

FORMAT FOR SIGN CHANGE REQUEST BY CLIENTS IN DEMAT ACCOUNTS

To,

From: _____

MaxGrowth Capital Pvt.Ltd - Depository Services.

15 BSF Colony Market Opp.HMV College

G.T Road Jalandhar-144001

Sub : Sign change request in demat account (s)

DP ID _____ **CLIENT ID** _____

With reference to the captioned subject I/we the undersigned request you to change the sign of the following persons in the demat account from the current signatures existing in the demat account (s).

The request for change in signature is due to the following reasons (mandatory - one to be ticked)

1. Due to convenience in signing
2. Medical disability – medical certificate of practitioner to be submitted in Original or copy of original to be attested by branch official along with request letter.
3. Unable to remember old sign – Notarized affidavit as per format on Rs.100/- stamp paper to be submitted in lieu of inability to sign old signature.
4. Others – to be specified by the client _____

	Names of Holders	Old Signature	New Signature
1 st			
2 nd			
3 rd			

New Signature of holder in front of the DP Official	Attestation by DP Official – Signed in my presence
	Signature Affix Signature Verified stamp) Name Employee code

Details	Y/N
1. All the holders have to sign in the column for old signature.	
2. Reason for change in signature has to be mentioned	
3. Proof of identity and address of the holder duly attested by the branch as per the specified format	
4. Latest transaction statement of the demat account received from the Participant	
5. New signature has to be duly attested by the respective Bankers	
6. Holder requesting the change in signature should personally visit the branch and sign in presence of the DP official in the space provided	
7. Attestation by DP Official as Signed in my presence	
8. Alteration / Correction has to be authenticated by the holders	