



**ANNEXURE I APPLICATION FOR CHANGE / MODIFICATION/ UPDATE BUSINESS ASSOCIATE DETAILS**

The Manager,  
**Kataria Group and Investment Limited**  
Distribution Division

Date: \_\_\_ / \_\_\_ / \_\_\_

Dear Sir/Madam,

Subject: Partner Code: \_\_\_\_\_ in the name of \_\_\_\_\_

I request you to effect the change in my following details in your records.

- 1) Please maintain following as my correspondence address for all brokerage cheques/ correspondence pertaining to above Partner code(s). (Valid address has to be attached supporting new address details)

Correspondence Address	Present Address	New Address
* Flat No., Name of Building		
* Street		
* Landmark		
* City & Zip Code		
* State		
* Telephone No (With STD Code)		
* Mobile No		
* Email Address		

- 2) Please maintain following as my PAN/ ARN Details

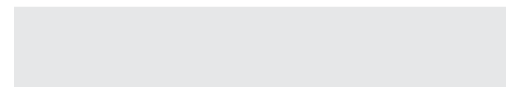
PAN/ ARN	Present PAN/ ARN NO	*NEW PAN/ ARN NO
* PAN NO		
* ARN NO		
* AMFI Certification NO		

Those who have not given PAN NO or ARN NO earlier and want to update in our Records, will have to update the details in NEW PAN/ ARN NO Column. Photocopy of the ARN/ PAN Certificate must be attached.

- 3) Correction in Name of Business Associate: (If Name given in welcome letter is not showing name as per SB Application Form)

Name appearing in Welcome Letter: \_\_\_\_\_

Name of SB as per Identity Proof: \_\_\_\_\_



(Signature of Business Associate)

**FOR OFFICE USE ONLY**

Partner Code No and Name tallied with system

YES

No

(Branch Official to tick)



Details	Branch	Corporate Office
Date of Receipt		
Name of the Receiver		
Employee Code		

Date on which request sent to corporate office: \_\_\_ / \_\_\_ / \_\_\_ Date on which changes effected: \_\_\_ / \_\_\_ / \_\_\_

Signature (Branch Official) \_\_\_\_\_

Signature (Corporate Office) \_\_\_\_\_

**Customer Acknowledgement**

Kataria Group And Investment Ltd.

Financial Products Distribution Division

Partner Code: \_\_\_\_\_ in the name of \_\_\_\_\_ We acknowledge receipt of instruction to change for above Partner Code held with our company.

Date of Receipt: \_\_\_ / \_\_\_ / \_\_\_

Name & Signature: \_\_\_\_\_

Branch Seal:

Employee Code: \_\_\_\_\_

Note: Changes requested above would be effected in the company's records within maximum of 2 days from the date of receipt.

