

FINWIZARD TECHNOLOGY PRIVATE LIMITED

Account Details Addition / Modification / Deletion Request Form

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| CHANGE ACCOUNT D | DETAIL | : L | | TRAD | ING | | | DE | MAT | L | Date | ; | D | D | М | M | Υ | ļ | Y | Υ | L' |
| Application No. | | | | | | | | | Date | | D | D | | M | M | Υ | | Υ | | Υ | Υ |
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| Please fill all the deta | ails in E | | | | Englis | | | 1 | | | | | | | | | | | | | |
| DP ID | 1 | 2 | 0 | 9 | 2 | 1 | 0 | 0 | Clie | nt II | D | | | | | | | | | | |
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| Trading Account Co | | | | | | | | | | | | | | | | | | | | | |
| Account Holder's | Detail | • | | | | | | | | | | | | | | | | | | | |
| Name of First / Sole | | | | | | | | | | | | | | | | | | | | | |
| Name of Second Ho | | | | | | | | | | | | | | | | | | | | | |
| Name of Third Hold | er | | | | | | | | | | | | | | | | | | | | |
| e request you to n | | | | | | | | | | | | | | | | acco | oun | t ir | 1 yo | ur re | ecc |
| e request you to n DETAILS (Please specify correspondence / permanent addibank details, telenumber, sub-stai | make t change ress, | he fo | Add Mod Dele | | dditi / tion | ons , | | difica | | s / (| dele | tion | | | | | | | | | eco |
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Regd. Office: Queens Paradise, 1st Floor, Curve Road, Shivajinagar, Bangalore - 560051 CIN No. U74900KA2015PTC080747;

Website: http://www.fisdom.com; Email:

Contact. 9642596425



FINWIZARD TECHNOLOGY PRIVATE LIMITED

| FOR OFFICE USI * In-Perso | _ | tion (| (IPV | Deta | ils): | | | | | | | | | | | | | |
|------------------------------------------------|------------------------------------|---------|--------|--------------|--------|----------------|---------------|----------------|----------------|--------|--------|------|---------|----------|----------|---------|---------|---------|
| Name of the pe | rson who ł | าas d | one tl | he IP | v : _ | | | | | _ | | | | | | | | |
| Designation: | | | | _ | Em | nploy | ee Ic | l: | | | | | | | | | | |
| Date of IPV:/ | | | Siç | ınatur | re of | the p | erson | who | has do | ne the | : IPV | | | Seal/ | /Stam | p of th | e Inter | mediary |
| * In the absence who is doing the | e attestatio | on on | the s | suppo === | ortine | g doo =(Ple | cume ase 1 | nts. 「ear I | | | | | | | | | | |
| ACKNOWLEDGE Received Account Application | Details Addi | ition / | Modif | icatio | n / D | eletio | ns re | <u> </u> | as per Date | detail | s give | en b | elow | : M | Y | Тү | Τγ | Тү |
| DP ID | 1 | 2 | 0 | 9 | 2 | 1 | 0 | 0 | Client | t ID | | | | 1 | Ė | 1 | 1 | |
| Name of the Name of Se | e Sole / First cond joint H | | er | | | | | | | | | | <u></u> | | <u> </u> | | | |

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