



Client Reactivation Form (RE-KYC) / Modification Form Application form (For Non-Individuals Only)



Depository Participant-ID 028900

DP SEBI Reg. No. IN-DP-504-2020

12, Homji Street, Mumbai - 400 001. India

Tel.: +91-22-40778000 • E-mail : dp@sushilfinance.com, compliance@sushilfinance.com

Please fill in ENGLISH and in BLOCK LETTERS with black ink

Date

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A. Identity Details (please see guidelines overleaf)

1. **Name of Applicant** (Please write complete name as per Certificate of Incorporation / Registration; leaving one box blank between 2 words. Please do not abbreviate the Name).

Client Code

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Demat Account No.

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2. **Date of Incorporate**

d	d
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m	m
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y	y	y	y
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Place of Incorporation

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3. **Registration No. (e.g. CIN)**

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Date of commencement of business

d	d
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y	y	y	y
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4. **Status** Please tick (✓) ☐ Private Limited Company ☐ Public Ltd. Co. ☐ Body Corporate ☐ Partnership ☐ Trust / Charities / NGOs☐ HUF ☐ FI ☐ FII ☐ FPI Category I ☐ FPI Category II ☐ FPI Category III ☐ AOP ☐ Bank ☐ Government Body☐ Non Government Organisation ☐ Defence Establishment ☐ Body of Individual ☐ Society ☐ LLP ☐ Others (Please Specify) _____5. **Permanent Account Number (PAN) (MANDATORY)**

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 Please enclose a duly attested copy of your PAN Card**B. Address Details**1. ☐ I/We request to carry out the change of address / signature in the demat account.☐ I/We request to carry out the change of address / signature in the KRA and demat account.

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

Details (Pls. specify change in Address, Email Id, Mobile)	Pls. Specify (Addition / Deletion / Modification)	Existing Details	New Details
☐ Correspondence Address ☐ Permanent Address ☐ Email Id ☐ Mobile No. ☐ Others			

Email ID and Mobile Number represent by

☐ Represented by Karta ☐ Represented Authorized person2. **Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.**☐ *Latest Telephone Bill (only Land Line) ☐ *Latest Electricity Bill ☐ Latest Bank Account Statement ☐ Registered Lease / Sale Agreement of Office Premises☐ Any other proof of address document (as listed overleaf) (Please specify) _____*Not more than 3 Months old. Validity/Expiry date of proof of address submitted

d	d
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y	y	y	y
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3. **Annual Income Details:** ☐ Below 1 Lac ☐ 1 - 5 Lac ☐ 5 - 10 Lac ☐ 10 - 25 Lac ☐ 25 Lac - 1 Cr ☐ Above 1 Cr

Attached financial proof such as Balance sheet alongwith Networth Certificate, IT Returns etc.

4. **Any other information** _____5. **Net worth as on** _____ **Rs.** _____**DECLARATION**

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I/we undertake to inform you of any changes therein, immediately. In 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.

Place:

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**NAME & SIGNATURE(S)
OF AUTHORISED
SIGNATORY**

Date:

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First Authorised Signatory

FOR OFFICE USE ONLYIPV Done ☐ on

d	d
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m	m
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y	y	y	y
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AMC/Intermediary name OR code

Sushil Financial Services Private Limited☐ (Originals Verified) Self Certified Document copies received☐ (Attested) True copies of documents received

Main Intermediary

Name of Employee: _____
Designation: _____
Name of Organisation: _____
Signature: _____
Date: _____