

APPLICATION FORM FOR MOBILE NUMBER / EMAIL ID UPDATION FORM (For Individuals Only)

FOLIO DETAILS

Folio Number	<input type="text"/>	First/ Sole Holder PAN	<input type="text"/>
First Holder Name	<input type="text"/> First Name	<input type="text"/> Middle Name	<input type="text"/> Last Name
Joint Holder 1, Name	<input type="text"/> First Name	<input type="text"/> Middle Name	<input type="text"/> Last Name
Joint Holder 2, Name	<input type="text"/> First Name	<input type="text"/> Middle Name	<input type="text"/> Last Name

UPDATION OF MOBILE NUMBER IN AFORESAID FOLIO

Mobile Number

Above specified mobile number belongs to: (please tick any one option below)

<input type="checkbox"/> Self	<input type="checkbox"/> Dependent Children	<input type="checkbox"/> PMS
<input type="checkbox"/> Spouse	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> POA
<input type="checkbox"/> Guardian (for Minor investment)	<input type="checkbox"/> Dependent Siblings	<input type="checkbox"/> Custodian

UPDATION OF E-MAIL ADDRESS IN AFORESAID FOLIO

E-mail Address

Above specified e-mail address belongs to: (please tick any one option below)

<input type="checkbox"/> Self	<input type="checkbox"/> Dependent Children	<input type="checkbox"/> PMS
<input type="checkbox"/> Spouse	<input type="checkbox"/> Dependent Parents	<input type="checkbox"/> POA
<input type="checkbox"/> Guardian (for Minor investment)	<input type="checkbox"/> Dependent Siblings	<input type="checkbox"/> Custodian

UNIT HOLDER(S) SIGNATURE(S) & DECLARATION

I/We hereby declare that the details furnished above are true & correct to the best of my knowledge and undertake to inform Bajaj Finserv AMC of any changes therein immediately, and I/we approve the usage of these contact details for any communication with Bajaj Finserv AMC. Please note all kinds of investor communication, Transaction Information, Statement of Account, Annual Report and other kind of communication will be sent through email only instead of physical, for investors who provide their email address.

SIGNATURE(S)

<input type="text"/> Signature of Sole/ First Unit-holder	<input type="text"/> Signature of Second Unit-holder	<input type="text"/> Signature of Third Unit-holder
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(To be signed by all unit-holders if mode of holding is joint)

8th floor, E-Core, Solitaire Business Park (formerly Marvel Edge), Viman Nagar, Pune 411014

1800 309 3900 (Toll-free), Fax : 020 - 6767 2550

service@bajajamc.com

https://www.bajajamc.com

ACKNOWLEDGEMENT SLIP

(To be filled by Applicant)

Date

Investors Name

Folio Number

Please retain this Acknowledgement Slip for future reference

Official Acceptance Point Stamp & Sign