

Account Details Addition / Modification / Deletion Request Form

SARAVANA STOCKS PVT LTD NEW NO-11 OLD NO-5 BISHOP WALLERS AVENUE (WEST) MYLAPORE CHENNAI 600 004

Application No.								[Date					
Please fill all the c	letails	in Blo	ock Le	etters	in En	glish								
DP ID	1	2	0	4	5	0	0	0	Client	ID				

Account Holder's Details	
Name of First / Sole Holder	
Name of Second Holder	
Name of Third Holder	

I/We request you to make the following additions / modifications / deletions to my/our account in your records.

Details (Pl. 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	x		

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

Application No.							D	Date	D	D	М	М	Y	Y	Y	Y
DP ID								Client ID								
Name of the Sole / First Holder																
Name of Second joint Holder																
Name of Third joint Holder																

Depository Participant Seal and Signature