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ACCOUNT DETAILS ADDITION / MODIFICATION / DELETION REQUEST FORM

UCC	Current Date										D	D	M	M	Y	Y	Y	Y
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Please fill all the details in Block Letters in English

BO ID	1	2	0	8	1	8	0											
PAN																		

Account Holder's details (Please fill in only the details that need to be changed)

Existing name of First / Sole Holder		
Existing name of Second Holder		
Existing name of Third Holder		
<input type="checkbox"/> *Change in Address	<input type="checkbox"/> Correspondence Address	<input type="checkbox"/> Permanent Address
<input type="checkbox"/> *Change of Name (New name)		
<input type="checkbox"/> *Change of PAN Number		
<input type="checkbox"/> *Change of Date Of Birth (New DOB)	DOB (dd/mm/yyyy)	D D M M Y Y Y Y
<input type="checkbox"/> *Change of Bank Details	<input type="checkbox"/> *Change of Signature	
<input type="checkbox"/> *Change of Mobile No. / Landline No.	<input type="checkbox"/> Change of Email ID	

Existing Correspondence Address : _____
 _____ Pincode: _____
 State: _____ City: _____ Country: _____
 Old Email: _____
 Old Mobile: _____

Existing Permanent Address : _____
 _____ Pincode: _____
 State: _____ City: _____ Country: _____
 Old Email: _____
 Old Mobile: _____

New Correspondence and Permanent Address : _____
 _____ Pincode: _____
 State: _____ City: _____ Country: _____
 New Email: _____
 New Mobile: _____

Details (Please Specify changes Of Bank details, Signature, Gender, Nominee (Please Specify Details)	Action Type (Please Specify)	Existing Details	New Details
	<input type="checkbox"/> Deletion <input type="checkbox"/> Addition <input type="checkbox"/> Modification		

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

Proof of address to be provided by applicant. Please submit ANY ONE of the following valid documents & TICK against the document attached
 Passport Driving Licence Voter Identity Card Aadhaar Card

Note: 1) **Pan Card copy is compulsory with a Request.** 2) The provided Address proof i.e. Passport & Driving License must be within the validity period.
 3) Validity/Expiry date of proof of address submitted (dd/mm/yyyy)

Proof of Identity submitted for PAN exempt cases. Please tick.
 Aadhaar Card Passport Voter ID Driving Licence Others _____

Declaration

I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and the entire account modification form along with supporting documents as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only.

	First / Sole Holder	Second Holder	Third Holder
Name			
Client's Signature			
PLACE:	DATE (DD/MM/YYYY) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

FOR OFFICE USE ONLY	
AMC/Intermediary name OR code	IPV Done <input type="checkbox"/> on (dd/mm/yyyy) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> (Originals verified) True copies of documents received	Seal/Stamp of the intermediary should contain Staff Name, Designation, Name of the Organization, Signature, Date
<input type="checkbox"/> (Attested) True copies of documents received Main Intermediary	
Maker (DD/MM/YYYY) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Checker (DD/MM/YYYY) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Acknowledgement Receipt

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

UCC	Date (dd/mm/yyyy)						D	D	M	M	Y	Y	Y	Y
DP ID	1	2	0	8	1	8								
Name of First / Sole Holder														
Name of Second Holder														
Name of Third Holder														
Modification requested for:														

Nomination Form
[Annexure A to SEBI circular No. SEBI/HO/OIAE/OIAE_IAD-3/P/CIR/2026/12676
dated MAY 29, 2026]

TM / DP									FORM FOR NOMINATION								
Upstox Securities Private Limited 30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar (W), Mumbai - 400 013									(To be filled in by individual applying singly or jointly)								
DATE	D	D	M	M	Y	Y	Y	Y									
I/We wish to make a nomination. [As per details given below]																	
I/We wish to make a nomination and do hereby nominate the following person(s) who shall receive all the assets held in my / our account in the event of my / our demise, as trustee and on behalf of my / our legal heir(s)																	
Nomination Details																	
NOMINEE	NAME OF NOMINEE *							SHARE OF NOMINEE % (equal share if % is not specified)				RELATIONSHIP with the applicant*					
Nominee 1																	
Nominee 2																	
Nominee 3																	

Any odd lot after division shall be transferred to the first nominee mentioned in the form.
The aforesaid details shall be optionally provide for the Guardian, in case of nominee is a minor.

Fields marked with (*) asterisk indicates Mandatory details

1) I / We want the details of my / our nominee to be printed in the statement of holding or statement of account, provided to me/us by the DP as follows; (please tick, as appropriate)

Name of nominee(s)

Nomination: Yes / No.

NOMINEE	MOBILE NUMBER AND E-MAIL (Please note that the DP/MF RTA will be able to reach out to your nominee if you provide the contact details)	IDENTITY NUMBER (Aadhaar last 4 digits, PAN, Driving Licence, Passport)	D.O.B. OF NOMINEE*	GUARDIAN
Nominee 1				
Nominee 2				
Nominee 3				

2) Signature(s) - As per the mode of holding in demat account(s)

Name(s) of Holder(s)	Signature(s) of holder/thumb impression
Sole / First Holder (Mr. / Ms.)	
Second Holder (Mr. / Ms.)	
Third Holder (Mr. / Ms.)	

If nomination is submitted:

Online: Validate through Digital Signature Certificate or Aadhaar-based e-sign or by using any other e-sign facility recognized under Information Technology Act, 2000 or two factor authentication (2FA) in which one of the factors shall be a One-Time Password (OTP) sent to the registered mobile number and email address.

Physical / Offline: Wet signature (signature of witness shall not be required). However, if thumb impression (instead of wet signature) is affixed, then the same shall be witnessed by two persons and details of such witness (name and address) shall be fully provided in this form

Note:

- Investors can provide, changes or cancel nominations any number of times.
- The signature of all joint holders shall be obtained for providing / changing nominations regardless of mode of operations.
- The nomination shall supersede any prior nomination made by the investor(s), if any.
- Investors can change nomination any number of times.
- Investor have the right to receive acknowledgement of the nomination form for each instance of nomination / subsequent change.

Declaration Form for opting out of nomination
[Annexure B to SEBI circular No. SEBI/HO/OIAE/OIAE_IAD-3/P/
CIR/2026/12676 dated MAY 29, 2026]

To	Date	D	D	M	M	Y	Y	Y	Y
Trading Member/Participant's Name	Upstox Securities Private Limited								
Trading Member/Participant's Address	30th Floor, Sunshine Tower, Senapati Bapat Marg, Dadar (W), Mumbai - 400 013								
UCC/DP ID									
Client ID (only for Demat account)									
<p>I hereby confirm that I do not wish to appoint any nominee(s) to my demat account/ mutual fund folio at this point of time. I understand that --</p> <p>(i) The nomination helps to quickly identify the person for transfer of securities and helps in faster and smoother transmission of my securities to my legal heir(s) after my demise.</p> <p>(ii) In the absence of a nomination, my legal heir(s) may require the submission of certain additional legal or court-issued documents which may delay the process of transmission securities to my legal heir(s).</p> <p>(iii) If no claim is made on the account/folio for a prolonged period after my demise, the holdings may be treated as unclaimed assets and they may be transferred to Investor Education and protection Fund Authority (IEPF) in accordance with the applicable regulatory framework.</p> <p>I confirm that I have understood above implications and that my decision to opt out of nomination is voluntary.</p>									
Name and Signature of Holder(s)*									
<p>1. _____ 2. _____ 3. _____</p>									
*Witness Details									

* Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature