



KYC MODIFICATION/ADDITION & ACCOUNT REACTIVATION REQUEST FORM

Requisition form for Addition / Deletion / Modification of Account Details in Equity/Commodity/Demat Account

Date: ___/___/___

Broking	Depository (NSDL)/(CDSL)	Both	
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*Mandatory Fields

<input type="checkbox"/> Update my KYC details as per below	<input type="checkbox"/> Re-activate my account and update KYC Details	<input type="checkbox"/> Re-activate account with no change in KYC
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To
SMIFS Ltd
[Formerly Known as Stewart & Mackertich Wealth Management Ltd]
4 Lee Road, Vaibhav, Kolkata – 700020

I/We request you to make the following Additions / Deletion / Modifications to my/our account in your records. Account details are as under:

* CDSL DP ID: 12016000 _____ NSDL DP ID: IN301629/IN303794 _____ * Trading Account(UCC) _____ Client Type Individual/Non-Individual

*Please tick Request & Category

Request For	Category	Existing Details	New Details
<input type="checkbox"/> Modification	<input type="checkbox"/> Address Details <input type="checkbox"/> Correspondence <input type="checkbox"/> Permanent <input type="checkbox"/> Email ID <input type="checkbox"/> Mobile / Landline Number <input type="checkbox"/> Signature <input type="checkbox"/> Name Change in Trading Account <input type="checkbox"/> Aadhaar <input type="checkbox"/> Other _____ pls. specify		
<input type="checkbox"/> Addition	<input type="checkbox"/> Bank Details <input type="checkbox"/> Add with Default <input type="checkbox"/> Add without Default		
<input type="checkbox"/> Modification	<input type="checkbox"/> Demat Details <input type="checkbox"/> _____ pls. specify <input type="checkbox"/> _____ pls. specify		

I/We wish to update the above changes in KRA / Demat / Back office system	
1.	Additional Information Related to Trading / Demat Account: Gross Annual Income Details (please specify): Income Range per annum: Below Rs 1 Lac / 1-5 Lac / 5-10 Lac / 10-25 Lac / >25 Lacs or Net-worth as on _____ (_____) (Net worth should not be older than 1 year)
2.	Occupation (please tick any one and give brief details): Private Sector/ Public Sector/ Government Service/Business/ Professional/ Agriculturist/ Retired/ Housewife/ Student/ Others _____
3.	Please tick, if applicable: Politically Exposed Person (PEP)/ Related to a Politically Exposed Person (PEP) (Account Type – Individual)
4.	Please tick, if applicable, for any of your Authorized Signatories/Promoters/Partners/Karta/Trustees/Whole Time Directors: Politically Exposed Person (PEP)/ Related to a Politically Exposed Person (PEP) (Account Type – Non - Individual)
5.	Net-worth as on (date) _____ (dd/mm/yyyy): _____ (*Net worth should not be older than 1 year) (Account Type – Non - Individual)



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Ownership Declaration - Contact Detail (s) A. E-mail- I hereby declare that the E-mail ID given by me belongs to Me or my family
 In case of family, the owner of E-mail ID is my Spouse Dependent Children Dependent Parent
 B. Mobile- I hereby declare that the Mobile given by me belongs to Me or my family in case of family, the owner of Mobile is my Spouse Dependent Children Dependent Parent.

Declaration for Electronic Communication: Yes No I/we wish to receive all future communication to me including but not limited to Contract note, Bills and Statement of Accounts, Demat Transaction/ Holding Statements to be sent to the above mentioned E-mail ID

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. I/we hereby give consent to receive all communication from SMIFS Limited.

	First / Sole Holder	Second Holder	Third Holder
Name			
PAN			
Signature *			

FOR OFFICE USE ONLY

We have given/sent the client a copy of the Client Master upon Updation/ Modification of details requested by the above Client.

Name of Authorized Signatory		Signature of the Authorized Signatory	Seal/Stamp of SMIFS Limited
Date			
Place			

UCC of Client:	Name of Employee	Employee Code	Signature of Employee
Documents Verified With Originals & In-Person Verification Done by Relationship Manager			
Processed & Updated In Trading By:			
Processed & Updated In Demat By:			

INSTRUCTIONS

- ❖ Copy of cancelled Cheque leaf/ pass book/bank statement specifying name of the constituent, MICR Code or/and IFSC Code of the bank should be submitted.
- ❖ Demat Client Master or recent Holding Statement issued by DP bearing name of the client.
- ❖ Refer the supporting documents mentioned in "Instruction checklist for filing KYC Form and for updating the changes in CKYC/ KRA / Demat / Back Office System should be submitted.
- ❖ Income Proof: Copy of ITR Acknowledgement / Net-worth Certificate/ In case of salary income - Salary Slip, Copy of Form 16 / Self declaration with relevant supporting documents/ Any other relevant documents substantiating ownership of assets.
- ❖ Aadhaar Card to be submitted for Aadhaar Details updation
- ❖ Beneficial Ownership Details if any for Non-Individual Client (Corporate/ Partnership Firm/Trust/ Unincorporated Association/Body of Individuals)