



INVESTMENT SECURITIES LIMITED

REG. OFFICE: 14th Floor, Solitaire Sky, Opp. Gujarat Vidhyapith, Ashram Road, Ahmedabad – 380014. Ph: 91-79-6915-3600

DP ID : IN301233

APPLICATION FOR CHANGE IN SIGNATURE

| | | | | | | | | | |
|-------------------|--|--|--|--|--|--|--|--|--|
| DEMAT CODE | | | | | | | | | |
|-------------------|--|--|--|--|--|--|--|--|--|

Date : / /

(Please Tick () whichever is applicable)

I/We request to carry out the change of signature in the demat account

I/We request to carry out the change of signature in the KRA and demat account

I/We request you to change my/our registered in your records as per below details:

| Holder | Name of Holders & PAN | Old Signature | New Signature |
|------------|-----------------------|---------------|---------------|
| Sole/First | | | |
| | | | |
| Second | | | |
| | | | |
| Third | | | |
| | | | |
| Reason | | | |

Customer's Bank Account type:_____ Account Number:_____

Attestation by Bank with seal and full Address:

Signature of Attesting Authority:_____

Name of Attesting Authority:_____

Designation of Attesting Authority:_____

I/We do hereby solemnly declare that the details hereinabove submitted by me/ us is/ are true to my/ our own knowledge.”

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

| | Firs / Sole Holder | Second Holder | Third Holder |
|-----------|--------------------|---------------|--------------|
| Name | | | |
| Signature | | | |

Instructions:

1. identity Proof is compulsory with a request to change signature
2. The form should be signed by all the account holders and stating the reason for change of signature.
3. The letter or account modification form containing the old signature and new signatures must be attested by the BO's Banker.