

KYC Details Change Form



GILL BROKING PVT. LTD.
Trade With Pride Earn With Joy

Client Code	
Client Name	
Branch Code	
Branch Name	

I request Gill Broking Pvt. Ltd. to change/update my bellow mentioned detail(s) in your :-

Commodity Segment Related Records

Changes/Update Requested For: Address Mobile Email ID Bank Detail Brokerage

Client Sign required in the box for such modification

<input type="checkbox"/>		1- New Address#: City PIN Code <table border="1" style="display: inline-table; width: 100px; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> State											# Attaché a valid address proof of new address and with KRA-CI Form																						
<input type="checkbox"/>		2- New Mobile <table border="1" style="display: inline-table; width: 150px; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																	
<input type="checkbox"/>		3- New Email * Fill the Email ID only in CAPITAL Letter																																	
<input type="checkbox"/>		4- New Bank Detail Attaché this bank account number as Primary Secondary Bank A/c No. Bank Name MICR Code IFSC Code * Attach duly signed cancel cheque leaf / bank statement																																	
<input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>																																	
<input type="checkbox"/>		5- New Brokerage																																	
	Commodity	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Square off same day (Jobbing)</th> <th colspan="2">Square off another day (Delivery)</th> </tr> <tr> <th>%</th> <th>Min</th> <th>%</th> <th>Min</th> </tr> </thead> <tbody> <tr><td></td><td style="text-align: center;">*</td><td></td><td style="text-align: center;">*</td></tr> <tr><td></td><td style="text-align: center;">*</td><td></td><td style="text-align: center;">*</td></tr> <tr><td></td><td style="text-align: center;">#</td><td></td><td style="text-align: center;">#</td></tr> <tr><td></td><td style="text-align: center;">*</td><td></td><td style="text-align: center;">*</td></tr> <tr><td></td><td style="text-align: center;">*</td><td></td><td style="text-align: center;">*</td></tr> <tr><td></td><td style="text-align: center;">*</td><td></td><td style="text-align: center;">*</td></tr> </tbody> </table>	Square off same day (Jobbing)		Square off another day (Delivery)		%	Min	%	Min		*		*		*		*		#		#		*		*		*		*		*		*	*: Please don't mention % or (.) mark here. It should be in terms of absolute paisa #: Please don't mention % or (.) mark here. It should be in terms of Rs. per lot only.
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Declaration	Client Signature
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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.

<input type="checkbox"/>

Place _____ Date _____

For Office Use Only

Sign & Name of Authority at Branch/AP/BA	<table border="1" style="width: 100%; height: 20px;"> <tr><td style="text-align: center;">Signature</td></tr> </table>	Signature	<table border="1" style="width: 100%; height: 20px;"> <tr><td style="text-align: center;">Name</td></tr> </table>	Name
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Name				
Sign & Name of Authority at KYC Deptt. /HO	<table border="1" style="width: 100%; height: 20px;"> <tr><td style="text-align: center;">Signature</td></tr> </table>	Signature	<table border="1" style="width: 100%; height: 20px;"> <tr><td style="text-align: center;">Name</td></tr> </table>	Name
Signature				
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Note- Kindly attach clear copy of PAN Card.