

Account Details Addition / Modification / Deletion Request Form

The Saraswat Co-operative Bank Ltd.
 Madhushree, Plot.No.85, Business District Centre, Sector 17, Vashi,
 Navi Mumbai - 400703

| | | | | | | | | | | |
|-----------------|--|------|---|---|---|---|---|---|---|---|
| Application No. | | Date | D | D | M | M | Y | Y | Y | Y |
|-----------------|--|------|---|---|---|---|---|---|---|---|

Please fill all the details in Block Letters in English

| | | | | | | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|-----------|--|--|--|--|--|--|--|
| DP ID | 1 | 3 | 0 | 5 | 8 | 5 | 0 | 0 | Client ID | | | | | | | |
|-------|---|---|---|---|---|---|---|---|-----------|--|--|--|--|--|--|--|

Account Holder's Details

| | |
|-----------------------------|--|
| Name of First / Sole Holder | |
| Name of Second Holder | |
| Name of Third Holder | |

I/We request you to make the following additions / modifications / deletions to my/our account in your records.

| DETAILS (Please specify change of address, bank details, telephone number etc.) | Addition / Modification / Deletion (Please specify) | Existing Details | New Details |
|--|--|------------------|-------------|
| | | | |

Attach an Annexure (with signature(s)) if the space above is found insufficient.

| | First/Sole Holder | Second Holder | Third Holder |
|-----------|-------------------|---------------|--------------|
| Name | | | |
| Signature | | | |

===== (Please Tear Here) =====
Acknowledgement Receipt

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

| | | | | | | | | | | |
|---|--|-----------|---|---|---|---|---|---|---|---|
| Application No. | | Date | D | D | M | M | Y | Y | Y | Y |
| DP ID | | Client ID | | | | | | | | |
| Name of the Sole / First Holder | | | | | | | | | | |
| Name of Second joint Holder | | | | | | | | | | |
| Name of Third joint Holder | | | | | | | | | | |
| Modification requested for: [Specify reason] | | | | | | | | | | |

Depository Participant Seal and Signature

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