

FOLIO DETAILS

Folio Number		PAN	
Investor's Name			

DECLARATION OF OLD/ EXISTING BANK ACCOUNT DETAILS

This has the reference to my/ our investments in the captioned folio(s) in your Fund. I/ we would like to Change my/our Bank Mandate registered in the referred Folio (s) for which I/we confirm having the required documentary proof for the new bank mandate (which is enclosed along with this request) to be registered; am unable to provide the documents towards old bank mandate whose details are provided below.

Bank Name			
Account Number		IFSC * Code	
Account Type	☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR	MICR Code	
Name of Bank Branch			
	CITY	PIN	

*11 digit code appearing on the cheque leaf. If you do not find this on your cheque, please check for the same with your local Bank.

NEW BANK ACCOUNT DETAILS

I/ We hereby submit this document during personal visit to your Investor Service Centre to update the following new bank mandate details based on the documentary proof enclosed. I/ We hereby declare that given information/ statement above is true and can be relied upon by AMC/ RTA and no claims shall be made in future.

Bank Name			
Account Number		IFSC * Code	
Account Type	☐ SB ☐ Current ☐ NRO ☐ NRE ☐ FCNR	MICR Code	
Name of Bank Branch			
	CITY	PIN	

*11 digit code appearing on the cheque leaf. If you do not find this on your cheque, please check for the same with your local Bank.

CHANGE IN TAX STATUS: In-case of Change in Tax Status, please tick the applicable new tax status

☐ Resident Individual	☐ NRI on Repatriation Basis	☐ NRI on Non-Repatriation Basis
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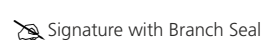
CONTACT DETAILS OF THE APPLICANT

Mobile Number			
Specified Mobile Number belongs to: (please tick one)	☐ Self ☐ Spouse ☐ Guardian (for Minor investment)		
	☐ Dependent Children ☐ Dependent Parents ☐ Dependent Siblings	☐ PMS ☐ POA ☐ Custodian	
E-mail Address			
Specified E-mail Address belongs to: (please tick one)	☐ Self ☐ Spouse ☐ Guardian (for Minor investment)		
	☐ Dependent Children ☐ Dependent Parents ☐ Dependent Siblings	☐ PMS ☐ POA ☐ Custodian	
Address			
	CITY	STATE	PIN

(Please note that the address of the claimant will be updated as per address on KYC form / KYC Registration Agency records)

FOR OFFICE USE ONLY

I have done the In-Person verification of the above referred investor(s) along with ID document specified above; also matched with the information available for the said Folio(s) and found them in order. Also verified the availability of new bank mandate documentary proof with originals and found them in order by matching with the details indicated above.

Employee Name			
Employee No.			
Location	☐ AMC ☐ CAMS	Location:	
Date			

IDENTITY DETAILS

My/ Our identity details (copy enclosed & original shown for verification)*

Description	Sole/ First Holder/ Guardian	Joint Holder 1	Joint Holder 2
PAN			
Passport			
Aadhaar Card*			
Others (Please specify)			
Holders Name			
Contact Number			

First 8 digits of Aadhar Number to be blacked-out

SIGNATURE(S)

(To be signed by all unit-holders if mode of holding is joint)

 Signature of Sole/ First Unit-holder

 Signature of Joint Holder 1

 Signature of Joint Holder 2

Computer Age Management Services Pvt. Ltd. (Registrar)

AVA Tower, Old No. 788 & 789, Electricity Avenue, New No. 152 & 150, Anna Salai, Beside Rayala Towers, Chennai - 600002. ☎ 044 6110 4034



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