

CLIENT REQUEST FORM

Request Number

1	2	3	4	5	6	7	8	9	10
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UCC Reactivation ☐ Account Modification ☐



JKB Financial Services

Investments Beyond Banking

To,
JKB Financial Services Centre

Date

D	D	M	M	Y	Y	Y	Y
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DP ID - IN302349 Client ID

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Dear Sir, Trading Code

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Please reactivate/ change / add in my (our) client account as per details given below. (Please tick appropriate option to make necessary changes)

CHANGES TO BE EFFECTED IN	Trading & Depository Account <input type="checkbox"/>	Trading Account <input type="checkbox"/>	Depository Account <input type="checkbox"/>
Name of 1 st Holder	First Name <input type="text"/>	Middle Name <input type="text"/>	Surname <input type="text"/>
Name of 2 nd Holder	First Name <input type="text"/>	Middle Name <input type="text"/>	Surname <input type="text"/>
Name of 3 rd Holder	First Name <input type="text"/>	Middle Name <input type="text"/>	Surname <input type="text"/>

1. I/We wish to update Annual Income/Networth I/We confirm that the Income/Networth is not older than 1 year ☐
 Annual Income ☐ <1 Lac ☐ 1-5 Lac ☐ 5-10 Lac ☐ 10-25 Lac ☐ >25 Lac Network as on

D	D	M	M	Y	Y	Y	Y
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2. CHANGE IN PERMANENT/CORRESPONDENCE ADDRESS (I/We request to make this change in CKYC/KRA also) Yes ☐ No ☐

Permanent Address (Proof Required)	Correspondence Address (Proof Required)												
Address <input type="text"/>	Address <input type="text"/>												
Landmark <input type="text"/>	Landmark <input type="text"/>												
City <input type="text"/> State <input type="text"/>	City <input type="text"/> State <input type="text"/>												
Tel. No <input type="text"/> PIN <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							Tel. No <input type="text"/> PIN <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

3. I/We wish to update Contact Details	1 st Holder	2 nd Holder	3 rd Holder																														
New Mobile	I hereby declare that the Mobile No belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children <input type="checkbox"/> Parents <input type="checkbox"/> + 9 1 <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											I hereby declare that the Mobile No belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children <input type="checkbox"/> Parents <input type="checkbox"/> + 9 1 <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>											I hereby declare that the Mobile No belongs to <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children <input type="checkbox"/> Parents <input type="checkbox"/> + 9 1 <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
New E Mail	I hereby declare that the Email Id belongs to Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children <input type="checkbox"/> Parents <input type="checkbox"/> I wish to receive CAS over Email <input type="checkbox"/> Y <input type="checkbox"/> N	I hereby declare that the Email Id belongs to Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children <input type="checkbox"/> Parents <input type="checkbox"/> I wish to receive CAS over Email <input type="checkbox"/> Y <input type="checkbox"/> N	I hereby declare that the Email Id belongs to Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children <input type="checkbox"/> Parents <input type="checkbox"/> I wish to receive CAS over Email <input type="checkbox"/> Y <input type="checkbox"/> N																														
	Email ID <input type="text"/>	Email ID <input type="text"/>	Email ID <input type="text"/>																														

4. I/We wish to avail the following facility Internet Based Trading ☐ Yes ☐ No MTF ☐ Yes ☐ No F&O ☐ Yes ☐ No

5. I/We wish to operate my/our account through BMLI & DDPI ☐ Yes ☐ No

6. BANK DETAILS (Proof Required) Update the given Bank A/C as Default/Future Transactions ☐

Old Details	New Details
Bank Name <input type="text"/> Type of A/C <input type="text"/>	Bank Name <input type="text"/> Type of A/C <input type="text"/>
Account No <input type="text"/>	Account No <input type="text"/>
MICR Code <input type="text"/> IFSC <input type="text"/>	MICR Code <input type="text"/> IFSC <input type="text"/>
Branch Address <input type="text"/>	Branch Address <input type="text"/>

7. I/We wish to transfer my/our account: DEMAT ☐ TRADING ☐ From Branch to

8. I/We wish to change signature(s)	1 st Holder	2 nd Holder	3 rd Holder
OLD SIGN	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>
NEW SIGN	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>

DECLARATION: I/We confirm to have read & understood, acknowledged & agreed to MTF (Margin Trading Facility) Rights & Obligations as placed on JKBFSL website. I/We confirm to have read Rights & Obligations of stock broker, sub broker & clients w.r.t IBT (Internet Based Trading), F&O (Futures & Options) from JKBFSL website. I/We hereby declare that the details furnished above are true & correct to the best of my/our knowledge and belief. In case any of the above mentioned detail(s) is found to false, untrue, misleading or misrepresenting I/We am/are aware that I/We may be held liable for it.

[Signature of First Holder]

[Signature of Second Holder]

[Signature of Third Holder]

NOTE: i) Form to be filled in BLOCK Letters & use Blue/Black Ball Point Pen only. ii) Please furnish proper supporting proofs for change in client master. iii) If changes are to be done in DP Account, then all holders as per DP Account must sign the document(s).

FOR OFFICE USE ONLY:

Branch Stamp/HO Stamp

JKB Financial Services Limited

Main Road, Jawahar Nagar, Srinagar, J&K - 190008

CIN: U65990JK2008SGC002931

DP Regd No.: IN-DP-310-2017

SEBI Single Regd. No.: INZ00243934

DP-ID: IN302349

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