



APPLICATION FOR CHANGE OF SIGNATURE

Date:

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DP ID
CDSL

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To,
 Anand Rathi Share & Stock Brokers Limited.
 Express Zone, A Wing, 10th Floor,
 Western Express Highway, Goregaon (East),
 Mumbai – 400063 Maharashtra
 CIN : L67120MH1991PLC064106

- I/We request to carry out the change of signature in the demat account.
- I/We request to carry out the change of signature in KRA and demat account.

NEW SPECIMEN SIGNATURE		
Sr. No.	NAME(S) OF HOLDER(S) :	SIGNATURE(S)
1		
2		
3		

Reason for change of Signature : _____

Customer's Bank Account type & number _____

Attestation by the Bank with Seal and full Address

Signature of Attesting Authority

Name of Attesting Authority

Designation of Attesting Authority

INSTRUCTIONS :

- Name(s) should be in the same order as they appear in the Demat account number.
- The new specimen signature(s) should be attested by an authorised official by mentioning the full address of the bank, where the Demat account holder(s) is/are having his/her Bank account.

Old Signature of Account Holder(s) :

X _____
(Sole/First Holder)

X _____
(Second Holder)

X _____
(Third Holder)

(FOR OFFICE USE ONLY)

I have verified the proof of identity of the person(s) submitting the form and I am satisfied that the person(s) who has/have signed in my presence is/are the account holder(s).

Name of Person at Demat Counter: _____

Signature: _____