

CONSOLIDATED UPDATION FORM (CUF)

From,

To,

Coimbatore Capital Limited - DP ID : IN300175

COINDIA Buliding, 1st Floor,

North - East of Airport Signal,

Avanashi Road, Coimbatore - 641 014.

Email : dpinfo@coimbatorecapital.net

Dear Sir,

Sub: Updation of Change of Address Mobile No./Email ID Bank Details Permanent Account Number (PAN) details Additional Inormation

Client ID: UCC :

1. Request for Change of Address in my/ our Account

Old Address (To be deleted)	New Address (To be Recorded)

I/We wish to change my/our **Nominee** address also

Please note that Client(s) should visit Coimbatore Capital office personally and produce original proof of Identity and Proof for New Address

Encl:

Proof of Identification : Self attested Passport / Voters ID / Pan Card / Driving License

Proof of New Address : Self attested Passport / Voters ID / Driving License / Bank Pass Book along with Cheque Leaf/ Ration Card/ Resident Land Line Telephone Bill (only BSNL not more than 2 months old)

2. Request for Change of communication facility

Mobile Number :

SMS Facility : Yes No

Email ID :

Statement : Physical Electronic

The afore said mobile number or E-mail ID belongs to Me or My family(Spouse, dependent children and dependent parents)

Nature of Relationship :

3. Request for Change of Bank Account in my/ our Account

New Bank Account Number :

MICR NO :

IFS Code :

Account Type :

Bank Name :

Branch address :

Encl:

Please attach photocopy of Pass book & Cancelled Cheque leaf

4. I/ We request you to update my/ our PAN details in my/ our above account as mentioned below.

Holder(s)	PAN
Sole / First	
Second	
Third	

Encl: Self attested Copy of PAN Card(s)

5) Additional Information

Details for First Holder :

Date of Birth	D	D	M	M	Y	Y	Y	Y		
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (Specify)							Aadhaar :		
Occupation (Please tick any one)	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> HouseWife <input type="checkbox"/> Student <input type="checkbox"/> Others (Please Specify) :									
Gross Annual Income	Income Range per Annum : <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> >25 Lacs (or) as on (date) Net - Worth in Rs. (* Net worth should not be older than 1 year)									
Any other Information	<input type="checkbox"/> Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person									

Details for Second Holder :

Date of Birth	D	D	M	M	Y	Y	Y	Y		
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (Specify)							Aadhaar :		
Occupation (Please tick any one)	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> HouseWife <input type="checkbox"/> Student <input type="checkbox"/> Others (Please Specify) :									
Gross Annual Income	Income Range per Annum : <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> >25 Lacs (or) as on (date) Net - Worth in Rs. (* Net worth should not be older than 1 year)									
Any other Information	<input type="checkbox"/> Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person									
Mobile No								SMS Facility <input type="checkbox"/> Yes <input type="checkbox"/> No		
Email ID										
The afore said mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family(Spouse, dependent children and dependent parents)										
Nature of Relationship :										

Details for Third Holder :

Date of Birth	D	D	M	M	Y	Y	Y	Y		
Nationality	<input type="checkbox"/> Indian <input type="checkbox"/> Others (Specify)							Aadhaar :		
Occupation (Please tick any one)	<input type="checkbox"/> Private Sector Service <input type="checkbox"/> Public Sector <input type="checkbox"/> Government Service <input type="checkbox"/> Business Professional <input type="checkbox"/> Agriculturist <input type="checkbox"/> Retired <input type="checkbox"/> HouseWife <input type="checkbox"/> Student <input type="checkbox"/> Others (Please Specify) :									
Gross Annual Income	Income Range per Annum : <input type="checkbox"/> Below 1 Lac <input type="checkbox"/> 1-5 Lac <input type="checkbox"/> 5-10 Lac <input type="checkbox"/> 10-25 Lac <input type="checkbox"/> >25 Lacs (or) as on (date) Net - Worth in Rs. (* Net worth should not be older than 1 year)									
Any other Information	<input type="checkbox"/> Politically Exposed Person <input type="checkbox"/> Related to a Politically Exposed Person									
Mobile No								SMS Facility <input type="checkbox"/> Yes <input type="checkbox"/> No		
Email ID										
The afore said mobile number or E-mail ID belongs to <input type="checkbox"/> Me or <input type="checkbox"/> My family(Spouse, dependent children and dependent parents)										
Nature of Relationship :										

Note : Every Account Holder must submit a separate KYC Form with Change of Address / PAN Updation.

Note : All holder(s) must sign

Kindly do the needful.

Thanking You

Yours Truly

Signature (1)----- (2) ----- (3) -----

Place : -----

Date : -----

In-Person Verification Done By
(Branch Office Seal and Signature)