**Account Details Addition / Modification / Deletion Request Form**

**ONLY FOR NERL CLIENTS**

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| **COMTRACK / Repository Participants Name** |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Application No.** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Date** |  |  |  |  |  |  |  |  |

**(Please fill all the details in Block Letters in English)**

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| **CP / RP I D** |  |  |  |  |  |  |  |  |  |  | **Client ID** |  |  |  |  |  |  |  |  |  |  |

 **Account Holder’s Details:**

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| **Name of First / Sole Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name of Second Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name of Third Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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I/We request you to make the following additions / modifications / deletions to my/our account in your records.

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| **DETAILS ( Please specify change of address, bank details, telephone no etc.** | **Addition/Modification/Deletion ( Please Specify)** | **Existing Details** | **New Details** |
|   |   |   |   |

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| **Name** | **First Authorized Signatory** | **Second Authorized Signatory** | **Third Authorized Signatory** |
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| **Signature** |   |   |   |

**Acknowledgement Receipt**

 Received Account Details Addition / Modification / Deletions request as per details given below:

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| **Application No.** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Date** |  |  |  |  |  |  |  |  |

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| **CP / RP I D** |  |  |  |  |  |  |  |  |  |  | **Client ID** |  |  |  |  |  |  |  |  |  |  |

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| **Name of the Sole / First Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name of Second joint Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Name of Third joint Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Modification requested for ( reason)** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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For Office Use Only)

|  |  |
| --- | --- |
| **Employee Name** |  |
| **Employee Code** |  |
| **Designation** |  |
| **Signature & Stamp** |  |