ARN-4464 E032737 VIKRAM S. BAGADTHEY



To be filled in Capital Letters. Please read the section on Instructions – Terms and Conditions, prior to filling in the form

Change in Account Information													
Folio No(s).													
Name of the Unithol	ders										PAN		
Sole/First Applicant													
Joint Holder Name 1													
Joint Holder Name 2													
Name of Guardian (i	n case of Minor)												
Change of Ac	ddress as per KF	RΔ											
Please note that your ac (KRA), kindly visit neares	Please note that your address details will be updated as per your KYC records with CVL / KRA. In case the above-mentioned PAN(s) is/are not verified by KYC Registration Agency (KRA), kindly visit nearest Point of Service of KRA and submit the KYC Form along with relevant documentary proof. For more information in this regard please read "INSTRUCTIONS / CHECK LIST FOR FILLING KYC FORM" detailed on the reversed side of the KYC form.												
■ Change/Upd	ation of Contac	t Details o	f Sole /	First Appli	icant								
E-mail address													
Mobile No.			STD Code		Resid					Office Tel. No.			
■ Registration	of Power of Att	torney											
POA Holder Name									PAN				
FATCA-CRS Declaration & Supplementary Information													
	Are you a tax re country other tha		y Cit	y & Country Birth	of	Nationality			Тур	e of Address	of Address given at KRA		
1 st Unit Holder	□ Yes	□ No						☐ Res	idential	☐ Business	. 🗆	Registered Office	
Joint Holder 1	□ Yes	□ No						☐ Res	idential	☐ Business	. 🗆	Registered Office	
Joint Holder 2	□ Yes	□ No						☐ Res	idential	☐ Business	. 🗆	Registered Office	
Guardian in case of Minor	□ Yes	□ No						☐ Res	idential	☐ Business	. 🗆	Registered Office	
POA Holder	☐ Yes	□ No						☐ Res	idential	☐ Business	. 🗆	Registered Office	
*If yes, fill and attach FA I hereby confirm that the informa understood the FATCA & CRS Term also undertake to provide any other	ition provided here in above is ns and Conditions below and he	ereby accept the same	e. I also underta	ke to keep you infor	med in writi	ing about any	changes / modif						
■ Change/Upda	ation of Bank D	etails : In cas	se of investi	ment under M	inor stati	us, Minor	should be o	ne of the	Bank Acco	ount holders un	der the	below bank.	
Bank Account Number	er#												
Bank Account Type (F	☐ Savings	□ Curre	ent 🗆 N	RE 🗆	NRO	□ FCNR	□ 0	thers (Ple	ease specify)				
Bank Name and Branch													
RTGS/IFSC/NEFT Cod	e		11 digit co	de is printed on the	cheque boo	ok		MICE	R Code	9 Digit N	lumber n	ext to the Cheque No.	
■ Change of Me	ode of Holding		C	hange of S	Status								
	ither / Anyone or Su	urvivor		esident India			ent Indian		Non Resid	dent Indian to	Resid	ent Indian	
■ Change/Corr	ection of Name												
☐ Sole/First Applicant ☐ Joint Holder Nam			☐ Joint Holder Name 2			☐ Name of Guardian ☐			Nominee Na	☐ Assignee Name			
Change/Correct Na	ame as												
Please enclose the relevan	nt documentary proof	duly attested a	as listed in					rejected i	f any infor	mation is miss	ing or i	ncorrectly filled or	
Signature of Sole/1st Applicant/POA Joint			Signature of Older 1 / POA Holder			Signature of Joint Holder 2/ POA Holder				Signature of Guardian in case of Minor			

Holder/Authorized Signatory