

**Hem Securities Ltd./ Hem Finlease Pvt. Ltd./ Hem Multi Commodities Pvt. Ltd.**

MEMBER: BSE/ NSE/ MCX/ NCDEX/ CDSL

203/ 215, Jaipur Tower, M.I. Road, Jaipur- 302001, Rajasthan

Tel.: 0141- 4051000/ 01

E-mail- investorgry_dpjaipur@hemsecurities.com/
investorgrievance@hemsecurities.com**Request Form for Modification/ Addition/ Deletion in Trading and Demat Account**

Application No.	
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Date: __/__/____

I/ We request you to make the following Modification/ Addition/ Deletion in my/ our Demat and Trading account in your records.

DP ID:	1	2	0	1	7	7	0		Client ID:									
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Client's Trading Code	
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Account Holder's Details	
Name of the First/ Sole Holder	
Name of the Second Holder	
Name of the Third Holder	

Please update the details in my trading account with you in the following Exchanges:

(Please Tick mark on the appropriate column)

BSE		NSE		MCX		NCDEX	
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 I/ We request you to change my/ our Correspondence Address / Permanent Address/ Signature as per following:**Request for Modification/ Addition/ Deletion:**

Details (please specify change of correspondence/ permanent Address, Bank Details, Email Id, Mobile No, sub-status, etc.)	Addition/ Modification/ Deletion (Please Specify)	Existing Details	New Details

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

(Kindly affix stamp along with the signature in case of Account of Minor/ HUF/ Firm/ Company).

	FIRST/ SOLE HOLDER	SECOND HOLDER	THIRD HOLDER
Name			
Signature of Client			

Important Note:

- Kindly attach a self-attested documentary proof for required updation. Without such proof, request will not be processed.
- Updation in Account will be processed only on receipt of Request Form at Head Office, Jaipur Tower, M.I. Road, Jaipur, Rajasthan.

Received By: _____ Dated: _____ Checked by: _____ Audited By: _____

Hem Securities Ltd./ Hem Finlease Pvt. Ltd./ Hem Multi Commodities Pvt. Ltd.**Application No.:** _____ **Acknowledgment Receipt**

We hereby acknowledge the receipt of your instruction for modification/ addition/ deletion of following fields, subject to verification. Modification instruction for:

DP ID	1	2	0	1	7	7	0		Client ID									Client's Trading Code
Modification Request For									<input type="checkbox"/> Address <input type="checkbox"/> Bank Details <input type="checkbox"/> Email Id <input type="checkbox"/> Mobile No <input type="checkbox"/> DP Addition in Trading A/C <input type="checkbox"/> Any other Modification, Please specify _____									

Received By: _____ Signature: _____ Dated: _____