

ARN-4464

E032737 VIKRAM S. BAGADTHEY

1. Folio No

2. Request For (Please ✓):  Change of Signature  Change of Name

3. Change For  Sole/First Unit Holder  Second Unit Holder  Third Unit Holder

4. PAN No. of holder requesting change

5. Give details below:

	Old	New
Signature	Signature if applicable	Sign Here
Name	Old name for records	New name for records

6. Reason for change:

7. Signature as per mode of holding:

Signature of 1st/Sole holder	Signature of 2nd holder	Signature of 3rd holder
Name of 1st/Sole holder	Name of 2nd holder	Name of 3rd holder

8. Mandatory documents (to be enclosed)

<p><b>Change of Signature:</b></p> <p>1. <input type="checkbox"/> In-Person Verification (IPV) at CAMS/DSPIM Offices.</p> <p>2. <input type="checkbox"/> PAN card copy / Attested photo identity proof for PAN exempt cases. [Self attested]. Bring original for verification.</p>	<p><b>Change of Name:</b></p> <p>1. <input type="checkbox"/> KYC - KRA Acknowledgement with <u>New</u> Name, OR</p> <p>2. <input type="checkbox"/> KYC Change Details Form, with following documents (OR full KYC to be done with all documents, if KYC not done earlier):</p> <p><input type="checkbox"/> PAN card copy in <u>New</u> name / Photo identity proof for PAN exempt cases. [Self attested]</p> <p><input type="checkbox"/> Marriage Certificate / Divorce Deed / Gazetted copy of name change, copies duly attested.</p> <p><input type="checkbox"/> Bring original for verification.</p>
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9. IPV Section (In-Person Verification) for Change of Signature (For Office Use)

<p><b>Checklist:</b></p> <p><input type="radio"/> IPV done for _____ &lt;Name&gt;</p> <p><input type="radio"/> Client verification In Person with PAN Card/Photo Identification Proof</p> <p><input type="radio"/> PAN Card/Photo Identification Proof verified with original</p> <p><input type="radio"/> Signed on copies in official's presence</p>	<p>IPV done by:</p> <p>Name: _____</p> <p>Designation: _____</p> <p>Organization: _____</p> <p>Employee No: _____</p> <p>Location: _____</p> <p>Date of IPV: _____</p> <p style="text-align: right;">Official signature, with Company Seal</p>
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- ▶ The fund and the RTA reserve a right to call the customer for any additional documents or in-person verification and keep this request or any other transaction in abeyance or reject, pending fulfilment of such requirements.
- ▶ Please allow upto seven business days for updation of the new signature before submitting a redemption/any other request.

**ACKNOWLEDGEMENT** **Change of Name / Signature: Request Form** **DSP MUTUAL FUND**

Received, subject to verification and without prejudice, request for updation of new names / signatures in:

Name of the Sole/First Unit Holder \_\_\_\_\_

Folio No/s \_\_\_\_\_

email: service@dspim.com www.dspim.com Call: Toll Free No: 1800-208-4499 / 1800-200-4499

