

PLEASE SEND THE FOLLOWING DOCUMENTS TO OUR RTA (ADDRESS MENTIONED BELOW) FOR CHANGE OF ADDRESS :-

1. Written Letter duly signed by the shareholder concerned quoting Ledger Folio Number,
2. Self Attested copy of PAN Card of Shareholder,
3. Cancelled Cheque Leaf of Bank Account having Name of the shareholder **OR** Cancelled Cheque Leaf alongwith Copy of 1st Page of Passbook of Bank Account of shareholder,
4. Email ID of shareholder,
5. Self Attested copy of New Address Proof of Shareholder (Copy of any one of the following having new address):-
 - a. Election ID
 - b. Driving License
 - c. Passport
 - d. Electricity Bill
 - e. Water Bill
 - f. Aadhaar Card
6. Duly filled in Format for Correction of Name / Address / Bank particulars (Format attached),
7. Shareholder's Signature Verification Certificate as issued by the Bank Manager under his / her Name, Designation, Employee Code and Bank's Rubber Stamp (Format attached).

ADDRESS OF RTA :-

**M/S. LINK INTIME INDIA PVT. LTD.
B-102 & 103, SHANGRILA COMPLEX, OFF. HDFC BANK,
NEAR RADHAKRISHNA CHAR RASTA, AKOTA,
VADODARA – 390020**

Tel. No. : 0265 - 2356 573 / 2356 794

Email : alpesh.gandhi@linkintime.co.in / vadodara@linkintime.co.in

REQUEST FOR CORRECTION OF NAME/ADDRESS/BANK PARTICULARS

To:

Date: _____

Link Intime India Pvt. Ltd
C-13, Pannalal Silk Mills Compound,
L.B.S. Marg, Bhandup (West),
Mumbai 400078.

**Sub. : Request for Correction of Name /Address/Bank particulars for securities held in
PHYSICAL form**

Ref.: Folio No. _____ :

Unit/Series/Issue Name _____ :

ISIN/s (refer to attached allotment advice): _____

Dear Sir,

Please note the corrections in my above mentioned Folio No. and update the same in your records.

Personal Details: (Tick as applicable)

Correction of Name (Enclose copy of any one Identity proof from
[1) PAN card 2) Driving License 3) Election Id Card 4) Passport]

First Name _____ :

JNT 1: _____

JNT 2: _____

Nominee Name: _____

Correction of Address (Enclose copy of any one Address proof from
[1) (*) Electricity Bill 2) (*) Telephone Bill 3) (*) Bank Pass Book 4) (*) Passport
(*) 1, 2,3 should be not more than 3 months old]

City: _____ **State:** _____ **Pincode:** _____

Bank Details (Enclose an original cancelled blank Cheque):

Bank Name: _____ **Account No:** _____

IFSC Code: _____ **MICR Code:** _____

Kindly update the same in your records for all future purposes.

Yours truly,

(Name and signature of First Holder)

Mobile/Tel No: _____ **Email:** _____

Confirmation of Signature of shareholder by the Banker with their official Rubber Stamp Giving the full address of the Bank and the Employee Code number of the official signing this form.

1. Name of the Bank :

2. Full Address of the Bank :

3. STD Code/Telephone No :

4. Type of Account : **Current / SB / HUF / O/D / Others**

5. Name of Account Holder[s]: 1)

2)

3)

6. Address of Account Holder[s] as recorded with the Bank

7. Account Number : _____

8. Signature of the Holder/s

1) _____

2) _____

3) _____

Place:

Date:

Signature Verified as recorded with the Bank

(Sign) _____

Bank Manager :

Emp Code :

Rubber Stamp of the Bank

Code No.

Address: