

PMS ACCOUNT MODIFICATION REQUEST



NJ ASSET MANAGEMENT PRIVATE LIMITED

Registered Office: Block No. 601, 3rd Floor, 'C' Tower, Udhna Udyog Nagar Sangh Commercial Complex, Central Road No.10,Udhna, Surat – 394210, Gujarat
Corporate Office: Unit No. 101A, 1st Floor, Hallmark Business Plaza, Bandra (East), Mumbai – 400051, Maharashtra.

(Please fill in the information below legibly in English and in CAPITALS)

Date

PMS Account No:

First Holder Name: First Name Middle Name Last Name

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

BANK DETAILS

☐ MODIFICATION OR ☐ DELETION OR ☐ ADDITION

PARTICULARS	EXISTING	NEW (this needs to be mentioned only in case of Modification)
Bank Name	<input type="text"/>	<input type="text"/>
Bank A/C No	<input type="text"/>	<input type="text"/>
IFSC	<input type="text"/>	<input type="text"/>

Copy of cheque with name printed, duly attested copy of bank passbook or statement of accounts by bank authorities (not older than three months) with canceled cheque. (Supporting document provided for change must be self attested)

EMAIL - ID DETAILS

PARTICULARS	First Holder	Second Holder	Third Holder
Existing Email ID	<input type="text"/>	<input type="text"/>	<input type="text"/>
New Email ID	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email ID pertains to	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children

MOBILE NO DETAILS

PARTICULARS	First Holder	Second Holder	Third Holder
Existing Mobile No	<input type="text"/>	<input type="text"/>	<input type="text"/>
New Mobile No	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile No pertains to	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Parent <input type="checkbox"/> Dependent Children

Notes:

- Investors are requested to use same pen(ink) for form filling and signatures across the document(s).
- The application should be submitted to NJ Asset Management Private Limited (NJ AMPL) within 15 days from the date of request

x

Sole/First Applicant/ Authorised Signatory

x

Second Applicant/ Authorised Signatory

x

Third Applicant/ Authorised Signatory

PMS ACCOUNT MODIFICATION REQUEST

ADDRESS DETAILS

PERMANENT	CORRESPONDENCE (<input type="checkbox"/> Same as permanent address)
ADDRESS: _____	ADDRESS: _____
City: _____ State: _____	City: _____ State: _____
Country: _____ PIN Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Country: _____ PIN Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Any changes to your address must be updated in KYC first, followed by modifications in your PMS Account and Trading & Demat Account.

NAME UPDATION

PARTICULARS	EXISTING	NEW
First Holder		
Second Holder		
Third Holder		

(1) Copy of PAN, copy of gazette notification or newspaper publication in case of an individual. Certificate of Incorporation or Registration in case of Non-Individuals
 (2) Any changes to your name must be updated in KYC first, followed by modifications in your PMS Account and Trading & Demat Account.

SIGNATURE UPDATION

PARTICULARS	EXISTING	NEW
First Holder		
Second Holder		
Third Holder		

In case the investor has forgotten their signature, they can refer to the PMS Application form.

OTHERS (Please specify below)

PARTICULARS	EXISTING	NEW

- Notes:**
- Investors are requested to use same pen(ink) for form filling and signatures across the document(s).
 - The application should be submitted to NJ Asset Management Private Limited (NJ AMPL) within 15 days from the date of request.

<p>x</p> <p>Sole/First Applicant/ Authorised Signatory</p>	<p>x</p> <p>Second Applicant/ Authorised Signatory</p>	<p>x</p> <p>Third Applicant/ Authorised Signatory</p>
--	--	---



Application for Change of Signature in Trading and Demat Account

To,
NJ India Invest Private Limited,
Block No. 901 & 902, 6th Floor, 'B' Tower, Udhna Udyog Nagar Sangh Commercial Complex, Central Road No. 10, Udhna, Surat - 394 210, Gujarat, India.

*Date :

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

DP ID:

--	--	--	--	--	--	--	--	--	--

 Client ID:

--	--	--	--	--	--	--	--	--	--

 UCC:

--	--	--	--	--	--	--	--	--	--

I / We want to change my / our signature(s) in my / our above mentioned trading and Demat Account due to the reason(s) mentioned below.
(Pl. tick the appropriate reason/s).

- ☐ Due to inconvenience in signing ☐ Signature changed after a period of time ☐ Unable to remember old signature.
☐ Others. (Please specify _____).

Holder	Name of holder whose signature is to be changed	New Signatures
1st Holder		
2nd Holder		
3rd Holder		

- ☐ Valid proof of Identity ☐ Separate Bank-Attested Signature Verification Form/ Banker's attestation as tabled below:

Name of the Bank	
Address of Branch	
Bank Ac Number	
Name of the Bank official	
Designation	
Branch Official Employee Code	
Signature of branch official along with branch stamp.	

----- Acknowledgment -----

DP ID:

--	--	--	--	--	--	--	--	--	--

*Date :

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Client ID:

--	--	--	--	--	--	--	--	--	--

Received Change of Signature for above mentioned Demat Account.

for holder _____

NJ India Invest Private Limited
(Signature & stamp)