

PLEASE AFFIX A
RECENT PASSPORT
PHOTOGRAPH AND
SIGN ACROSS IT

CLIENT'S SIGNATURE [1]

Registered Office: 807, New Delhi House, Barakhamba Road, Connaught Place, New Delhi, 110 011

Correspondence Office: RKSV Securities India Private Limited, Salasar Business Park, Off 150 Feet Flyover Road, Bhayander West, Thane, Maharashtra 401101

Telephone: +91-22-6130-9999 | Fax: +91-22-6710-7492 | Email: trading@rksv.net, www.upstox.com

ACCOUNT DETAILS ADDITION / MODIFICATION / DELETION REQUEST FORM																					
UCC Date(dd/mm/yyyy)																					
Please fill all the details in Block Letters in English																					
DP ID 1 2 0 8 1 8 0 Client ID																					
PAN				dhaa	ır No.																
Account Holder's deta	ils																				
Name of First / Sole Hole	der																				
Name of Second Holder																					
Name of Third Holder																					
*Change in Address	ess	Pern	naner	nt Ado	dres	S															
*Change of Mobile I	e of Email ID																				
Existing Details:	New Details :																				
	- 1	Pincode:																			
State:																					
Old Email:		State: City: New Email:																			
Old Mobile: New Mobile:																					
Details (Please Specify changes Of Addition / Modification Existing Details New Details																					
Details (Please Specify changes Of Bank details, Signature & Addition / Modification / Deletion Existing Details														IVCVV	Detail	.3					
Nominee (Please Specify Details) (Please Specify)																					
Attach an Annexure (with sign	nature(s))	if the spa	ce abov	e is fou	nd inst	ufficien	t.						•								
Proof of address to be p	rovided	by appli	cant. F	lease	subm	it ANY	ONE o	f the	following v	alid c	docun	nents	& TI	CK a	gains	t the	docu	ment a	tached		
OPassport ODriv	ing Lice	nce	O Vot	er Ide	ntity (Card	○Aad	dhaa	r Card												
Note: 1) Pan Card copy i	s compı	ılsory wi	th a Re	eques	t. 2) T	he pro	vided A	Addre	ess proof i.e	. Pass	sport 8	& Driv	ing L	icer	ıse mı	ust be	e with	in the v	alidity pe	riod.	
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 declare tha												•	_							- 1	
of any changes therein, aware that I may be held			case ar	ny of t	he abo	ove inf	ormati	on is	found to b	e false	e or u	ntrue	or n	nisle	ading	or m	isrepi	esentir	ıg, I am/V	Ve are	
aware chae may be nece																					
First / Sole Holder									Secon	l Hol	lder			Third Holder							
Name														\perp							
Client's Signature																					
PLACE: DATE (DD/MM/YYYY)																					
FOR OFFICE USE ONLY																					
AMC/Intermediary name OR	code								IPV Done		on ((dd/mı	m/yy	уу)							
☐ (Originals verified) True☐ (Attested) True copies of					ediary									Se			ation, N		ould contaiı e Organizati		
Maker (DD/MM/	YYYY)								Check	er (DI	D/MM/	/YYYY)) [T					

Acknowledgement Receipt

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

UCC							Da	Date (dd/mm/yyyy)								
DPID	1	2	0	8	1	8	·		Client ID					·	·	
Name of	Name of First / Sole Holder															
Name of	f Second	Holder														
Name of Third Holder																
Modifica	ation req	uested f	or:													