



Annexure

$Request for addition/deletion \ of beneficiary \ account \ details for \ execution \ of \ off-market \ transfer$

То		Date		D	D M	M	Y	Y Y	Y
Religare Brok							·	·	
A 3,4,5 Sec-125, Noida 201301 UP DP ID		I	N	3	0	1	7	7	4
Client ID									
Sole/First Holder Name									
Second Holder Name									
Third Holder Name									
	inform you that I/we wish to ac fers including inter-depository t		the bene	ficiary a	ccounts	letails be	low for	executio	n of off-
☐ Add	Beneficiary DP ID								
	Beneficiary Client ID								
	PAN of the First Holder								1
☐ Add	Beneficiary DP ID								
	Beneficiary Client ID								
	PAN of the First Holder								
☐ Add	Beneficiary DP ID								
	Beneficiary Client ID								
	PAN of the First Holder								
1.	2				2				
1	2	uthorise	ed Signat	ory (ies) 3_				
]	Participar	nt Author	isation					
Name: Signature:		Participant's Stamp & Date							
		_							