

**Irage Broking Services LLP****Registered office:** Unit 1 & 2, 17th Floor, Gift One Tower Road SC, Zone 5, Gift City Gandhinagar - 382355**Correspondence address:** Unit No.111, 1st Floor, A-Wing, Boomerang, Near Chandivali Studio, Chandivali Farm Road, Andheri(E), Mumbai - 400072**Contact:** 07965081210 | **Email:** ig@arrow.trade**ACCOUNT MODIFICATION FORM****Please fill all the details in Block Letters in English**

Application No.		Date: (DD/MM/YYYY)													
DP ID:									Client ID:						

**Account Holder's Details**

Name of First / Sole Holder	
Name of Second Holder	
Name of Third Holder	

☐ I/We request to carry out the change of correspondence/permanent address / signature in the demat account☐ I/We request to carry out the change of address / signature in the KRA and demat account

I/We request you to make the following additions / modifications / deletions to my/our account in your records.

DETAILS (Please specify change of correspondence / permanent address, bank details, telephone number, 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.

	First Holder	Second Holder	Third Holder
Name			
Signature			

(PLEASE TEAR HERE)

**Acknowledgement Receipt**

Received Account Details Addition / Modification / Deletions request as per details given below:

Application No.		Date: (DD/MM/YYYY)													
DP ID:									Client ID:						
Name of First / Sole Holder															
Name of Second Holder															
Name of Third Holder															
Modification requested for: (specify reason)															

**Depository Participant Seal and Signature**