



Client Code	
Client Name	
Branch Code	
Branch Name	

		Medicalcolocidados	Booting to the Bootin	Br	anch Name					
I request SUKEH JAIN SECURITIES P LTD. to change/update my bellow mentioned detail(s) in your :-										
Equity/F &O segment related records/Software Commodity segment related records/Software Currency segment related records/Software										
Changes/Update Requested For: Address Mobile Email ID Bank Detail DP Detail Brokerage										
	F	1- New Add	1- New Address#: CityPIN Code							
Client S	r g	2- New Mo	State					new address and with KRA-CI Form		
ign re	r\$	3- New Em	<u> </u>							
Client Sign required in the box for such modification	I ₹	I I	* Fill the Email id only in CAPITAL Letter 4- New Bank Detail Attaché this bank account number as Primary Secondary Bank A/c No							
ne box for s	r g	* Attach duly signed cancel cheque leaf / bank statement 5- New DP Detail Attaché this bank account number as Primary Secondary Demat A/c Number (Client. ID)								
such m	THE DAY		Square off same day (Jobbing)			Square off (Deli	*: Please don't mention % or (.) mark here. It			
odifi				%	Min	%	Min	should be in terms of absolute paisa		
catio		Capital M Equity I			*		*	#: Please don't		
'n		Equity (#		#	mention % or (.) mark here. It		
Currency Future Currency Option					*		*	should be in terms of Rs. per lot only.		
					*		*			
		Comm	odity		*		*			
			Declaration				Client	Signature		
I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I under take to inform you of any changes therein immediately. In the case any of the above information is found to be false or untrue or misleading or misrepresenting. I am/we are aware that I/we may be held liable for it. I further agree to pay Rs as master data updating fee. Place										
		Fo	r Office Use On	ly						
Sign & Name of Authority at Branch/AP/BA				nature			Name			
Sign & Name of Authority at KYC Deptt. /HO				nature		5	Name 6			
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