐ Income Range		☐ 5 Lacs to R ☐ 25 Lacs to I					c to Rs.5 lacs c to Rs.10 lac
		More than F	Rs.1 crore				acs to Rs.25 lacs
I/We wish to update	the above change	s in KRA / Demat / Ti	rading accoun	t			nan Rs.25 lacs
Family Declaration: (Use separate sheet for more family members (if any) Please Fillupbelow declaration incase EmailIMobile is already updated in sole If irstholder account and wish to update same details for Family member as per SEBI guidelines. I and my family members hereby request that mobile number beingand EmailID 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 throughyou. 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 solel first holder Signature							
		Spouse I Mother I Father I Son I Daughter Spouse I Mother I Father I Son I Daughter					
		Spouse I Mother I Father I Son I Daughter					
Spouse I Mother I Father I Son I Daughter							
Declaration : I/We hereby declare that the details furnished Name of Organisation							
above are true and correct to the best of my/our knowledge and				NSE/BSE/MCX/NCDEX-SB/AP Registration Number			umhae
		formation is found to be resenting, I am/we are					
				Person Name doing IPV			
aware that I/we may be held liable for it. In case of email / mobile updation, I hereby give consent to receive			Designation/ MOFSL Emp code		SL Emp co	Dde IPV Verification Please Affix Rubber Stamp and Sign	
all communication from Motilal Oswal on the above er			/e email /				tion
mobilenumber.				ure of the F	Person		
Name of the Account Holder							
Signature of the Holder (Incase of Non Individual Account affix stampwith signature)		1st Hold	1st Holder		2nd Holder		3rd Holder
							Modification Version 1.9