



COMPOSITE SECURITIES LIMITED

To,
Composite Securities Limited
Depository Participant NSDL {DP ID- IN302113}
307, Kanchenjunga Building
18, Barakhambha Road
New Delhi – 110001

Date (dd-mm-yy)

Dear Sir,
I/We have a Demat account no / Trading Code _____ with you. Kindly update/change the following in your records.

{A} Address

Present Address	New Address
Pin Code	Pin Code

Please attach: -

1. Copy of latest transaction statement received for your demat account.
2. Your identity Proof and Proof of New Address. Following documents can be furnished as proofs.
Identity Proof(any one): (a) Passport (b) Voter ID Card (c) Driving License (d) PAN card with photograph
Address Proof(any one): (a) Passport (b) Voter ID Card (c) Driving License (d) Ration Card (e) Bank Passbook/Bank Statement(Not more than three month old) (f) Electricity Bill (Not more than three month old) (g) Landline Telephone Bill (Not more than three months old)

{B} Bank

Bank Name		
Account Number		
Address		
City Name		
Pin Code		
IFSC CODE.		MICR Code
Bank Account Type	Saving <input type="checkbox"/>	Current <input type="checkbox"/> OD/Draft <input type="checkbox"/>

- ❖ 9 digit Code Number of the Bank and Branch where the account is maintained (Anywhere Banking MICR Code will not be accepted).
- ❖ Please attach a cancelled cheque and latest Bank statement of the bank account specified above.

{C} Mobile No. _____ Activate for SMS purpose. YES/NO

{D} E-mail id _____



COMPOSITE SECURITIES LIMITED

I/We hereby declare that the aforesaid mobile number or E-mail ID belongs to Me or My family (spouse, dependent children and dependent parents).

Mode of receiving Statement of Account {Tick any one}

Refer Notes-1 for receiving Statement of Account in Electronic Form

Physical Form

Electronic Form

Signature of :

Sole/First Holder

Second Holder

Third Holder

Note – 1 For receiving Statement of Account in electronic form:

- I. The Client(s) is/are aware that it will not receive the transaction statements in paper form.
- II. Client must ensure the confidentiality of the password of the email account.
- III. Client must promptly inform the Participant if the email address has changed.
- IV. Client may opt to terminate this facility by giving 10 days prior notice. Similarly, Participant may also terminate this facility by giving 10 days prior notice.

*** Strike off whichever is not applicable.**