



**KYC Details Change form  
(For Individuals Only)**



Place for  
Intermediary Logo

Application No. :

Please fill this update / modification form in ENGLISH and in BLOCK LETTERS (Please strike off Sections that are not used).

**A Name of Applicant** (As per original KYC records)

Title  Mr.  Ms.  Other (Please specify) \_\_\_\_\_ UID/Aadhaar, if any: \_\_\_\_\_ PAN \_\_\_\_\_

Name \_\_\_\_\_

Please Provide the new KYC details which should be updated in your KYC records.

**B. Mandatory fields for KYCs done before 1<sup>st</sup> January 2012**

1. Father's/Spouse Name \_\_\_\_\_

2. Current Marital status  Single  Married

3. Current Nationality  Indian  Other (Please specify) \_\_\_\_\_

4. Current Gross Annual Income Details (Please tick (✓)):  Below 1 Lac  1-5 Lac  5-10 Lac  10-25 Lac  > 25 Lacs OR

Net-worth in ₹. (\*Net worth should not be older than 1 year) \_\_\_\_\_ as on (date) | d | d | / | m | m | / | y | y | y | y |

**"FOR OFFICE USE ONLY" Columns at the bottom of the form is Mandatory-IPV for all KYCs done before 1st January, 2012 & Original Seen and Verified for change in Identity & Address Details.**

**C. Identity Details (please see guidelines overleaf)**

1. New Name (As appearing in supporting identification document).  
Name \_\_\_\_\_

2. New Status Please tick (✓)  Resident Individual  Non Resident (Passport Copy Mandatory for NRIs & Foreign Nationals)

3. PAN \_\_\_\_\_ Please enclose a duly attested copy of your PAN Card

4. Proof of Identity submitted for PAN exempt cases Please Tick (✓)  
 UID (Aadhaar)  Passport  Voter ID  Driving Licence  Others \_\_\_\_\_ (Please see guideline 'D' overleaf)

**D. Address Details (please see guidelines overleaf)**

1. New Address for Correspondence

City / Town / Village \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Pin Code \_\_\_\_\_

2. Contact Details

Tel. (Off.) (ISD) (STD) \_\_\_\_\_ Tel. (Res.) (ISD) (STD) \_\_\_\_\_

Mobile (ISD) (STD) \_\_\_\_\_ Fax (ISD) (STD) \_\_\_\_\_

E-Mail Id. \_\_\_\_\_

3. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.  
 Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook  
 \*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_  
\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted | d | d | / | m | m | / | y | y | y | y |

4. New Permanent Address of Resident Applicant if different from above C1 OR Overseas Address (Mandatory) for Non-Resident Applicant

City / Town / Village \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Pin Code \_\_\_\_\_

5. Proof of address to be provided by Applicant. Please submit ANY ONE of the following valid documents & tick (✓) against the document attached.  
 Passport  Ration Card  Registered Lease/Sale Agreement of Residence  Driving License  Voter Identity Card  \*Latest Bank A/c Statement/Passbook  
 \*Latest Telephone Bill (only Land Line)  \*Latest Electricity Bill  \*Latest Gas Bill  Others (Please specify) \_\_\_\_\_  
\*Not more than 3 Months old. Validity/Expiry date of proof of address submitted | d | d | / | m | m | / | y | y | y | y |

**E. Other Details (please see guidelines overleaf)**

2. New Occupation (Please tick(✓) any one and give brief details):  
 Private Sector Service  Public Sector  Government Service  Business  Professional  Agriculturist  Retired  
 Housewife  Student  Forex Dealer  Others (Please specify) \_\_\_\_\_

3. Please tick, if applicable:  Politically Exposed Person  Related to a Politically Exposed Person  
For definition of PEP, please refer guideline overleaf

4. Any other information: \_\_\_\_\_

**DECLARATION**

**SIGNATURE OF APPLICANT**

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I 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: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

**FOR OFFICE USE ONLY**

IPV Done  on | d | d | / | m | m | / | y | y | y | y |

AMC/Intermediary name OR code \_\_\_\_\_

(Originals Verified) Self Certified Document copies received

(Attested) True copies of documents received

Main Intermediary \_\_\_\_\_

Seal/Stamp of the intermediary should contain

Staff Name \_\_\_\_\_

Designation \_\_\_\_\_

Name of the Organization \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Seal/Stamp of the intermediary should contain

Staff Name \_\_\_\_\_

Designation \_\_\_\_\_

Name of the Organization \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Celebrus Capital Limited**  
**No. 27/540 C, III Floor, EAK Towers**  
**Main Avenue, Panampilly Nagar, Kochi - 682036, Kerala**

Date: \_\_\_\_\_

**Sub: Authorisation for receiving Electronic / Digital Communications**

**Ref: Client Code: \_\_\_\_\_ & Client Id: 12075800 \_\_\_\_\_**

I / We have been / shall be dealing through you as my / our Broker – Depository Participant (DP) on the Capital Market and / or Futures & Options Segments / Currency Derivative Segments / Depository Services. As my / our Broker - DP i.e. agent I / we direct and authorize you to carry out trading / dealings on my / our behalf as per instructions given below.

I / We understand that, I / we have the option to receive the Contract Notes, Financial Statements, Demat Account Statements and Billing Statements in physical form or electronic form. In pursuance of the same, I / we hereby opt for receipt of Contract Notes, Financial Statements, Demat Account Statements and Billing Statements in electronic form. I / We understand that for the above purpose, you are required to take from the client “an appropriate email account” for you to send the electronic Contract Notes and Demat Account Statements. Accordingly, please take the following email account(s) / email id on your record for sending Contract Notes and Demat Account Statements to me / us.

Email Id:

I / we agree not to hold you responsible for late / non - receipt of Contract Notes, Financial Statements, Demat Account Statements and Billing Statements in electronic form and any other communication for any reason including but not limited to failure of email servers, loss of connectivity, email in transit etc. I / we agree that the log reports of your dispatching software shall be a conclusive proof of dispatch of contract notes to me / us and such dispatch shall be deemed to mean receipt by me / us and shall not be disputed by me / us on account of any non-receipt / delayed receipt for any reason whatsoever.

I / We also agree that non-receipt of bounced mail notification by you shall amount to delivery at my / our email account(s) / email id(s).

I / We understand that I am required to intimate any change in the email id / email account mentioned hereinabove needs to be communicated by me through a physical letter to you, provided however that if I/we am/are an internet client, then in that event the request for change in email id / email account can be made by me / us through a secured access using client specific user id and password. Please treat this authorization as written ratification of my / our verbal directions / authorisations given and carried out by you earlier. I / We shall be liable for all losses, damages and actions which may arise as a consequence of your adhering to and carrying out my / our directions given above.

I/We further request you to update following mobile number on your record for getting mobile alerts.

Mobile No:

Thanking you,  
Yours faithfully,

<Signature>

<Name>