ACCOUNT DETAILS ADDITION/MODIFICATION/DELETION REQUEST FORM

DATE:			
Thirani Securities P Todi chambers,4 th f 2,Lal Bazar Street, Kolkata-700001.			
CLIENT ID:			
NAME OF THE A/C HOLDER:			
I/We request you to my/our account det		ng additions/modificads.	ations/deletions to
DETAILS (Please specify ,change of address,bank details,telephone number,Email id,DP etc.)	ADDITION/ DELETION/ MODIFICATION (Please specify)	EXISTING DETAIL	NEW DETAIL
Attach an annexure (with signature(s)) if the space above is found insufficient.			
ACCOUNT HOLDER			
NAME (in block letters)			
SIGNATURE			

INSTRUCTIONS TO ACCOUNT HOLDER (S)

- Please submit copies of proof of new address incase of address modification with supporting documents.
- Incase of bank detail modification/change; please provide pre printed personalized cancelled cheque along with bank statement (if not available then provide cheque along with the passbook, with bank seal)
- Incase of addition of new demat account please submit a copy of client master/DP holding or DP transaction statement.
- Incase of mobile number updation please provide a copy of the latest bill